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NWIHP NMS Implementation Plan 2021-2026

Theme / Strategic Priority	Sub Category	Related Workstream /NMS Recommendation	Key Developments /Actions <small>^action has been amended</small>	Associated NMS Recommendations	NMS/HIQA Recommendation	Action Owner	2021				2022				2023				2024				2025				2026				Status				
							Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4					
National Maternity Strategy - Health and Wellbeing	H&W Maternity Policy & Service Delivery	Ensure that a health and wellbeing approach underpins both maternity policy and service delivery.	Support policy alignment with other relevant strategies.	1.1	NMS	DoH, NWIHP	Annual / Recurring Activity - Complete for current reporting period																												Complete*
	H&W Education	Engage with the education sector to ensure that a proactive approach to health and wellbeing begins early during school years.	Strengthen collaboration between the Health and Wellbeing Programme and the Department of Education and Skills, in partnership with the HSE and PDST (Professional Development Service for Teachers).	2.1	NMS	DOH, HSE National Health & Wellbeing	In Progress																												In Progress
			Streamline and simplify current structures for the promotion of health and wellbeing in schools, including improving service alignment to support the delivery of SPHE and ensure the alignment of the Health Promoting Schools model with the Junior Cycle Wellbeing Guidelines.	2.2	NMS	DOH, HSE National Health & Wellbeing	In Progress																												In Progress
	Breastfeeding Action Plan	The Breastfeeding Action Plan is resourced and implemented.	Implement the HSE Infant Feeding Policy for Maternity and Neonatal Services.	4.5	NMS	NWIHP, National HSE Healthy Childhood Programme	In Progress																												In Progress
			Complete an Annual Report on implementation of the Breastfeeding Action Plan.	4.6	NMS	National HSE Healthy Childhood Programme	Annual / Recurring Activity - Complete for current reporting period																												Complete*
	Holistic Antenatal Care	Antenatal care encompasses a holistic approach to the woman's healthcare needs including her physical, social, lifestyle and mental health needs.	Roll out a MECC training programme for all staff in maternity hospitals/units.	5.2	NMS	HSE National Health & Wellbeing , ONMSD	Yet to Start																												Yet to Start
			Engage with Primary Care to see how the MECC training programme can be provided to GPs and PHNs with a view to ensuring consistency of approach across the shared model of care.	5.3	NMS	HSE National Health & Wellbeing , ONMSD	Yet to Start																												Yet to Start
			Develop and roll out a standardised education programme for women and staff in each maternity network. The education programme will be developed in conjunction with the Nurture Programme.	5.4	NMS	NWIHP, HSE Nurture Programme. ONMSD	In Progress																												In Progress
			Prepare and submit a business case for a minimum of one dedicated social worker for each maternity unit.	5.5	NMS	NWIHP	In Progress																												In Progress
	Holistic Postnatal Care	Postnatal care promotes health and wellbeing for the new mother and baby, supports breastfeeding and identifies and supports those at risk with a particular emphasis on mental health.	As part of MECC training (5.2) all staff will receive training in promoting health and wellbeing as part of postnatal care.	6.1	NMS	HSE National Health & Wellbeing , ONMSD	Yet to Start																												Yet to Start
			Establish a working group reflecting public health nursing, primary care and midwifery to ensure a coordinated approach to postnatal care. This approach will build on the experience of previous and existing collaborative arrangements for such care and will recognise regional variations.	6.2	NMS	NWIHP, HSE Nurture Programme. ONMSD	Complete																												Complete
			Mental health covered in actions 19 - 25.	6.3	NMS	NWIHP, HSE Nurture Programme. ONMSD	In Progress																												In Progress

