



TRUST BOARD / SLT COVER SHEET

	<i>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</i> <i>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.</i>	
Meeting and Date of meeting	<i>Trust Board, 25th June 2026</i>	
Title of paper	<i>IMWH Update</i>	
Accountable Director	Name	<i>Colm McCafferty</i>
	Position	<i>Director of CYPWS</i>
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This paper sits within the Trust Board role of:	Accountability	
This paper is presented for:	Information <i>(Notes on completion at end of document)</i>	
Links to Trust Strategic Priorities 	☐	Collaborative Working
	☐	Learning Organisation
	☒	Safety, Quality & Experience
	☐	Community First
	☐	Whole-Life Approach

1. Reason for Presentation of Paper / Report
To provide the Trust Board with an update on the current position across Integrated Maternity and Women's Health (IMWH) Services. This includes workforce position, associated service risks, governance arrangements, mitigation measures, and future planning to support the delivery of safe, effective and sustainable maternity and gynaecology services across the Southern Trust.
2. Detailed summary of paper contents:
The paper outlines the significant progress achieved over the past 18 months following escalation under the Department of Health Support and Intervention Framework (SIF), including subsequent de-escalation to "Watching Brief" status. It provides a comprehensive overview of: • Midwifery workforce stabilisation and improved recruitment position • Ongoing challenges within the medical workforce, including fragility across all tiers • Areas of reduced medical workforce resilience, particularly at Daisy Hill Hospital (DHH) • Recruitment activity and mitigation measures across Consultant, SAS and SHO tiers • Operational impacts across antenatal, obstetric and gynaecology services • Governance, leadership and service improvement programmes • Risk management approaches and contingency planning arrangements Overall, the paper demonstrates that while significant medical workforce pressures remain, services continue to be actively managed with safety and quality prioritised at all times.
3. Areas of improvement/achievement:
• Successful de-escalation from SIF Level 4 to "Watching Brief" • Significant improvement in midwifery workforce stability • Near full compliment of Midwifery staff across the service • Strong midwifery recruitment outcomes, with additional staff expected by Autumn 2026 • Sustained recruitment activity across medical workforce groups despite a constrained labour market • Continued safe delivery of maternity and gynaecology services across both hospital sites • Strengthened operational oversight and escalation arrangements • Progression of transformation work including: ◦ Continuity of Midwifery Carer (CoMC) ◦ Centralised triage pathways ◦ Governance redesign ◦ Cross-site leadership models
4. Areas of concern/risk/challenge:
• Ongoing fragility within the obstetric medical workforce across all tiers • Reduced workforce resilience at Daisy Hill Hospital, including consultant vacancies and reliance on temporary staffing arrangements

- Continued challenges in recruiting suitably qualified Obstetrics and Gynaecology consultants
- Reliance on locum workforce to support safe rota provision
- Increased pressure on rotas, particularly during periods of peak leave and demand
- Constraints on flexibility of consultant-led services, including some specialist activity
- Potential impact on gynaecology capacity where obstetric services are prioritised
- Ongoing need to strengthen consistency in governance processes, learning and assurance systems
- Competitive medical labour market and all trust competing in a very limited pool of consultant availability

Note: All services continue to operate safely, supported by active management, clinical prioritisation and robust escalation processes.

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)

This paper reflects a high but actively managed operational and clinical risk position.

Risks relate to:

- Sustainability of the obstetric medical workforce
- Reliance on temporary staffing solutions
- Maintenance of safe and effective rota arrangements
- Service pressures associated with workforce availability
- Potential requirement for time-limited contingency measures if required

Robust risk assessment, escalation and oversight arrangements are in place and subject to regular review through established governance structures.

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 ongoing fragility within the Obstetric medical workforce and associated service sustainability risks continue to align existing with corporate workforce, quality and patient safety risks.
Board Assurance Framework	This paper provides assurance regarding actions taken to mitigate workforce and governance risks, while also highlighting areas requiring ongoing oversight and escalation.

Equality and Human Rights	The paper relates to the Trust's responsibility to provide safe, equitable and sustainable maternity and gynaecology services while ensuring maternal and infant safety remains central to service planning and delivery.
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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>