



THE NATIONAL MATERNITY HOSPITAL
HOLLES STREET

ANNUAL REPORT 2019



The National
Maternity
Hospital
Holles Street

ANNUAL REPORT 2019

This Annual Report should be read in conjunction with the Annual Financial Statements which provide certain additional information required under the Code of Practice for the Governance of State Bodies Business and Financial Reporting Requirements purposes.

Front cover image of Shane McAnaspie with his daughter Millie Rita McAnaspie (image credit Jeanette Lowe)

Design and Print by Printcomp Ltd. (01) 497 8511



Contents

GOVERNANCE REPORTS

Deputy Chairman	4
Master	7
Honorary Treasurers	11
Executive Committee	12
Secretary/General Manager	19
Director of Midwifery and Nursing	21
Audit Committee	24
House Committee	24
Quality, Risk and Patient Safety Committee	25

BOARD OF GOVERNORS

Governor's Ex-Officio	26
Nominated by the Minister for Health	26
Nominated by Dublin City Council	26
Governors Elected	26

THE BOARD

The Board	28
-----------	----

COMMITTEE MEMBERS

Executive (The Board)	32
Finance	32
Audit	32
Quality Risk & Patient Safety	32
Co-location	33
Nominations	33

House	33
NMH Executive Ethics	33
Professional Advisors	33

STAFF

Resident and Visiting Medical Consultants	34
Honorary Consultants	35
Non-Consultant Hospital Doctors	36
Senior Midwifery and Nursing	39
Senior Administration	41
Allied Health Professionals	42
Senior Support Services	43

CLINICAL REPORTS

Maternity	
Antenatal Education	44
Bereavement	45
Breastfeeding Support Services	46
Community Midwifery Service	47
Diabetes in Pregnancy	48
Maternity Outpatient Clinics	49
Colposcopy & Gynaecology Outpatient Clinics	51
Urodynamics	53
Neonatology	54
Ultrasound and Fetal Medicine Unit	55



QUALITY, SAFETY & RISK MANAGEMENT

Clinical Governance	57
Quality	58
Health and Safety	59
Central Decontamination Unit	60
Infection Prevention & Control	61
Occupational Health	62

ALLIED HEALTH SERVICES

Clinical Nutrition & Dietetics	63
Clinical Engineering	64
Medical Social Work	65
Pathology & Laboratory Medicine	66
Pharmacy	68
Physiotherapy	69
Psychosexual Therapy	69
Radiology	70

SUPPORT SERVICES

General Services	71
Catering	73
Chaplaincy	74
Facilities Engineering	75
Information Technology	76
Development Project Office: NMH @ Elm Park	77

EDUCATION

UCD School of Medicine	78
Education and Practice Development	79
Royal College of Surgeons in Ireland	80
The Medical Fund	80
Research Ethics Committee	81

ADMINISTRATION

Hospital Inpatient Enquiry (HIPE)	82
Human Resources	83
Information Management	85
Patient Services and FOI	85
Purchasing and Supplies	86
Data Protection	86

FINANCIAL STATEMENTS AND ACTIVITY

Financial Statements	87
Activity Analysis	89



Governance Reports

Deputy Chairman's Report

I have great pleasure in presenting the Annual Report of the Hospital for the twelve months ended 31st December 2019.

The report outlines the main activities of the Hospital during the year in which activity, in terms of mothers delivered, has shown a slight increase. During the year 7,870 women gave birth to 8,008 infants; an increase of just over 1% over 2018.

The Hospital's financial performance is set out in detail in the report of the Finance Committee.

In reviewing 2019, I am pleased to report further substantial progress with our new Hospital which will be located on the site of St Vincent's University Hospital. From the NMH perspective this work is overseen by a sub-committee of the Executive Committee (the Board) called the Co-Location sub-committee which is chaired by Mr Stephen Vernon. By year end the contractors onsite were substantially on program on the initial phases on the enabling works, the new pharmacy and the extension of the car park. The next major milestone will be the issue of the tender during 2020 and having a contractor appointed for the main build. During the year work has continued on the property arrangements with considerable progress being made in ongoing discussions with SVUH and the DOH. In the second half of 2019 significant work has been undertaken with Accenture in the preparation of the Business Case and this will be submitted to Government in early 2020. The co-location of The National Maternity Hospital remains an urgent necessity for future generations of women and babies nationwide. The completion of our new facility will represent a major accomplishment for the NMH, SVUH and the health services within the country. Considerable resources, both personnel and financial, have been invested over recent years to progress the project to this advanced stage. The next few years will see the project accelerate and move along two pathways with the main building works commencing and an increasing focus for the NMH in relation to operational readiness in relation to the planned co-location.

In the next few years on the Holles Street site, many thousands of women will deliver babies in the current facilities. Providing these services onsite, especially in the context of quality, dignity and safety, will present many challenges in the context of both infrastructure, facilities and space. The main buildings on the Holles Street site were constructed in the 1930's and hence suffer from many constraints compared to modern buildings. This continues to be a concern for the EMT and the Board. As previously highlighted the existing site needs some investment

over the short to medium term to maintain operations even at existing levels. Infrastructural risks on the current site have been clearly identified and highlighted in reports both to and from various state agencies. These projects are being pursued by the EMT and the Board as a matter of urgency. Necessary minor improvement projects completed in the past few years provide ongoing benefits and a better environment for patients, visitors and staff. Unfortunately some of these improvements often serve to highlight the deficits in other areas. For every year we remain in Holles Street, there are nearly twenty thousand inpatients and day cases passing through the current buildings. HIQA and other reports clearly highlight the deficits and risks relating to infrastructural and space deficits. A primary focus during 2019 were the Labour Delivery Unit (LDU) and Theatre projects and it is hoped that these will complete during 2020 and provide a modicum of improvement in these areas. While none of these projects will resolve our major long term issues, they do serve to provide some additional and improved facilities while the new hospital is being developed.