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							2021				2022				2023				2024				2025					2026							
			Build capacity by appointing a minimum of one CMS in lactation for each maternity hospital/unit. The CMS in lactation will ensure that the provision of breast feeding advice and support ante and post-natally, occurs in hospital and community settings in line with the new model of care.	11.1	NMS	NWIHP																					Complete								
	Breastfeeding Supports	Improved support for breastfeeding is provided both within the hospital and the community.	The role of the CMS in lactation will be to educate midwives across all departments and the community to promote and support breastfeeding. This role also involves auditing, data collection and research into breastfeeding.	11.2*	NMS	NWIHP, Maternity Networks	Annual / Recurring Activity - Complete for current reporting period																												Complete*
			NWIHP will work with the Health and Wellbeing Directorate (health promotion and improvement) and Primary Care (GPs and public health nurses) to ensure that breastfeeding support spans the hospital/community continuum of care.	11.3	NMS	NWIHP, HSE Health and Wellbeing																						In Progress							
			^Capture breastfeeding rates at discharges, and as the new model of care is implemented, throughout the post-discharge phase. Breastfeeding rates will form part of the quarterly review meetings with the NWIHP. The captured data will form part of the Annual Report (4.6).	11.4	NMS	NWIHP, HSE Health and Wellbeing	Annual / Recurring Activity - Complete for current reporting period																												Complete*
	WHO Baby Friendly Health Initiative		All maternity hospitals/units comply with the WHO Baby Friendly Health Initiative.	Support the implementation of the WHO/UNICEF 10 Steps to Successful Breastfeeding using a model suitable for the promotion and support of breastfeeding in Ireland, in conjunction with the health and wellbeing (health promotion and improvement, public health) directorate. This approach will also examine the option of an all-island approach.	12.1*	NMS	NWIHP, HSE Health and Wellbeing	Annual / Recurring Activity - Complete for current reporting period																											
	Promoting Breastfeeding	Breastfeeding promotion campaigns are tailored and targeted to help the wider community to play their role in improving Ireland's breastfeeding initiation and duration rates.	Appoint champions as spokespeople for breastfeeding, in conjunction with the Health and Wellbeing Directorate, and community and voluntary organisations. The champions will form part of a national campaign aimed at raising awareness.	13.1*	NMS	NWIHP, HSE Health and Wellbeing	Annual / Recurring Activity - Complete for current reporting period																												Complete*
			Develop new initiatives to support breastfeeding across the new model of care, in conjunction with the health and well-being directorate (health promotion and improvement). This will include lactation consultants, public health nurses and general practice.	13.2	NMS	NWIHP, HSE Health and Wellbeing																						In Progress							
			Adopt a targeted approach to support breastfeeding with GPs, public health nurses and across the antenatal and postnatal journey for women in the community, in conjunction with the Primary Care Directorate and community and voluntary organisations.	13.3	NMS	Primary Care, HSE Health and Wellbeing and NWIHP																						In Progress							
			Develop a hospital/unit and community specific plan for improving breastfeeding rates, in line with the national approach and taking account of the specific challenges in a demographic group within the network.	13.4	NMS	NWIHP, HSE Health and Wellbeing																						Complete							
		Maternity hospitals/units are tobacco-free campuses and have an on-site smoking cessation service available for pregnant women.	Capture data, at maternity network level, on the number of interventions with women who smoke, and what strategies are most effective, in conjunction with the Health and Wellbeing (health promotion and improvement, public health) Directorate	14.4	NMS	NWIHP, HSE Health and Wellbeing (Smoking cessation unit)																					In Progress								

