

Paediatric Services at Daisy Hill Hospital

Daisy Hill Hospital offers a range of acute paediatric services, with a very compassionate, highly experienced and enthusiastic team, always striving to develop and expand services for children, young people and their families.

Daisy Children and Young People's Unit

Guidance on acute paediatric services recommends that young people are cared for in a dedicated child friendly environment.

The development of the Daisy Children and Young People's Unit at Daisy Hill alongside the Blossom Centre at Craigavon, was part of our ambitious £14.5million Changing for Children strategy to modernise paediatric care across the Southern Trust in 2017/2018.

The strategy saw the entire sixth floor of Daisy Hill Hospital, transformed into a dedicated paediatric area. The Daisy Children and Young People's Unit includes a child friendly state of the art elective theatre suite with a six bedded recovery area; 13 inpatient beds including a negative pressure room; and four short stay beds for the increasing number of patients who can receive treatment that does not require an overnight stay. It also has a parents' room with shower facilities and a playroom with sensory equipment.

Infants and children can be referred to the Short Stay paediatric Ambulatory Unit by their GP or health visitor in the community. This avoids children having to attend the emergency department, they can be assessed, treated and undergo investigations while in that department, promoting a more efficient and wholistic service for children and their families and thus avoiding a full inpatient admission.

Paediatric Surgery

The dedicated, state of the art paediatric surgery theatre on the sixth floor undertakes ENT and dental surgery, co-located beside a six bedded ward area for recovery.

We have a really enthusiastic and committed surgical team, continually striving to improve and develop services and keen to and do work with colleagues regionally, as part of the transformation agenda, to tackle lengthy waiting lists across Northern Ireland. We have elective paediatric surgery lists five days per week, which includes a 2-day paediatric dental surgery list.

General paediatric surgery is performed by adult surgeons supported by a surgeon from RBHSC who has provided invaluable support and is a template for future development which this Trust is very enthusiastic about. For general and ENT elective and dental surgery there is an average of 5 to 6 cases per day.

Significant work has progressed over the past 2 years, including regional support and cross Directorate collaboration as the Trust works on recovery of Elective surgery which was significantly hampered to the point of standstill during and in the post COVID aftermath.

[Daisy Hill paediatric theatres back in business | Southern Health & Social Care Trust](#)

Cross border dental

Work is ongoing to explore the development of a cross-border pilot scheme for dental surgery at Daisy Hill Hospital via CAWT. Further discussions have been planned with the Trust's Senior Leadership Team, Contracts and Finance Team with a proposed commencement date of January 2026.

Special Care Baby Unit

Located beside delivery suite on the ground floor, the Special Care Baby Unit (SCBU) cares for babies born prematurely (above 34 weeks gestation) or who need extra support.

With 6 cots, the Unit works as part of a neonatal network, with the Neonatal Unit at CAH, Paediatric Intensive Care, RVH and hospitals across the region to ensure that all babies get the right level of support.

Funding to the value of approximately £400k has been secured and allocated to develop a new family room for SCBU, to allow parents space to rest, change or prepare feeds during their time in the unit and to facilitate breast feeding mothers. The room is planned to be complete by March 2026.

This is a very welcome development and is in response to what our staff and service users identified as a need

Children and Young People's Outpatients

The dedicated outpatient centre for children and young people opened in Clanrye House (adjacent to the main Hospital building) in 2021 as the final phase of the Changing for Children strategy at Daisy Hill Hospital.

The £800,000 development hosts a wide range of general and specialist paediatric clinics, for both acute, community and Allied Health Professional services.

The centre includes a modern reception with waiting area which can also be used as a conference or training space; eight clinical rooms (one with a hoist); a non-clinical consulting room; treatment room; growth monitoring room; utility and staff rooms. It also has a changing area, toilet/shower for anyone with a disability in the area to avail of.

Cross border cardiology

In May 2020, the Southern Trust was appointed as one of five regional paediatric centres across Ireland, as part of the All-Island Congenital Heart Disease Network. The centres provide cardiac services for children and families closer to home, avoiding the need to travel to Dublin or Belfast unless necessary.