In looking forward to 2020, we anticipate that the number of births will remain at a similar or perhaps slightly increased level from 2019. Our activity levels still remain relatively high and, combined with increased complexity and new services and innovations, these levels of activity require additional resources including financial, staffing and infrastructure. Many external factors including new and revised guidelines and practices add to the pressure on limited resources.

Education is of vital importance within the healthcare setting and is a factor in developing and maintaining our staff at the forefront of their chosen professions. Education and training is encouraged and supported at all levels and for all staff groups throughout the Hospital. There is ongoing investment in education programs for all groups of staff to ensure that our future services are provided at the highest level of quality. The Medical Fund continues to provide valuable essential support for training and education. Many midwives and nurses have obtained Masters Degrees in recent years with the support of the Medical Fund.

The project on governance and compliance continued during the year led by Ms Christine Moran and the "Governance Steering Group" sub-committee. During the year some further enhancements were approved and implemented on various Committees. The roles and terms of reference for Committees continue to be reviewed and evolve to meet the requirements



Mary Brosnan, Director of Midwifery & Nursing, Maeve Bergin, BSc Internship Student, and Nicholas Kearns, Deputy Chairman at the Midwifery Graduation

of good governance and our compliance requirements, and this work is assisted by Internal Audit. Discussions were also initiated during the year with the Department of Health in relation to Governance. The Board continues to have concerns in relation to certain provisions in the SLA (Service Level Agreement) with the HSE/IEHG. In the interim the Board continues to rely on the HSE letter recognising the independence of the Hospital and our right to independent operations outside of the HSE/SLA. A number of these concerns and the need for a more collaborative and partnership approach have been reflected in the report of the Independent Review Group and we look forward to this approach for future SLA's. As a Voluntary Hospital, the Hospital's Board fully recognise our obligations in relation to the provision of patient care. Funding of circa €60M is provided by the State whereby they contract with us to provide public services to patients and this is supplemented by the private income generated by the Hospital. The Hospital's Board is also very aware of the voluntary and independent nature of our role and the obligations in relation to funds and incomes not provided by the State. The Board is fully committed to the provision of the highest level of care to all our patients and to ensuring that this is done in an appropriate environment, both from a physical and a governance perspective, for both patients and staff.

Following the referendum in 2018, the introduction of the termination of pregnancy services on a national basis at the start of 2019 was a significant change in the NMH and in many other institutions. There were challenges, as anticipated, in relation to the provision of these services but all of the staff dealt with this change in an extremely professional manner.

As many may recall early 2018 saw the successful "go-live" of the MN-CMS (Maternal & Newborn Clinical Management System) in the NMH. This system became further "embedded" during 2019 and in September 2019 the Gynae module went live in the NMH. All staff are to be congratulated on this major achievement and special thanks to Dr Michael Robson and the onsite MN-CMS team. Dr Tina Murphy was fundamental to this entire project and we note her untimely death in early 2019 with great sorrow and regret.

The House Committee continue its great work in regularly visiting the Hospital and reviewing the environment and facilities. This Committee has a role in monitoring if the Hospital's infection control strategies are effective. Members of the Committee identify and review many issues that might otherwise be unnoticed. I would like to thank all the members for their continued enthusiasm and efforts throughout the year.

The Linen Guild continued to provide invaluable support to many of our patients. This work is very important for those patients who may be experiencing difficulties. I would like to thank them for their ongoing commitment to the Hospital and its patients.

The NMH Foundation's work continues to provide funding support to the Hospital, patients and staff. The additional space that has been provided by No. 65/66 Lower Mount Street continues to be a necessity. The MRI, which was provided by the Foundation and its donors, continues to be operated in partnership with Alliance Medical and is operational on a daily basis providing scans for NMH and other Hospitals. During the year the Foundation undertook a detailed strategy and planning review and has set out clear targets for the coming years.

During the year a number of staff retired and I thank them all for the many years that they have given to the Hospital and to our patients.

Ms Isabel Foley, Ms Elizabeth Nolan, Dr Rhona Mahony, Mr Kevin Mays, Cllr Micheál MacDonncha, Cllr Claire Byrne all stepped down from the Executive Committee during the year and I wish to thank them all on behalf of the Hospital, staff and patients for the time they committed to the Hospital over many years. I would especially like to thank Dr Rhona Mahony for her many years on the Committee as Master, Mr Kevin Mays who had over 27 years on the Committee and who previously served as Honorary Secretary and Ms Isabel Foley who served on a number of Board Committees and played a very significant role in the Mulvey agreement.

This year was the first year of Professor Shane Higgins' seven year term as Master. During this year Shane has worked tirelessly on behalf of the Hospital and our staff and patients and has made very valuable and positive contributions to enhance the Hospital's profile. As always there have been challenges for the Hospital but Shane has always maintained a positive demeanour while meeting these challenges with enthusiasm and determination. It has been a pleasure working with Shane during the year and I look forward to our continued engagement.

I would also like to thank Ms Mary Brosnan, Director of Midwifery and Nursing. Mary has a significant and often challenging role managing the midwifery and nursing staff. In the era of increasing patient expectations, scarce resources and complex activity this is a significant role. With the assistance of her senior team, these

challenges are embraced and the demands of patients and staff are satisfied. On behalf of myself and the Executive Committee I thank Mary and offer her our continued support.

I would like to thank Mr Ronan Gavin, the Secretary/General Manager. During the year Ronan has continued to advise and assist in dealing with the various challenges of operating and governing the NMH.