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Addiction Supports	Midwives and other frontline health care professionals have formalised and documented training in smoking cessation.	^All staff will receive training in identifying, raising and discussing smoking cessation with women at antenatal visits.	15.1*	NMS	Maternity Networks	Annual / Recurring Activity - Complete for current reporting period																												Complete*				
						^Maternity Networks to monitor MECC training register to ensure that all staff receive brief intervention training in line with the roll out of MECC.	15.2	NMS	HSE Health and Wellbeing	[Green bars in Q2, Q3, Q4 2022]																												Yet to Start
		^All staff will receive training in identifying, raising and discussing alcohol consumption with women at antenatal visits.	16.1*	NMS	Maternity Networks					Annual / Recurring Activity - Complete for current reporting period																												Complete*
										Ensure that all elements of this training are incorporated into antenatal visits, regardless of the location of the visit.	16.2*	NMS	Maternity Networks	Annual / Recurring Activity - Complete for current reporting period																								
		Ensure that each maternity hospital/unit provides clear information that is based on best available evidence about the risks of alcohol consumption and substance misuse. In cases where alcohol consumption is, or may be an issue, a referral is made to the social work team (recommendation 5.5).	16.3*	NMS	Maternity Networks	Annual / Recurring Activity - Complete for current reporting period																												Complete*				
	A consistent approach to informing women about the risks of alcohol consumption during pregnancy is developed.					Develop a dedicated pathway via a social worker (referred to in 5.5) either at hospital/unit level or maternity network for women who are identified as needing further support.	17.1	NMS	Maternity Networks	[Green bars in Q1-Q4 2021, Q1-Q4 2022]																												In Progress
		^Revise National Guideline On Alcohol Use in Pregnancy / Foetal Alcohol Syndrome.	17.2	NMS	NWIHP					[Green bars in Q2, Q3, Q4 2022]																												Yet to Start
						Access to mental health supports are improved to ensure appropriate care can be provided in a timely fashion.	19.8	NMS	Mental Health Directorate	[Green bars in Q2, Q3, Q4 2022]																												Yet to Start
										All health care professionals involved in antenatal and postnatal care are trained to identify women at risk of developing or experiencing emotional or mental health difficulties, including an exacerbation of previous mental health issues, in the Perinatal period.	20.1*	NMS	Maternity Networks	Annual / Recurring Activity - Complete for current reporting period																								
		Mother-baby bonding is facilitated and supported at all times, and every effort will be made to keep the mother and baby together, if clinically appropriate	23.1*	NMS	Maternity Networks	Annual / Recurring Activity - Complete for current reporting period																												Complete*				
Mental Health Supports	Maternity networks will ensure that all hospitals/units appoint a Clinical Specialist in Bereavement to support women and families following pregnancy loss, perinatal death or pregnancy complications.					25.3	NMS	NWIHP, Maternity Networks	[Green bars in Q1, Q2 2021]																												Complete	

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							2021				2022				2023				2024				2025					2026			
		Additional support is available for women who have experienced traumatic birth or the loss of a baby.	Address any outstanding actions with the maternity networks, following receipt of quarterly reports from the implementation group. Reporting frequency will change once implementation has been established.	25.4	NMS	NWIHP, Maternity Networks																					In Progress				
			Ensure that all staff are trained in open disclosure, and that all relevant information is shared with the woman and her family.	25.5*	NMS	HSE Acute Operations	Annual / Recurring Activity - Complete for current reporting period																								Complete*
			Each maternity network will confirm the pathway for women who experience a traumatic birth.	25.6	NMS	Maternity Networks																								In Progress	
			Make referrals to CMS in mental health as necessary, with care continuing post discharge.	25.7	NMS	Maternity Networks																								Complete	
			Ensure all staff have training, knowledge of the importance of obtaining consent. Consent is giving of permission or agreement of intervention.	25.8	NMS	Maternity Networks	Annual / Recurring Activity - Complete for current reporting period																								Complete*
National Maternity Strategy - Safety & Quality	Clinical Guidelines - Maternity & Gynaecology	The NCEC prioritises and quality assures National Clinical Audit and a set of National Clinical Guidelines for maternity services guidelines on intrapartum care are a priority.	^Quality assure and publish National Clinical Guidelines.	28.4	NMS	NWIHP																					In Progress				
			^Develop a central repository for all Maternity and Gynae clinical guidelines and ensure guidelines are available to the maternity networks in a standardised format.	29.1	NMS	NWIHP																							In Progress		
			Maternity networks will implement all guidelines as defined in 29.1 and will audit compliance in each hospital/unit.	29.2	NMS	Maternity Networks																								In Progress	
			In line with national policy, develop a process whereby all incidents of maternal death, intrapartum death or hypoxic ischemic encephalopathy are notified to the NWIHP CD as soon as practicable. The NWIHP will then determine if the incident requires a review and the level of the review. If a review is required, reviewers from a panel of independent experts, comprising obstetricians, midwives, anaesthetists and neonatologists, will be selected to carry out an independent review of the incident. The review report, which will be completed within an agreed timeframe, will be provided to the local hospital/unit, the hospital group and the NWIHP. Learning from such reviews will be addressed as outlined in 29.8. All direct maternal deaths will be subject to a review external to the maternity network/hospital group.	29.6	NMS	NWIHP																								In Progress	