Dr Sinead Callaghan, Consultant Paediatrician with special expertise in Paediatric Cardiology and her team have been running weekly clinics from the Blossom Children's Centre at Craigavon Hospital and in July 2023 were delighted to extend their service to Daisy Hill.

The clinic runs for a full day each month from Clanrye House for children with a range of heart conditions.

They work closely with colleagues in Belfast and Dublin to assess, review and manage infants and children with potential or confirmed congenital heart disease.

The Trust is proud of Paediatric services located in Daisy Hill hospital and is committed to exploring all opportunities to meet the needs of relevant children and families in the greater Newry area and beyond.

Integrated Maternity & Women's Health Services

Support & Intervention Update

Following escalation of both midwifery and obstetric medical staffing concerns as a consequence of chronic staffing shortages (primarily on the Daisy Hill site), the Trust were placed on the Support and Intervention Framework (SIF) at a level 4 on 13th November 2024.

The Trust established a formal project structure early in the process and has maintained regular touchpoint meetings with both SPPG and PHA colleagues to ensure issues are escalated, discussed and action plans progressed.

The Trust SIF level was de-escalated to level 3 in mid-January 2025 in recognition of the stable project structure, management arrangements and progress to stabilise the obstetric and gynaecology service in the immediate term. The Trust was further de-escalated to level 2 in April 2025, again in recognition of further stabilisation of the medical workforce.

Effective from the 5th of December 2025, the Trust has been de-escalated to level 1. It is important to note the de-escalation is in response to the overall management of the difficulties, associated planning and focus on business continuity and safety as demonstrated by the Trust to the Department of Health.

However, it is acknowledged by the Trust and the Department of Health that the medical workforce (particularly Obstetrics), primarily in Daisy Hill, remains in a highly fragile state. The Obstetric service remains highly reliant on short term locum consultants as a consequence of an inability to attract substantive Consultants to vacant posts. The Trust continues to explore all opportunities to recruit, however this position is not likely to change in the current environment. It is accepted by the commissioner and the Department that the Trust has demonstrated strong control and management of the situation, justifying the de-escalation. It is accepted by the commissioner and the Department that the Trust has demonstrated strong control and management of the situation, justifying the de-escalation.

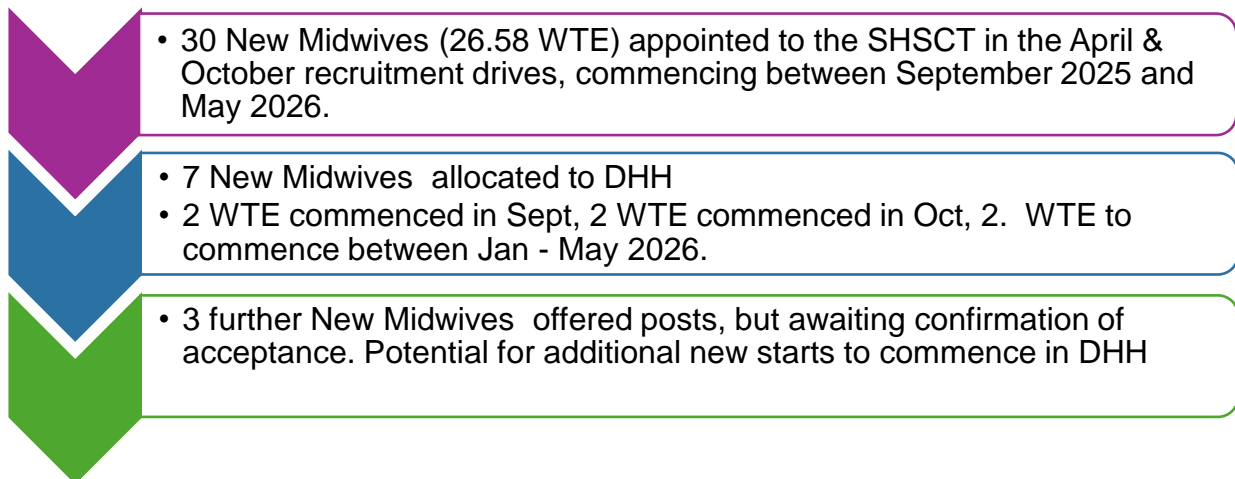
A Trust business continuity plan has been developed and agreed internally within the Trust (and with the Department of Health) for implementation should a significant service deterioration take place presenting a risk to the safety of women and infants. The Trust is working to mitigate any such requirement but also respects the need for clear planning and documentation to support any decision to respond safely to an unplanned change to service provision.