Mr Alistair Holland, Financial Controller, has helped to keep the Board advised on all aspects of Hospital finances and dealt with the HSE and Ireland East on behalf of the Hospital and for this he deserves our thanks.

I also want to express my gratitude to my fellow Board members for their commitment and support and particularly in the recent few years when their input has been extensive. Their experience and expertise is an invaluable support to the Hospital.

And finally, a special thanks to all of the staff of the Hospital. Despite all the challenges of providing quality healthcare in an ageing facility, everyone at The National Maternity Hospital continues to be committed to providing a high standard of care for all of our patients. The tireless enthusiasm and dedication and compassion demonstrated by all staff throughout the Hospital is a credit to everyone. Thank you all.

Nicholas Kearns
Deputy Chairman

Master's Report

It is my great privilege to serve as Master of the National Maternity Hospital. As I write this report, I would firstly like to express my sincere thanks to all the staff who have made my first year as Master a very enjoyable one. I also wish to acknowledge the support and commitment of the Executive Management Team: Ms Mary Brosnan, Director of Midwifery & Nursing, Mr. Ronan Gavin, Secretary & General Manager, Mr Alistair Holland, Financial Controller and Dr Roger Mc Morrow, Clinical Director. It is a great pleasure to work with them and I thank them for their support, advice and guidance at all times. I could not do this job without them. My eternal gratitude to Bernadine and Emily for looking after me so well for the past 12 months.

I wish to thank the Deputy Chair, Mr Nicholas Kearns, Members of the Board of Governors, Members of the Executive Committee and the Members of the Finance Committee, for giving so freely of their time to both myself and the Hospital. Throughout 2019 they have worked tirelessly on a completely pro bono basis supporting the Hospital in too many ways to list. I wish to extend my sincere thanks for their support and expertise.



Prof Shane Higgins knocking on the door of the hospital as is tradition at every Master's Inauguration Day Ceremony

I wish also to acknowledge the tremendous efforts of every member of staff for their support and commitment who make it possible for me to ensure the smooth running of the hospital and provide safe, high-quality care to our women, babies and their families.

We delivered 8008 babies during the year, weighing $\geq 500\text{g}$ or ≥ 24 weeks gestational age, a 1.2% increase over the previous year and the first increase in numbers since 2015. Our busiest month was July with 693 deliveries and our quietest month was February with 576 deliveries. On our busiest day in the Delivery Suite over the year we delivered 35 babies and for those lucky enough to be working on the 26th of May we only delivered 6 babies. Our Caesarean Section rate continues to increase yet we continue to have one of the lowest rates in the country.

There were 1,579 admissions to our Neonatal Unit during the year including 120 in-utero transfers of patients less than 28 weeks gestational age from other Hospitals both north and south of the border including 20 transfers accepted from the other Dublin maternity hospitals. Our smallest surviving baby spent 90 days in the Neonatal Intensive Care Unit and weighed 390g at birth.

Our Fetal Medicine Unit undertook 28,741 scans and continues to accept patients from all over the country with complex disorders of pregnancy.

We undertook 688 major and 2,252 minor gynaecological procedures during the year.

During 2019 the EMT completed a strategic plan for 2020 to 2023 where we set out our five key goals:

1. To optimise services for our patients in Women's Health and Neonatal Care by:
 - Maximising efficiencies of our benign Gynaecology service within our network.
 - Developing specialist services such as a Menopause service.
 - Promoting midwifery models of care where appropriate.
 - Promoting the NMH as the Neurocritical unit for Ireland.
2. To be the employer of choice by:
 - Investing in our staff and continuing to work on retaining and attracting high calibre talent.
 - Improving communications within the organisation at a time of transition for the Hospital and staff.
 - Implementing a strategic workforce plan.

3. To deliver an exceptional experience, putting women and babies at the centre of everything we do by :
 - Optimizing our current Hospital infrastructure.
 - Preparing for the seamless transition to the Elm Park campus.
4. To create an environment that fosters excellence in Research, Education and Innovation.
5. To foster strategic partnerships with our wider network and external stakeholders.

Leads and teams have been appointed to each goal and will focus on the implementation and success of the plan over the next four years.

The Hospital had a number of retirements, appointments, promotions and milestones over the year.

Dr Veronica Donoghue, Consultant Paediatric Radiologist said farewell towards the end of the year and this marks the end of an era for the Hospital. Veronica almost single-handedly developed the Radiology Department to what it is today. She was the first in Ireland to introduce screening ultrasound for infants with hip dysplasia and later she was first to introduce Neonatal MRI onsite in a dedicated Maternity Hospital. In 2014 Dr Donoghue was awarded the European Society of Paediatric Radiology Gold Medal, an exceptional award given to very few that recognised a lifetime of professional accomplishment and dedication to Paediatric Radiology as a Specialty. Her goal when she joined the Hospital was to provide an excellent radiology service to support the neonatal and obstetric practice in the Hospital and she certainly provided “gold standard” at all times. We are deeply indebted to her and wish her continued success and happiness in her retirement.

After many years of dedicated service Ms Dorothy McCormack Chief Pharmacist retired. Ms Nicola Clark, Ms Niamh Dougan, Ms Lorraine O’Hagan, Ms Joan Ward, Ms Teresa O’Driscoll, Ms Eileen Sheridan, Ms Hazel Slowey and Ms Mary Giblin, all retired from the Nursing and Midwifery staff during the year. From our Portering Services, Ms Kathleen Foley and Mr Joe Staunton were long service retirees. I would like to take this opportunity to thank all retirees for their enormous contribution to the Hospital at all times during their careers and to wish them every happiness in their retirements.