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Safety & Quality Capacity		Safety and quality capacity is developed across the maternity service to ensure that each network and service has a defined patient safety and quality operating framework.	Establish a dedicated Serious Incident Management Forum for maternity. This team, comprising senior clinical personnel from all maternity hospitals/units within the hospital group, and supported by a dedicated Quality and Risk Manager, will review every serious incident/SRE report in the month, and determine whether a review is required. If a review is required, the team will determine the nature of the review. Each maternity network SIMF will have a senior representative from another maternity network providing an external perspective. The SIMF in each maternity network will meet monthly, and their reviews will be discussed at the monthly NWIHP meetings.	29.7	NMS	Maternity Networks																									In Progress
			^NWIHP will establish a central repository for learning from severe adverse events (Linked to action 29.6)	29.8	NMS	NWIHP																									In Progress
			Implement HIQA National Standards for the Conduct of Reviews of Patient Safety Incidents.	29.10	NMS	Maternity Networks																									In Progress
Clinical Audit		Clinical leadership, support and resources are provided for the development and implementation of National Clinical Guidelines and National Clinical Audit.	^Secure resources for implementation of National Clinical Guidelines.	31.2	NMS	NWIHP																									Yet to Start
			Establish a clinical audit function for maternity services	31.3	NMS	NWIHP, Maternity Networks																									Yet to Start
Research Strategy for Irish Maternity Services		Building upon existing HRB funded research programmes, the evidence base for safe, quality maternity care is expanded, with promotion of research for maternity services and applied clinical research in obstetrics, midwifery, and health and social care professional fields for maternity patients.	Identify and prioritise important research questions within Irish maternity services from the perspectives of key stakeholders including women, clinicians, funders and policy makers, researchers and educators.	32.1	NMS	NWIHP, NPEC																									In Progress
			Develop a research strategy for Irish maternity services based on the findings of the prioritisation work.	32.2	NMS	NWIHP, NPEC																									Yet to Start
National Maternity Strategy - Model of Care	Integrated Maternity Services	Maternity services are integrated with a multidisciplinary and evidence-based approach across all care settings.	^As per action 29.2	33.1	NMS	NWIHP																									Yet to Start

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							2021				2022				2023				2024				2025					2026			
	Obstetric Emergencies	All birth centres have an emergency team available to provide an immediate response to obstetric emergencies	Maternity networks will confirm the emergency response pathway in each of their hospitals/units to the NWIHP.	47.1	NMS & HIQA	Maternity Networks																					In Progress				
			Maternity networks will develop a register of the emergency response pathway, and escalation process for their maternity hospitals/units.	47.2	NMS & HIQA	Maternity Networks																							In Progress		
	Maternity Infrastructure	For all care pathways, the physical infrastructure is of a high standard, providing a calm, relaxing and homely environment that will support a physiological process and respect the woman's dignity and need for privacy during childbirth; theatres will be baby friendly. Modern facilities including, where appropriate, birthing aids and birthing pools will be available.	Develop a plan to address the environmental factors in all 19 maternity hospitals/units to inform the capital plan, including development of Alongside Birthing Units.	48.2 H.2.	NMS & HIQA	NWIHP																						In Progress			
			Maternity networks will develop a prioritised multi-year plan, informed by 48.2, to ensure that all maternity hospitals/units within the network have an appropriate environment for each care pathway.	48.3 H.2.	NMS & HIQA	Maternity Networks																								Yet to Start	
	Bereavement Standards	The forthcoming HSE standards for Bereavement Care following Pregnancy Loss and Perinatal Death are implemented nationally.	^Review progress on standards implementation at quarterly review meetings with maternity networks (action 25.4 refers).	50.1*	NMS	NWIHP	Annual / Recurring Activity - Complete for current reporting period																								Complete*
	EPAUs	All women have easy and appropriate access, in early pregnancy, to both emergency obstetric care and well-resourced Early Pregnancy Assessment Units, in all maternity units.	Establish a multi-disciplinary group to develop minimum standards for Early Pregnancy Assessment Units (EPAUs).	51.1	NMS	NWIHP, Maternity Networks																						Yet to Start			
			Request the maternity networks to review the Early Pregnancy Assessment Units in each maternity hospital/unit in their network in line with the newly developed standards (action 51.1).	51.2	NMS	Maternity Networks																							Yet to Start		
			Prepare and submit a revenue and capital plan (will link to 43.2) to address any capacity requirements identified between the standards for EPAU, and the outcome from 51.2.	51.3	NMS	NWIHP																							Yet to Start		
	Home Birth Services	Home Birth services, integrated within the maternity network, are available in the Supported Care pathway, with care from the lead healthcare professional and the hospital-based community midwifery team, and in line with national standards.	Establish a stakeholder engagement process to inform the provision of home birth services as part of the new model of care in line with guidelines to be developed under 33.1. This process will aid the design of the home birth service within the supported care pathway.	52.1	NMS	ONMSD, Community Operations, Acute Operations, NWIHP																						In Progress			
			Integrate existing home birth services into the newly established supported care pathway, informed by the output of 52.1. In developing the plan, the networks will also assess the level of demand for home birth services.	52.2	NMS	Maternity Networks, Acute Operations																								In Progress	
			Review current access arrangement in conjunction with the neonatal/paediatric clinical care programme and neonatal retrieval service.	53.1	NMS	Neonatal Clinical Care Programme, NWIHP																					Complete				