The Trust is committed to assurance that any requirement to implement a consolidation of service provision as a temporary measure will be managed carefully, sensitively and in a well-planned process. The focus will always be on safety and maternal and infant wellbeing.

Midwifery Workforce

As of November 2025, the midwifery workforce across the Trust stands at 181.28 WTE, with 50.05 WTE midwives based at the Daisy Hill Hospital (DHH) site and 8.42 WTE in the Newry & Mourne Community area. The Trust has achieved notable success in its midwifery recruitment efforts, reflecting dedication and strategic focus of the teams involved. There has been a strong focus on securing new starts, particularly in the context of increasing competition across the region.

Since April 2025, the Clinical Skills Midwife has played a pivotal role in engaging with successful candidates by sending personal greeting cards and maintaining monthly contact. This approach has helped to build early relationships, foster a sense of belonging, and keep candidates informed with relevant updates, further strengthening the Trust's recruitment strategy. This will be further reinforced with the recent appointment of a second Clinical Skills Midwife to support new staff joining the service.



As a result, the DHH midwifery team has moved beyond the stabilisation phase and is now well-positioned to contribute to wider service development initiatives.

Notably, Daisy Hill Hospital currently maintains a full staffing compliment, with no recorded vacancies and as of November 2025 has an over-compliment of approximately 2 whole-time equivalents (WTE) against the current funded staffing level.

What is encouraging is that the overall trend for sickness is decreasing, with 10.16 WTE remaining off work across the Service, which equates to 5% of staff (Trust rate is 6.7%).

Whilst the midwifery workforce is now in a much stronger and more resilient position than it was 12 months ago, we as Trust remain committed to maintaining this progress through proactive and responsive support. We recognise that workforce challenges can emerge unexpectedly, and therefore have robust measures in place to identify, address, and resolve any issues swiftly

and effectively. This includes ongoing workforce monitoring, strengthened leadership structures, and clear escalation pathways to ensure staff feel supported and that service continuity is always safeguarded.

Medical Workforce

The Trust's Obstetric and Gynaecology medical workforce is currently under considerable pressure, with the Daisy Hill Hospital (DHH) site facing particularly fragile and complex challenges. It is both recognised and deeply appreciated that many medical colleagues consistently work beyond their contracted job plans to sustain safe service delivery.

The DHH consultant model is built around 8 WTE posts; however, despite sustained recruitment efforts over the past six years, including international outreach, persistent gaps remain due to long term sickness, retirements, and unfilled vacancies. At present, the site operates with 6 substantive consultants and 2 long-term locums to maintain a 1:8 rota. This position is further destabilised by the recent resignation of a consultant obstetrician and gynaecologist (to return to his country of origin), which will reduce the substantive team to 5 once the notice period concludes at the end of January.

Consequently, the service is increasingly reliant on high-cost locums, and the available pool of suitably skilled individuals, particularly those with fetal biometry scanning competencies, is extremely limited. The Trust is actively progressing recruitment, with one post due to be advertised imminently, and continues to take targeted actions to stabilise and support the service during this critical period.

Elective Activity

During the COVID-19 pandemic, a strategic decision was made to relocate a proportion of elective Caesarean sections births to Daisy Hill Hospital (DHH), with procedures scheduled across Tuesday, Wednesday, and Thursday each week. Consultant support from Craigavon Area Hospital (CAH) was provided for the Tuesday and Thursday sessions to ensure safe and consistent cover.

In response to ongoing fragility within the medical and midwifery workforce, alongside limited access to several specialist services at Daisy Hill Hospital (DHH), a comprehensive risk stratification process has been developed. This structured approach enables consistent assessment of clinical risk and ensures that care is directed to the most appropriate setting. As a result, DHH has been redefined as a routine birth and maternity unit, with high-risk cases now being safely redirected to Craigavon Area Hospital (CAH), where the necessary specialist support is available. This decision has been driven solely by our unwavering commitment to patient safety, ensuring that all women and babies receive the safest, most appropriate care based on their individual needs.