We also said farewell to some of our esteemed members of the Executive Committee on their retirement. Ms Isabel Foley, Mr Kevin Mays, Ms Elizabeth Nolan, Dr Rhona Mahony, Ms Claire Byrne and Mr Michael McDonnacha. My thanks to you all for your contribution to the hospital over the years.

We were delighted to welcome a number of new Consultant staff to the Hospital during the year. Dr Siobhan Corcoran, and Dr Zara Fonseca Kelly were appointed to the Consultant Obstetric and Gynaecology Staff. Dr Siobhan McGuinness was appointed to the Consultant Anaesthetic staff and Dr Eoin O’Curraín, commenced as a Consultant Neonatologist. Professor Declan Keane was appointed as Professor of Obstetrics & Gynaecology at the Royal College of Surgeons in Ireland. I have no doubt you will all be a great asset to the National Maternity Hospital.

Other notable appointments include our Compliance and Operations Manager, Mr Carl Alvag, our Chief Pharmacist, Mr David Fitzgerald and Ms Pauline Treanor to the NMH at Elm Park Project Management Office, Mr Martin Keane as ICT Lead to the Project and Communications Officer, Ms Jennie Cotter.



Prof Shane Higgins with his daughter Dr Tess Higgins at the Master’s Inauguration Ceremony



Front and centre: Dr Michael Robson, Former Master and Consultant Obstetrician & Gynaecologist, Martina Cronin, Labour Ward Manager and Prof Shane Higgins, Master with Active Management of Labour Course international attendees

I would like to thank Dr Orla Shiel and Dr Jenny Walsh who have stepped into the roles of Clinical Leads for the move to Elm Park, at times very difficult but nonetheless hugely rewarding roles, especially when the move is realised.

Congratulations to Ms Valerie Kinsella and Ms Ann Calnan both promoted to Assistant of Midwifery and Nursing Posts.

I would also like to extend a warm welcome to our Writer in Residence Ms Emilie Pine, Author of “Notes to Self”, who is spending an academic year in the Hospital, gathering stories of staff and patients’ experiences; the fabric and the essence of what we do. Emilie is also facilitating Creative Writing Workshops for staff to enjoy. A warm welcome also to our Photographer in Residence, Ms Jeanette Lowe.

There were a number of successful initiatives and Awards in the hospital over the past 12 months.

Congratulations to the NMH Placenta Accreta team who won The Hospital Project Award Category at The Irish Healthcare Awards on the 20th November, 2019 for their group submission – “Placenta Accreta Spectrum Service”. This team comprises both staff members and former patients who so kindly give of their time and efforts to improve the services we provide.

Congratulations to Ms Elizabeth Byrne, Catering Manager, and all the Catering Team on achieving 100% for the FSPA Food Safety Assurance Award. We very much appreciate your continued commitment to the highest levels of food safety and quality standards. Our award-winning Catering Team work with our Dieticians to complete full nutritional analysis of menus and ingredients on an on-going basis. Thank you all so much.

In December 2019, the NMH launched its evaluation of the Labour Hopscotch framework. The framework was developed in 2015 by a Community Midwife at the National Maternity Hospital, Sinead Thompson. The Labour Hopscotch framework is used to support women on their labour journey, helping to reduce the rate of interventions and to inform and empower women and their birth partners as they progress through the labour process. The steps are illustrated sequentially with appropriate times allocated to each step. The process can be commenced at home, where women start at the bottom of the hopscotch as they are more active and mobile. As labour progresses, they advance towards baby’s footprints, a motivational image used to help women visualise and maintain focus during labour. Sinead has been seconded by the HSE National Women and Infants Health Programme to support all other Maternity Units in Ireland to adopt this framework.

No organisation such as ours can afford to stand still and in keeping with our goals, we continue to develop this site to meet our patients' needs. There are currently two significant infrastructural developments taking place which will both be completed by the end of the year: our Theatre development will see one additional appropriately sized and equipped theatre to allow us to dedicate one Operating Theatre to an uninterrupted Gynaecology Service and our Delivery Ward will see a net increase of three delivery rooms, which will address many privacy and dignity issues we currently encounter and we will also introduce the use of a hydrotherapy labour pool.

Work remains ongoing and focussed on the move to Elm Park, with many members of staff currently engaged on work streams such as ICT, workforce planning, business enablement and operational readiness. 2019 was a very productive time and I would like to take this opportunity to express my thanks to our staff for all of their support and hard work throughout the year. To be involved in shaping the new National Maternity Hospital at Elm Park Campus is an opportunity of a lifetime and allows us to ensure that our Hospital will be the Maternity Hospital of choice for both patients and staff into the future. My sincere thanks also to the HSE Estates Team lead by Ms Eleanor Masterson and Mr Peter Finnegan, the Design Team lead by Mr Sean Mahon of O'Connell Mahon Architects, Mr Fergus Monaghan of ARUP Engineering and the team from Accenture without whom the project would not be realised.

Let us remember those colleagues who unfortunately have passed away over the year, May they Rest in Peace. Dr Tina Murphy PhD our midwifery colleague and MN-CMS champion who died suddenly in March 2019 and Mr Ronan Power, Porter, Labour/Delivery Unit, who died suddenly in April 2020.

Dr Declan Meagher, former Master and Consultant Obstetrician and Gynaecologist also died during the year. Described as a big man with a self-deprecating style, he had a warm smile, sharp listening skills and superb memory. During his career he was dedicated to the care of women in childbirth and pioneered the Active Management of Labour which later became the model of care in many Maternity Hospitals throughout the world. Following his retirement he remained closely involved with the Hospital as a Governor. Although never having had the privilege of working with Declan, I remember him as a warm kind man, generous of his time, supportive and encouraging.

