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Office of Ben O'Sullivan Chief Executive Officer
University Hospital Waterford and Kilcreene Regional Orthopaedic Hospital
HSE Waterford Wexford

19th September 2025

Mr Conor McGuinness TD
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.

PQ 46492 - To ask the Minister for Health if she is aware of the planned discontinuing of coronial post-mortems in University Hospital Waterford, effective from 1 January 2026 and that this will mean that no such post-mortems can then be carried out in the south-east region from that date

Dear Deputy McGuiness

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 November 2024, University Hospital Waterford (UHW) informed the Department of Justice in writing that the Consultant Pathologists at the Hospital would not be in a position to provide coroner requested post-mortems from January 2026.

The Consultant Pathologists are employed by the HSE but provide coroner services as independent contractors to the Department of Justice to maintain the necessary independence of this service from the HSE. The Consultants will continue to provide consented post-mortems for the HSE in accordance with their contracts. The HSE will also continue to provide mortuary facilities and support staff for coronial and state (forensic) post-mortems.

The cessation of the provision of coroner requested post-mortems by hospital pathologists is not unique to University Hospital Waterford. In recent years, sites such as Cork University Hospital, St. James' Hospital, the Mater Hospital, Beaumont Hospital and University Hospital Limerick ceased service provision by their hospital based Consultant Pathologists.

The reasons for cessation are diverse and complex;

- HSE Pathologists are primarily concerned and occupied by diagnostic surgical pathology work in cancer diagnosis and tissue pathology and are struggling to sustain the current commitments to the Coroners Service.
- Hospital pathologists are facing rapidly increasing demand on their diagnostic surgical pathology workloads both in terms of quantity and in terms of complexity.
- There is a global shortage of appropriately qualified pathologists willing to provide autopsy services.
- In addition, there is an increasing recognition that Autopsy Pathology is in itself a distinct specialty, which should be delivered by specialty trained autopsy pathologists.

Consultant Pathologists at UHW currently provide approx. 700 coroner requested post-mortems per year as independent contractors for the Department of Justice. In a recent workforce planning exercise, the Department of Justice in conjunction with the Faculty of Pathology, RCPI have indicated that the coroner's post-mortem workload in UHW requires 4 WTE pathologists dedicated uniquely to this service.

UHW is currently significantly understaffed in terms of Consultant Pathologists. Current HSE diagnostic workload(s) indicate a need for approx. 18 WTE surgical pathologists. This workload is growing at approx. 7-9% per annum which will require ongoing additional posts. The laboratory currently has just 6 consultants in post with 3 more posts in recruitment. The hospital has been unsuccessful in recruiting Consultants on two previous occasions, largely because of the expected coroner's post-mortem commitments on top of an extremely busy diagnostic service. This position is unsustainable and HSE Consultants no longer have the capacity to guarantee a service to the coroners.

Coroner's post-mortems will either need to be provided elsewhere or appropriately qualified Consultants will need to be sourced by the Department of Justice to continue to provide this service at UHW. The Department of Justice were informed that some individual consultants at the hospital may be willing to carry out a limited number of coroners post-mortems for teaching and training purposes but there has been no further engagement or progress on the issue.

It is important to recognise that responsibility for provision of Coroner services lies with the Department of Justice and not the HSE. The HSE have not withdrawn this service and continue to make facilities and support staff available to the coroners. The issue is the availability and capacity of Consultant Pathologists to continue to undertake this work on top of already extremely onerous workloads and conditions. As previously communicated to the Department of Justice both Management and Consultants at UHW remain available for discussion and advice on the matter.

I trust the above is satisfactory but if you have any queries please do not hesitate to contact me.

Yours sincerely,

Ben O' Sullivan
Chief Executive Officer
University Hospital Waterford
Kilcreene Regional Orthopaedic Hospital