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01st August 2023

Deputy Nolan
Dáil Éireann,
Leinster House
Dublin 2

PQ Ref 35811/23: To ask the Minister for Health how many new contracts for whole-time equivalents in maternity hospitals have included a responsibility to perform terminations of pregnancy; and if he will make a statement on the matter.

Dear Deputy Nolan

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


As previously stated in the previous Parliamentary Question ref: 12499/23; Section 22(1) of the Act provides, that any medical practitioner, nurse or midwife shall not be obliged to carry out, or to participate in carrying out a termination of pregnancy in accordance with section 9 (risk to life or health), section 11 (condition likely to lead to death of foetus) or section 12 (early pregnancy) to which he or she has a conscientious objection. It would be legally challenging to include mandatory provision of TOP as part of a contract of employment where the primary legislation underpinning the service allows for conscientious objection.

The Consultant Applications Advisory Committee (CAAC) provides independent and objective advice to the HSE on applications for medical Consultants and qualifications for Consultant posts. All Consultant Obstetrician Gynaecologist jobs that are submitted to CAAC are approved by the Clinical Director of NWIHP. This does not occur unless the TOP service is specifically referenced in the business case or descriptor.

Regarding your second query, the 73 posts were approved to support the development and roll out of termination of pregnancy services as part of the various hospitals suite of maternity and gynaecology services. Prior to approving these posts, NWIHP engaged at hospital group, maternity network and local levels to identify key opportunities and challenges with regard to Termination of Pregnancy service provision and to determine how best to proceed with the advancement of Termination of Pregnancy services. Funding was approved on the basis that the recruited personnel would provide or participate in the provision of termination of pregnancy services within the hospital/unit. It would not be practicable or feasible to limit the scope of practice of recruited personnel to TOP only. TOP services sit under the auspices of NWIHP and as such NWIHP holds the maternity networks to account for TOP development funding received.

I trust this clarifies the matter.

Yours sincerely,



Davinia O'Donnell, General Manager, National Women and Infants Health Programme