There are many threats and risks facing the Hospital, risks to the success of the move to Elm Park, threats to the voluntary status of the Hospital. Together we must be resolute and steadfast in our defence of our voluntary status and robust in our determination to see the move to Elm Park realised. Together we must be prepared to stand up and fight. Again I thank the Board and staff for their support.

Professor Shane Higgins

Master



Prof Shane Higgins, Master with his wife Kate and sons, Henry, Jack and Tom (left to right) at Charter Day celebrations



Honorary Treasurers Report

The year-end outturn for 2019 reflected a surplus of €1.46m based on HSE funding of just over €66.5m. This reflected an increased allocation on last year in recognition of a number of strategic initiatives underway as outlined in more detail below. The hospital also generated income of €14.4m including €14.0m from private and semi-private patients. This continued its slight downward trend, dropping a further 3% on comparable prior year figures. The surplus resulted from a release of a bad debts provision at the year-end in addition to additional HSE allocation received for projects just prior to year-end.

NMH continues to be heavily reliant on funding from the HSE to maintain service levels at the highest of standards given the majority of our patients are public patients. Funding from HSE remains under pressure. The hospital's actual allocation of funding remains an unknown for much of the year. That leaves the hospital trying to plan services and essential spend in a suboptimal manner. This year for example funding for new developments to facilitate the Termination of Pregnancy service was not received until over three quarters of the way through the financial year. The hospital also had to pre-fund expenditure on the much needed new Labour Delivery Unit out of cash flow for much of the year pending confirmation that it would receive the necessary support from the HSE. Decisions have to be taken all the time by the Executive Management Team and the Finance Committee on areas of spend to be prioritized to preserve patient safety. This is far from optimal.

Expenditure levels for the year totaled €77.1m reflecting an increase of just over 10% on the previous year. This was all planned expenditure increases. The hospital, with oversight from the Finance Committee, has continued to maintain tight control over costs with overall expenditure 1% under budgeted spend for the year. This spend can be broken down into pay at €62.6m and non-pay expenditure at €14.5m. Pay accounts for the majority of the expenditure of the hospital at 81%. Pay costs (which also included pay arrears for prior years) increased by just over 10% and non-pay increased by just over 8%.

Pay levels are driven by head count numbers and agreed changes in national pay scales. Pay levels increased in certain areas in the past 12 months as agreed arrears on national wage agreements fell due for payment. This is outside of the control of NMH. Head count level increases reflect certain approved posts that have now been filled including additional personnel recruited to provide the TOP service. NMH often have to recruit to deliver new services or

HSE strategic initiatives in advance of funding being confirmed. The hospital has also had to backfill a number of posts this year in order to free up skilled team members to support the planning of the move to NMH @ Elm Park. The hospital also experiences ongoing delays with the Health Insurers – both in terms of approving Consultants (who have already been approved by the HSE) to see private patients and in finalizing payments for patients with the hospital.

The key items in non-pay expenditure relate to medicines, surgical supplies, laboratory costs and maintenance of the hospital. The first three of those costs are directly impacted by the level of activity in the hospital but also increasingly driven by the case mix that NMH handles each year. As a national tertiary referral hospital, the case mix being dealt with by staff continues to increase in complexity which has a direct impact on costs.

Whilst plans are well advanced to move the hospital's activity to the new purpose-built facility at Elm Park; that is still some time away. Therefore we continue to have to spend money to keep an aging facility as fit for purpose as is possible. That is reflected in maintenance expenditure of €0.6m and €2.9m in additions / improvements to hospital equipment and facilities. Work is underway on the new Labour Delivery Unit as well as the provision of new Theatre capacity.

Other areas of focus by the Finance Committee during 2019 included updating of the policies and procedures that underpin the finance function, continued focus on the management and reduction of outstanding debtors, monitoring compliance with the Charities Act and a review of the procurement function of the hospital.

NMH has had another busy year on the finance front balancing essential spend to ensure we can enhance patient services with available cash. At the same time it has delivered a strong performance in managing tightly to a budget spend figure.

I would like to extend my appreciation to the NMH finance team and my fellow members of the Finance Committee. I would also like to pay tribute to Isabel Foley who resigned from the Finance Committee at the end of the year after many years of superb service.

Michele Connolly
Honorary Treasurer

Executive Committee Report

Executive Committee (the Board)

Mr Nicholas Kearns was re-elected as Deputy Chair at the first Board meeting following the 2019 AGM.

In January 2019 Dr Rhona Mahony and Ms Mairéad Butler were elected to the Board. At the AGM Dr Roger McMorrow, Clinical Director and Consultant Anaesthetist, was elected to the Board and the outgoing members of the Board were re-elected save for members who did not go forward for re-election namely, Dr Rhona Mahony, Mr Kevin Mays and Ms Elizabeth Nolan. In November 2019 Ms Isabel Foley resigned from the Board.

Dr Rhona Mahony did not seek re-election after her appointment to the Board of St Vincent's University Hospital; we congratulate Dr Mahony on this significant appointment and wish her well in her new role. Dr Mahony continues to be a Consultant Obstetrician/ Gynaecologist at the Hospital.

Mr Kevin Mays was a member of the Board for 27 years and served as Honorary Secretary for ten years during which he undertook a crucial role in guiding the Board on legal issues and court cases. Ms Elizabeth Nolan and Ms Isabel Foley were members of the Board for six years and each assisted greatly in the work of sub-Committees. Ms Foley's dedicated work was invaluable in the negotiation of the Mulvey Agreement and the successful outcome of the judicial review. We thank all three Governors for their extensive time and commitment to the Hospital.