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	Neonatal Retrieval Services and the Clinically Deteriorating Woman	Retrieval services for neonates and the clinically deteriorating woman, and in utero transfer services in the maternal and/or foetal interest, are available for timely and appropriate transfer; retro services to return neonates to their local hospital/unit will also be available.	Define a pathway for women with medical/surgical conditions (example cardiology, cystic fibrosis etc.) during pregnancy. The pathway will be within hospital group, where possible, but will align to agreed tertiary referral pathways.	53.5	NMS	Maternity Networks																									In Progress				
			In conjunction with the work done by CCP critical care, define the pathway for clinically deteriorating women, within hospital group where appropriate. The development of the pathways within each maternity network will involve the relevant medical/surgical specialists from the tertiary referral hospital. This pathway will align with 53.5.	53.6	NMS	Maternity Networks																									In Progress				
			^Develop a plan for the transfer of neonates, including a repatriation service, and this will be disseminated within the network. The agreed pathways will be highlighted on the comprehensive online resource (action 8).	53.7	NMS	Neonatal Clinical Care Programme, NWIHP																									Complete				
	Paediatric Screening Services	A national hip screening programme and a national screening service for retinopathy of prematurity is developed.	Develop screening programmes for hip, and retinopathy in conjunction with the clinical programme for paediatrics and neonatology.	54.1	NMS	Integrated Care Programme for Children																									In Progress				
	Antenatal Education	Comprehensive and standardised antenatal education is provided to prepare women for any complications that might arise and for the transition to motherhood.	Action 5.4 will develop the content required to educate women about potential complications of pregnancy, whilst encouraging the normalisation of birth. The content will reflect the services available in each location, as well as generic information.	55.1	NMS	Health and Wellbeing, Nurture Programme, NWIHP																									In Progress				
			NWIHP and Nurture will develop an antenatal education programme, in consultation with ONMSD and service users, that provides easy to understand information, in line with action 5.4.	55.2	NMS	Health and Wellbeing, Nurture Programme, NWIHP																									In Progress				
			Each maternity network will develop a plan to ensure that all women accessing maternity services within their network, are offered access to the education programme developed at 55.2.	55.3	NMS	Maternity Networks																									Yet to Start				
			NWIHP will work with Primary Care to ensure that the education programme (55.2) is provided to women throughout the appropriate primary care settings.	55.4	NMS	Maternity Networks, NWIHP																									Yet to Start				
	Enhanced Maternity Services	Each maternity network scopes the necessity for the development of enhanced services at network level including dietetics, Perinatal psychiatry, psychology, Perinatal pathology, endocrinology, drug liaison, physiotherapy and medical social work. Access to microbiology, haematology and laboratory services should be standardised.	Actions in the implementation plan around developing diabetes services, perineal clinics, drug liaison specialists and other initiatives will inform the submission to future Estimates cycles.	56.2*	NMS	CCPs, NWIHP, Addiction Services	Annual / Recurring Activity - Complete for current reporting period																												Complete*
			Each maternity network will develop a plan, reviewing demand and capacity in relation to microbiology, haematology and laboratory services and proposing maternity network solutions to each service.	56.3	NMS	Maternity Networks																													Yet to Start
		Each maternity network will develop a plan to create a specialist perineal clinic at network level following a needs assessment.	57.1	NMS	Maternity Networks, NWIHP																									In Progress					

