





TRUST BOARD / SLT COVER SHEET

	<p>The cover sheet purpose is to provide the Trust Board/Committee with a clear summary of the paper being presented, how it impacts on the people we serve, key matters for attention and the ask of the Trust Board/Committee</p> <p>The Accountable Director must satisfy themselves that the cover sheet is accurate and fully reflects the paper. The expectation is that the Accountable Director has read and agreed the content of both the cover sheet and paper.</p>	
<p>Meeting and Date of meeting</p>	<p style="text-align: center;"><i>Trust Board</i> 29 January 2026</p>	
<p>Title of paper</p>	<p style="text-align: center;"><i>Integrated Maternity and Women’s Health (IMWH) Update</i></p>	
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<p>This paper sits within the Trust Board role of:</p>	<p style="text-align: center;">Accountability</p>	
<p>This paper is presented for:</p>	<p style="text-align: center;">Information <i>(Notes on completion at end of document)</i></p>	
<p>Links to Trust Strategic Priorities</p> 	<input type="checkbox"/>	<p>Collaborative Working</p>
	<input type="checkbox"/>	<p>Learning Organisation</p>
	<input checked="" type="checkbox"/>	<p>Safety, Quality & Experience</p>
	<input type="checkbox"/>	<p>Community First</p>
	<input type="checkbox"/>	<p>Whole-Life Approach</p>

1. Reason for Presentation of Paper / Report

This paper has been prepared to provide an update on the current status, strategic developments, and workforce dynamics within maternity and obstetric services across the Southern Health and Social Care Trust, with a particular focus on Daisy Hill Hospital (DHH). This paper supports ongoing service planning, risk management, and improvement monitoring.

2. Detailed summary of paper contents:

- Maternity services have been de-escalated to Level 1 on the SPPG Support and Intervention Framework (SIF), reflecting sustained improvement and safety.
- DHH midwifery workforce is fully staffed with no vacancies and strong recruitment outcomes.
- Medical staffing at DHH remains fragile, with longstanding medical Consultant gaps and reliance on locums.
- Strategic redesign supports service optimisation at both sites, including development of a Day Obstetric Unit.
- EPPC is transitioning to a nurse-led model (with medical oversight) to improve access and reduce ED pressure.
- Continuity of Midwifery Carer (CoMC) expansion at DHH enhances personalised care, with two active teams across both sites.
- Future service planning includes medical job planning, staff skill development, and standardised induction pathways.

3. Areas of improvement/achievement:

- De-escalation to SIF Level 1, indicating embedded improvements and safer service delivery.
- Full midwifery staffing at DHH, with proactive recruitment and retention strategies including personalised engagement.
- Expansion of CoMC with two teams, the only site in Northern Ireland to do so.
- Strategic redesign of elective CS pathways to improve clinical outcomes and resource utilisation.
- Early Problem Pregnancy Clinic (EPPC) enhancement through nurse-led care and workforce development.
- Multidisciplinary collaboration shaping future service delivery priorities.

4. Areas of concern/risk/challenge:

- Ongoing fragility in the obstetric and gynaecology medical workforce, particularly at DHH, with consultant vacancies and reliance on locums.
- Risk of further destabilisation due to consultant resignation and recruitment challenges, especially for sub-specialty competencies.
- Need for continued vigilance and responsiveness to unpredictable workforce pressures.
- Potential impact on service continuity and patient experience if medical staffing gaps persist.

5. Impact on Statutory Duties: Provide details on the impact of the following and how.	
<i>Financial Impact</i>	<i>Safety and Quality Impact</i>
Yes, there are Financial Impacts	Yes, there are Quality, Safety or Experience Impacts
6. Risk Assessment (Risk level and state if a risk assessment be completed)	
<p>The current risk level is assessed as moderate to high, specifically in relation to the obstetric workforce at Daisy Hill. A formal risk assessment has been completed, and risks are being actively monitored through operational oversight, workforce planning, and business continuity measures. Both the midwifery and medical workforce are formally recorded on the Trust's Corporate Risk Register, reflecting the strategic significance and continued oversight of these challenges. Further mitigation actions are underway, with a focus on completing the remaining actions in the Stabilisation Action Plan.</p>	
7. Other Business Intelligence/data (If appropriate)	
8. Impact: Provide details on the impact of the following and how. If this is N/A you should explain why this is an appropriate response.	
Corporate Risk Register	The workforce challenge is recorded on the corporate risk register.
Board Assurance Framework	<i>Yes in respect of safety and quality</i>
Equality and Human Rights	Any shift in service delivery must be continually assessed for its impact on equity of access and outcomes. While care is directly based on clinical need, there is a requirement to ensure that women across all geographies and backgrounds receive consistent, safe and high-quality care. Equality impact assessments will be completed to inform future service planning and ensure compliance with Human Rights obligations where required.

Trust Board Role Fulfilment

Strategy	<i>Papers in this category should address forward-looking priorities, long-term objectives, or service transformation. These are typically focused on shaping the future of the organisation and will often involve decisions on direction, investment, or innovation.</i>
Culture	<i>These papers aim to influence or reflect the values, behaviours, and staff or patient experiences within HSC. They may relate to leadership development, equality, diversity and inclusion, staff engagement, or initiatives intended to reinforce our organisational ethos.</i>
Accountability	<i>Papers falling into this area relate to governance, assurance, performance monitoring, compliance, and risk. They provide evidence that responsibilities are being fulfilled, standards are being met, and corrective actions are being taken where necessary.</i>

Reasons for Paper Presentation

Approval	<i>Used when an item requires a formal agreement or endorsement by the meeting / committee members. Examples are approving minutes, budgets, proposals or policies.</i>
Assurance	<i>Used when an item can be measured against a certain criteria / standard. Examples are a project is on course with delivery or financial targets are being met.</i>
Information	<i>Used when an item is presented for the purpose of updating or informing the attendees without requiring a decision or action, such as reports, updates, or announcements.</i>
Discussion	<i>Used when an item is listed primarily for open discussion, brainstorming or gathering input from the members without requiring an immediate decision.</i>