Dublin City Councillors appointed two new Councillors to the Board, Cllr James Geoghegan and Cllr Catherine Stocker. We extend our thanks to the outgoing Councillors Claire Byrne and Mícheál MacDonncha for their helpful input at Board Meetings.

Board Time

At each monthly meeting of the Board, reports of the Executive Management Team (the EMT) are considered and following discussion the EMT may be requested to proceed in a certain manner.

Aside from the normal business, the Board devoted time to:

1. The new Termination of Pregnancy Service. Despite the lack of guidance at national level it was agreed the Hospital should proceed with offering the service in January as requested by the Minister for Health. It was noted that the service impacted negatively on the availability of gynaecology beds and theatre slots.
2. Terms of reference for the fourth inquiry/ report requested by the Department of Health concerning a case.
3. The work of the Co-location Committee for the relocation of the Hospital to Elm Park in particular concerning negotiations with the HSE concerning tenure being offered at Elm Park.

The Hospital website was updated by including short biographies and photographs of Board members.



Prof Declan Keane, Professor/Senior Lecturer and Consultant in Obstetrics/ Gynaecology RCSI/NMH with Eva O'Connor and Hannah Marsh, both recipients of the RCSI/NMH Medal at Charter Day

The Board met on 13 occasions in 2019. Attendances were as follows:

Member	Meetings Attended	Meetings Appointed to Attend
Mr Nicholas Kearns, Deputy Chairman	11	13
Mr William Johnston, Hon. Secretary	12	13
Ms Michele Connolly, Hon. Treasurer	11	13
Prof Shane Higgins, Master	13	13
Mr Justice David Barniville	6	13
Ms Ingrid Browne	12	13
Ms Mairéad Butler	10	12
Cllr. Claire Byrne	0	7
Fr Enda Cunningham	12	13
Mr Aidan Devlin	9	13
Mr Frank Downey	11	13
Ms Isabel Foley	9	12
Cllr James Geoghegan	4	6
Prof Declan Keane	9	13
The Lord Mayor, Cllr. Nial Ring	0	6
The Lord Mayor, Cllr. Paul McAuliffe	0	7
Dr Rhona Mahony	2	5
Mr Kevin Mays	0	6
Ms Christine Moran	7	13
Ms Eugénée Mulhern	7	13
Dr John Murphy	8	13
Prof Fionnuala McAuliffe	10	13
Ms Jane McCluskey	10	13
Cllr. Mícheál MacDonncha	1	7
Dr Roger McMorrow	7	7
Prof Peter McParland	7	13
Ms Elizabeth Nolan	5	6
Prof Colm O'Herlihy	9	13
Cllr. Naoise Ó Muirí	6	13
Ms Patricia O'Shea	7	13
Dr Michael Robson	7	13
Cllr. Catherine Stocker	2	6
Mr Stephen Vernon	6	13
In Attendance		
Mr Ronan Gavin	11	13
Ms Mary Brosnan	12	13
Mr Alistair Holland	12	13
Dr Roger McMorrow	1	1
Ms Geraldine Duffy	1	1
Mr Francis Rogers	1	1

His Grace the Catholic Archbishop of Dublin does not attend the meetings.

Governors

Following the recommendation of the Nominations Committee each of the following persons were appointed Governors of the Hospital:

- Dr Rhona Mahony, Consultant Obstetrician/Gynaecologist and former Master
- Dr Paul Downey, Consultant Histopathologist
- Mrs Kate Higgins
- Ms Caroline Devlin
- Ms Aoife O'Shea
- Ms Denise Cole
- Ms Gráinne Hennessy

In 2019 Dr Declan Meagher died. Dr Meagher was a Consultant Obstetrician/Gynaecologist at the Hospital and Master for the years 1970 to 1976. Prior to his Mastership Dr Meagher, together with his successor as Master Dr Dermot MacDonald, ran the first family planning clinic in Ireland which was set up in the Hospital – at the time it was called the Marriage Guidance Clinic. His attention to detail was epitomized by increased cleanliness at the Hospital through a more frequent laundry service. His first year as Master was marked by it being the first year in the Hospital's history that there was no maternal death. Following his Mastership, together with his predecessor as Master Dr Kieran O'Driscoll, he wrote 'The Active Management of Labour' which set out a fundamental new approach in the delivery of new life. Dr Meagher played a prominent role in bringing ultrasound to the Hospital. This has given rise to the Annual Declan Meagher Symposium, the first event of which was held in 2019 at which several distinguished persons participated including Dr Meagher's son, Dr Simon Meagher.

Sub Committees of the Board

Finance Committee

As can be seen from the Financial Report summarised on page 11 the Hospital closed the year with a surplus of €1.46m. This was a very satisfactory result in light of rising costs and the ongoing challenges to income. Further detailed commentary on the finances are provided in the Honorary Treasurer's Report, page 11.

The Committee met on twelve occasions during the year. Attendances were as follows:

Member	Meetings Attended	Meetings Appointed to Attend
Mr Nicholas Kearns, Deputy Chairman	9	12
Ms Michele Connolly, Hon. Treasurer	11	12
Mr William Johnston, Hon. Secretary	11	12
Prof Shane Higgins, Master	12	12
Ms Isabel Foley	9	11
Ms Christine Moran	9	12
In Attendance		
Mr Ronan Gavin	10	12
Ms Mary Brosnan	12	12
Mr Alistair Holland	11	12
Ms Denise Cole	1	1
Mr Francis Rogers	1	1



Prof Shane Higgins, Master, Bernadine O'Driscoll, Master's Secretary with her son David O'Driscoll and her sister Dr Cathy Allen, Consultant Obstetrician & Gynaecologist at Charter Day celebrations. David was awarded the Kieran O'Driscoll prize which is awarded each year to the student who attains the highest grade in Obstetrics and Gynaecology

Audit Committee

The Audit Committee continued its work throughout the year and a separate report on the work of the Committee is provided on page 24.

