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27th June 2022

Deputy Pringle,
Dáil Éireann,
Leinster House
Dublin 2

PQ Ref 25141/22: To ask the Minister for Health when the public can expect a full and complete progress report on the implementation of the National Maternity Strategy 2016-2026 will be published; the breakdown of implementation progress; and the progress that remains outstanding for each individual hospital.

Dear Deputy Pringle,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

In 2017 the National Women and Infant Health Programme (NWIHP) produced a costed and time-bound plan to implement the National Maternity Strategy (NMS). This implementation plan indicated that NWIHP required an additional €72.8m over the 10-year life time of the strategy.

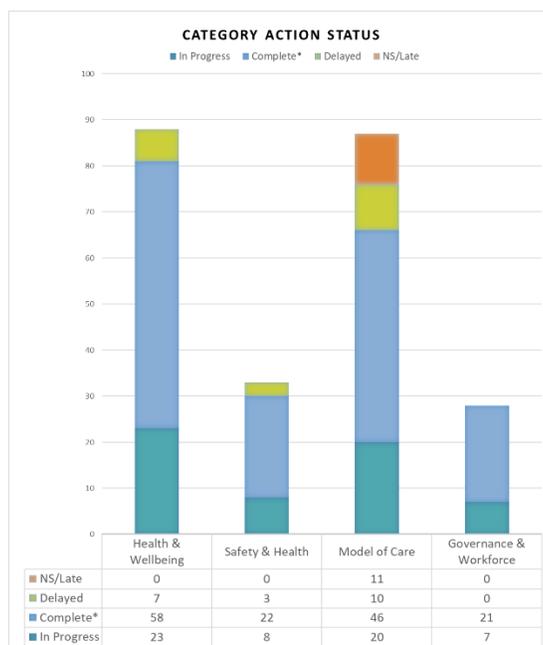
Between 2018 and 2021 NWIHP received €42.2m of service development funding. The table below outlines this funding and the purpose for which it was allocated.

Year	Funding Allocated - In Year & Associated ELS	€ million
2018	Maternity Developmental Funding	12.1
2019	TOP & Related Services Developmental Funding	12
2020	Maternity Developmental Funding	1.5
2020	Fertility Services Developmental Funding	2
2021	Maternity, Gynaecology & Fertility Developmental Funding	12
2021	Women's Health Taskforce - Ambulatory Gynaecology Services	1.4
2021	Women's Health Taskforce - Endometriosis Services	0.64
2021	Women's Health Taskforce - Perinatal Mental Health Services	0.377
2021	Women's Health Taskforce - Specialist Menopause Services	0.2
	Total	42.217

As the table indicates, approximately €19m of the allocation was not specifically targeted for maternity services. However, NWHIP have invested all but €2m of the €42.2m in the 19 maternity units, which has helped to increase the global number of consultant, midwifery and health and social care professional (HSCP) resources in these services and units and as such has a global benefit as the majority of staff will work across both maternity and gynaecology.

In 2022, a further €16m of service development funding was received, with €8.66m of this allocated to the continued implementation of the National Maternity Strategy.

In February 2020 HIQA issued their report into their standards for Better Safer Maternity Care. A recommendation of this report was that the HSE would develop an updated implementation plan that would be time-bound and fully costed. As part of this exercise, NWHIP reviewed the implementation of the NMS. As the table below shows, a significant amount of progress has been made since 2017.



The revised plan developed focuses only on those actions that are not yet complete. Actions that were completed in the period 2016-2020 are not carried forward into the revised plan.

The revised implementation plan has been costed in a similar manner to that used for the 2017 estimate. The cost estimate for 2021 -2026 is an additional €43.7m, which includes 10% provision for non-pay.

The revised estimate would fund an additional 458.5 WTEs, including 64.5 consultants (OBGYN, neonatologists, anaesthesiologists etc.); 240 midwives across all grades; 107 health and social care professionals (mainly social workers, dieticians and physiotherapists); and 47 management administration staff (mainly admin support for maternity hospitals).

The revised implementation plan can be found on the HSE (see link below) and represents the most up to date reported position.

<https://www.hse.ie/eng/about/who/acute-hospitals-division/woman-infants/national-maternity-strategy-revised-implentation-plan.pdf>

I trust this clarifies the matter.

Yours sincerely,



Mary-Jo Biggs, General Manager, National Women and Infants Health Programme