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Maternity & Infant Care Scheme	Perineal Clinics	A specialised Perineal Clinic is available within each maternity network, for the specialist assessment and treatment of women with obstetric anal sphincter injury. Onward referral pathways will be in place to specialist pelvic floor /colo-rectal clinics, with a full multidisciplinary team, where necessary.	^NWIHP will assess the resource requirement from the plans, and make the necessary submission to the Estimates.	57.2	NMS	NWIHP																									Yet to Start				
			NWIHP will work with the Acute Hospital Division and Group CEOs, to develop referrals to tertiary centres from the specialist perineal clinics. Where appropriate referrals will remain within the hospital group.	57.3	NMS	NWIHP, Acute Operations, Maternity Networks																									Yet to Start				
			Each maternity network will map the pathways for women, requiring specialised perineal care, at local, group and tertiary level. Information will also be on NWIHP website (action 8).	57.4	NMS	Maternity Networks																									Yet to Start				
	HIQA Standards	HIQA Standards for Maternity Services, when finalised, are implemented.	NWIHP will review performance of the maternity networks, against HIQA standards at monthly review meetings.	60.2*	NMS	NWIHP	Annual / Recurring Activity - Complete for current reporting period																												Complete*
			Women continue to have the option to receive their antenatal care as part of a shared model of care with the GP under the Maternity and Infant Care Scheme and will be encouraged to avail of this scheme.	NWIHP will review the Mother and Infant Care Scheme, in conjunction with the Primary Care Directorate.	62.1	NMS	Primary Care, NWIHP																									Yet to Start			
				HSE Primary Care will engage with ICGP, as required, on any proposed changes to the scheme.	62.2	NMS	Primary Care																									Yet to Start			
				Once any revisions to the scheme are in place, access to the scheme will form part of the NWIHP information campaign (actions 8.5 and 34.2).	62.3	NMS	NWIHP																									Yet to Start			
				As at 62.1.	63.1	NMS	NWIHP																									Yet to Start			
				Any review of the Maternity and Infant Care Scheme considers the feasibility of extending coverage to include a preconception consultation and postnatal check at three to four months and/or additional postnatal GP visits where further pregnancy related needs have been identified	64.1	NMS	Primary Care, NWIHP																									Yet to Start			
				The reimbursement of GPs under the Maternity and Infant Care Scheme is centralised in the Primary Care Reimbursement Service in line with other fee payments under the funded health sector contracted schemes.	65.1	NMS	PCRS																									Yet to Start			
NWIHP will request the Primary Care Directorate to capture and share an agreed dataset on the Mother and Infant Care Scheme.				66.1	NMS	Primary Care																									Yet to Start				
		A detailed national standardised dataset is introduced, to support the effective monitoring and evaluation of the Maternity and Infant Care Scheme.	Based on the submitted data, NWIHP will establish a stakeholder forum to assess the effectiveness of the scheme, from a mother and infants perspective.	66.2	NMS	NWIHP																									Yet to Start				

Complete	Complete - No Further Action Required
Complete*	Annual/Reoccurring Activity - Complete for current reporting period
In Progress	Work Commenced - On Track
Yet to start	Work Not Yet Commenced

NWIHP NMS Implementation Plan 2021-2026

Theme / Strategic Priority	Sub Category	Related Workstream /NMS Recommendation	Key Developments /Actions <small>^action has been amended</small>	Associated NMS Recommendations	NMS/HIQA Recommendation	Action Owner	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Status								
							2021				2022				2023				2024				2025					2026							
			Ensure that multi-disciplinary training takes place at each hospital/unit within their network.	72.4*	NMS	Maternity Networks	Annual / Recurring Activity - Complete for current reporting period																												Complete*
			Consider the potential for rotation of staff within their networks. The benefits of this approach will be considered in the context of HR challenges.	72.5	NMS	Maternity Networks, NWIHP																						In Progress							
	NWIHP Annual Report	Submit an annual report to the Minister on the progress of the implementation of this Strategy.	Submit annual report to Minister by end April each year.	75.1*	NMS	NWIHP	Annual / Recurring Activity - Complete for current reporting period																												Complete*
		Publish the annual progress report on the Department of Health's website.	Publish annual report on DoH website.	76.1*	NMS	DoH	Annual / Recurring Activity - Complete for current reporting period																												Complete*
	Estimates	Commit to providing annual development funding for this Strategy.	Develop a detailed Estimates submission.	77.1	NMS	NWIHP	Annual / Recurring Activity - Complete for current reporting period																												Complete*