The Committee met five times during 2019 and attendances were as follows:

Member	Meetings Attended	Meetings Appointed to Attend
Mr Frank Downey, (Chair)	5	5
Ms Michele Connolly, Hon. Treasurer	5	5
Ms Mairéad Butler	5	5
Mr Aidan Devlin	3	5
Prof Peter McParland	1	5
In Attendance		
Mr Ronan Gavin	5	5
Mr Alistair Holland	5	5

QRPS Committee

The QRPS (Quality, Risk & Patient Safety) Committee continued its work throughout the year and a separate report on the work of the Committee is provided on page 24.

The QRPS Committee met on five occasions in 2019. Attendances were as follows:

Member	Meetings Attended	Meetings Appointed to Attend
Mr Aidan Devlin, Chair	5	5
Ms Patricia O'Shea, Vice Chair	4	5
Dr Ingrid Browne	5	5
Ms Mairéad Butler	2	2
Mr Frank Downey	1	5
Prof Declan Keane	2	5
Ms Jane McCluskey	4	5
Dr Roger McMorrow	0	2
Prof Colm O'Herlihy	3	5
Cllr. Naoise Ó Muirí	5	5
In Attendance		
Ms Mary Connolly, AON	3	5
Prof Shane Higgins, Master	1	1
Mr Ronan Gavin	3	5
Dr Luke Feeney	5	5
Mr Alistair Holland	2	2

Co-Location Committee

The Co-location Committee met on ten occasions during 2019. Attendances were as follows:

Member	Meetings Attended	Meetings Appointed to Attend
Mr Stephen Vernon, Chair	8	10
Ms Michele Connolly, Hon. Treasurer	8	10
Ms Isabel Foley	9	10
Ms Elizabeth Nolan	4	4
In Attendance		
Prof Shane Higgins, Master	8	10
Dr Orla Sheil	6	7
Mr Ronan Gavin	10	10
Ms Pauline Treanor	2	3
Mr Nicholas Kearns	4	4
Mr William Johnston	2	2

Nominations Committee

The Nominations Committee met on five occasions during 2019 and recommended seven new Governors for election during the year.

Attendances were as follows:

Member	Meetings Attended	Meetings Appointed to Attend
Mr Nicholas Kearns, Chair	5	5
Mr William Johnston, Hon. Secretary	3	4
Ms Michele Connolly, Hon. Treasurer	2	4
Prof Shane Higgins, Master	3	4
Dr Peter Boylan	0	5
Prof Declan Keane	1	5
Ms Eugénée Mulhern	3	5
Dr John Murphy	3	5
Ms Paula Reid	1	5
In Attendance		
Mr Ronan Gavin	4	5
Mr Alistair Holland	1	1

House Committee

The House Committee continued its work in conducting on-site inspections of the various areas in the Hospital. The Committee, which is one of the longest serving, assists in ensuring that the Hospital's infection control strategies are effective. They met on five occasions in 2019 and attendances were as follows:

Member	Meetings Attended	Meetings Appointed to Attend
Ms Catherine Altman, Chair	4	5
Ms Mary Brosnan, Dir. M&N	2	5
Ms Sara Appleby	3	5
Ms Sheena Carton	5	5
Ms Jane Collins	4	5
Ms Fiona Davy	5	5
Ms Elaine Doyle	4	5
Ms Lydia Ensor	3	5
Mrs Kate Higgins	3	4
Ms Judith Meagher	5	5
Ms Margaret McCourt	4	5
Ms Margo McParland	3	5
Ms Anne Murphy	5	5
Ms Teresa Murphy	4	5
Ms Kathleen O'Grady	5	5
Ms Aoife O'Shea	2	2
Ms Bernie Spillane	0	5
In Attendance		
Prof Shane Higgins, Master	1	1
Mr Mark Anderson, Hygiene Services Manager	5	5
Ms Ann Rath	1	1
Ms Calin Buie	4	4
Mr Damian McKeown	1	1
Ms Sharon Hynes	1	1

Ms Aoife O'Shea and Mrs Kate Higgins were elected to the House Committee during the year.

Executive Ethics Committee

This Committee met once during the year.

Maternity Hospitals Joint Standing Committee

The Committee, under the Chairmanship of Dr Don Thornhill, continued to meet on a monthly basis during the year. All three Dublin maternity hospitals participate in this Committee and discuss issues of common interest and concern including, but not limited to: Strategic issues facing maternity hospitals, MN CMS operations, Patient Safety Bill 2019, Termination of Pregnancy Services, SLAs for Section 38, and the status of Voluntary Hospitals.

Charter Day

We had a very good attendance at Charter Day which was held on the 24th January 2019 and was hosted by the Master, Prof Shane Higgins and his wife, Mrs Kate Higgins to whom we are most grateful. The Master delivered an informative and inspiring address to the Governors, staff, prize-winners and their families.

The 62nd Annual Charter Day Lecture entitled "Each Baby Counts - a Five Year Quality Improvement Programme" was delivered by Professor Alan D. Cameron, MD., FRCOG, Consultant Obstetrician & Maternal Fetal Medicine Specialist, at the Ian Donald Fetal

Medicine Centre, Queen Elizabeth University Hospital, Glasgow. The lecture was well attended and Professor Cameron was guest of honour at the Annual Charter Day Dinner.

A Symposium entitled "Each Baby Counts" was held on Friday, 25th January 2019 as part of the Charter Day celebrations and took place in the Lecture Theatre at 65/66 Lower Mount Street. The symposium was chaired by the Master, Prof Shane Higgins and the following lectures were delivered:

"Classification of Intrapartum Caesarean Section".

