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27<sup>th</sup> February 2023

Deputy Naughton  
Dáil Éireann,  
Leinster House  
Dublin 2

**PQ Ref 5448/23: To ask the Minister for Health the steps taken to date, to expand paediatric gynaecology services and out of hours care in line with the Women's Health Action plan; the timeline and intermediate stages for the delivery of this objective; and if he will make a statement on the matter.**

Dear Deputy Naughton.

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.

The National Model of Care for Paediatric Health Care recommends that all children should be able to access safe, high quality services in an appropriate location, within an appropriate timeframe, irrespective of their geographical location or social background.

The management of young children and adolescents with gynaecological problems requires sensitivity in relation to their specific needs. This includes immediate service provision for acute cases to the more long-term management of congenital reproductive anomalies, disorders of gender development, reproductive endocrinopathies, gender identity, gynaecological malignancies and fertility preservation associated with the treatment of malignancies. Best care is administered by a multidisciplinary team (including gynaecologists, paediatricians, paediatric surgeons, endocrinologists, clinical geneticists and psychologists) to treat the underlying disorder, preserve fertility and future sexual function, and maintain a healthy mental state. This service is best delivered in one specialist centre accepting referrals where appropriate.

In 2021 the National Women and Infants Health Programme sought funding to develop a child and adolescent Specialist Centre service led by consultant gynaecologists with a special interest in child and adolescent gynaecology as envisaged in the Model of Care for Paediatric Health Care. The Specialist Centre service, based at CHI Temple Street University Hospital while awaiting the opening of the new children's hospital, includes a nurse specialist and a psychologist. Children attending the Specialist Centre have access to other CHI specialties such as Urology, General Paediatric Surgery, Plastic Surgery, Genetics and Endocrinology. It also provides 'out of hours' emergency cover for those acute gynaecology cases requiring consultant opinion / input that present to the CHI hospitals' Emergency Departments.

This investment in PAG services resulted in a) the development of a Specialist Centre service with a consultant lead and multi-disciplinary team thus implementing the recommendations of the Model of Care

for Paediatric and Adolescent Gynaecology; and b) the development of a formal 'out of hours' emergency roster that ensures consistently available consultant gynaecologist opinion and, when required, input into the management of emergency child and adolescent gynaecological presentations to CHI hospitals.

In addition this specialist centre is being developed, via the consultant resources, to have strong and structured links to the three Dublin Maternity and Gynaecology Hospitals so that there is a clear pathway of transition for patients from paediatric/adolescent services to adult services.

I trust this clarifies the matter.

Yours sincerely,



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