A consequence of this is that the number of women eligible to (CS) birth at DHH has declined, resulting in frequent underutilisation of the full 6-session allocation. In response, a proposal paper has been developed to pilot the redirection of one dedicated elective Caesarean list to CAH, where demand consistently exceeds capacity, and the session could be reliably filled.

This approach not only streamlines service delivery and optimises resource use across both sites but also creates valuable capacity within the DHH team for additional non-CS elective procedures and to advance key service developments, specifically the establishment of a Day Obstetric Unit (DOU) and a dedicated Induction of Labour (IOL) bay within the delivery suite setting.

Early Pregnancy Problem Clinic (EPPC)

Significant progress is underway to enhance the Early Pregnancy and Pregnancy Counselling (EPPC) services at Daisy Hill Hospital (DHH), with a clear strategic focus on transitioning toward a nurse-led model of care. This development is supported by the allocation of additional resources aimed at upskilling the existing workforce, ensuring that staff are equipped with the necessary expertise to deliver high-quality, safe, and compassionate care to women in early pregnancy.

By expanding clinical capacity within EPPC, the service is not only improving access and continuity for service users but also helping to alleviate pressure on other critical areas of the hospital, including the Emergency Department. This investment reflects a broader commitment to integrated, responsive care pathways that prioritise both patient experience and system sustainability.

Continuity of Midwifery Care (CoMC) – Team Sapphire

The Trust is proud to champion the vision of expanding Continuity of Midwifery Carer (CoMC) as a shining example of how we are bringing our Vision and Strategy 2030 to life, delivering safe, compassionate, and person-centred care at the heart of our communities.

In this model, a small team of midwives provides dedicated care to a caseload of women throughout pregnancy, labour, and the early postnatal period. Evidence shows this approach not only enhances safety and clinical outcomes but also significantly improves experiences for both service users and staff.

At Daisy Hill Hospital, Team Sapphire, launched in April 2024, has embraced this model wholeheartedly, currently caring for 140 women and having supported 284 births in their first year. The team recently celebrated their one-year milestone, with overwhelmingly positive feedback from mothers who described the deep trust and connection they built with their midwives as central to their positive birth experiences. We are immensely proud that our service is the only one in Northern Ireland to have expanded to include two CoMC teams, reinforcing our commitment to innovative, relationship-based care.

Future Service Delivery planning

The Southern Health and Social Care Trust is currently undertaking a comprehensive review of maternity and gynaecology service provision as part of its longer-term planning. This work is driven by a commitment to transformation, improvement, and feasible service sustainability across both hospital sites and community settings. The overarching aim is to identify opportunities to enhance safety, clinical capacity, streamline pathways, and ensure equitable, high-quality care for women and families across the region.

To initiate this programme of work, a multidisciplinary, cross-site workshop was held on 24th September 2025, bringing together senior midwives, obstetricians, senior managers, and Trust directors. The event fostered rich discussion and collaborative thinking around the future direction of obstetric and midwifery services. Contributions from all participants shaped a themed action plan, which now guides the workstreams progressing short, medium, and long-term goals. These workstreams are underpinned by a shared vision of integrated, responsive care that reflects both clinical best practice and the lived experiences of service users.

Key areas of focus include:

- The transition to team-based job planning for gynaecology theatre across the Trust. This approach aims to maximise utilisation of commissioned sessions and enable DHH consultants to follow complex patients to the CAH site, with opportunities for buddy operating and skill refreshment.
- In parallel, a development plan for Speciality doctors is being advanced to support skill maintenance and progression, including rotational opportunities at CAH to ensure safe and effective service delivery.
- Further work is underway to improve induction of labour pathways, with emphasis on standardising practice across both acute sites and establishing pre-induction review clinics to streamline care.
- Efforts are also being made to increase the utilisation of midwifery-led units (MLUs), reducing barriers to admission and enhancing confidence in MLU care. This includes supporting the continued rollout of Continuity of Midwifery Carer models, which remain central to our commitment to personalised, relationship-based care.