Dr Michael Robson, FRCS, MRCOG, FRCPI.

"Lactate Levels & Intrapartum Dystocia".

Dr Tina Murphy, RGN, RM, BNS, RNP, PhD.

"Every Generation Needs a New"

Dr Eoghan Mooney, MB, MRCPI, FRCPath, FFPATH, RCPI.

"Imaging in the Diagnosis of HIE"

Dr Gabrielle Colleran, MB, BCh, BAO, M.D., IMRCS, FFR RCSI.

"What I've learned from Randomised Trials at NMH"

Prof Colm O Donnell, MB, MRCPI, MRCPC, FRACP, PhD.



Charter Day Attendees

Hospital Awards & Certificates

Awards for the year 2019 were presented at the Charter Day reception as follows:

Medical Students

- John F. Cunningham Medal - Dr David Connellan
- RCSI / NMH Medal - Eva O'Connor
- Hannah Marsh
- Kieran O'Driscoll Prize - David O'Driscoll
- A. Edward Smith Medal - Not awarded.

Student Midwives

- Hospital Gold Medal - Siobhan O'Doherty (BSc in Midwifery)
- Dawn Smyth (Higher Diploma in Midwifery)
- Elizabeth O'Farrell Medal - Anna Mockler (BSc in Midwifery)
- Aisling Taylor (Higher Diploma in Midwifery)

- Neonatal Medal - Elaine McEllistrim
- (Medal was established by Dr Niall O'Brien)

- Dir. of Midwifery's Award - Ms Margaret Hanahoe, A/Dir of Midwifery & Nursing.

Ms Hanahoe was awarded the medal to acknowledge her contribution to midwifery for almost forty years and also for her Midwifery Research Programme for the 10 Groups - "Does the use of the Robson Ten Group Classification System enhance Midwifery-led Audit?"



Mary Brosnan, Director of Midwifery & Nursing with Margaret Hanahoe, Assistant Director of Midwifery & Nursing who received the Director of Midwifery's Award at Charter Day



David O'Driscoll, recipient of the Kieran O'Driscoll Prize with Nicholas Kearns, Deputy Chairman

Appointments, Promotions, Retirements and Deaths

New appointments during 2019 included:

Dr Siobhan Corcoran, Consultant Obstetrician/Gynaecologist
 Dr Zara Fonesca-Kelly, Consultant Obstetrician/Gynaecologist
 Dr Siobhan McGuinness, Consultant Anaesthetist
 Dr Eoin O'Curraín, Consultant Neonatologist
 Mr Carl Alfvag, Compliance and Operations Manager
 Dr Jyothsna Purna, Consultant Neonatologist (Transport)
 Ms Pauline Treanor, Operational Programme Manager, Project Office
 Mr Sean Murray, Senior Assistant Technical Services Officer
 Mr Graham Tucker, Draughtsman Technician
 Ms Beata Banach, Catering Officer, Grade II
 Mr Michael Loughnane, Maintenance Supervisor

Internal Promotions 2019 included:

Prof Declan Keane, Professor/Senior Lecturer and Consultant in Obstetrics/Gynaecology, RCSI/NMH
 Mr David Fitzgerald, Chief Pharmacist
 Ms Ann Calnan, Assistant Dir. of Midwifery & Nursing
 Ms Valerie Kinsella, Assistant Dir. of Midwifery & Nursing
 Ms Carol Pugh, CMM3, Postnatal Services
 Ms Valerie Spillane, CMM3, Antenatal Services
 Ms Gillian Canty, CMM3, Project Office
 Ms Jilby Jacob, CMM2, Postnatal Services
 Ms Remy Mathew, CMM2, Postnatal Services
 Ms Jane Langenbach, CMM2, Delivery Ward
 Ms Anya Phillips, CMM2, Delivery Ward
 Ms Ivana Lambe, Community Midwife
 Ms Colette O'Neill, Clinical Skills Facilitator
 Ms Pam Hutchings, CDU Manager/ Decontamination Lead
 Mr Glenn Kynes, Laundry Services Supervisor
 Mr Emmet Travers, Chief A/Technician Services Officer, Project Office

Staff Retirements

The following staff members retired during the year after many years of service:

Ms Mary Giblin, CNM1	40 years
Ms Dorothy McCormack, Chief Pharmacist	40 years
Mr Joseph Staunton, Laundry Services Supervisor	39 years
Ms Margaret Cooke, CNM1	39 years
Ms Niamh Dougan, CNM2	38 years

Dr Veronica Donoghue, Consultant Paediatric Radiologist	36 years
Ms Nicola Clarke, Assistant Dir. of Midwifery & Nursing	34 years
Ms Teresa O'Driscoll, Snr Midwife	33 years
Ms Joan Ward, CNM2	33 years
Ms Noreen O'Callaghan, Senior Pharmacist	30 years
Ms Eileen Sheridan, CNM1	28 years
Ms Aine Daly, Snr Staff Nurse	26 years
Ms Joyce Miley, HCA	18 years
Ms Hazel Slowey, Senior Staff Nurse	15 years
Ms Lorraine O'Hagan CNS	13 years
Ms Catherine Ward, HCA	8 years
Ms Brenda Hayes, CMM2	5 years

We thank each of them for their enormous contribution during their many years of service and wish them a very happy retirement.

Deaths

Sadly, we send our sincere condolences to the family, friends and colleagues of Dr Tina Murphy, the first recipient of a PhD in Midwifery in the NMH, who died suddenly and in service during the year. We also extend our sincere condolences to the family, friends and colleagues of Mr Ronan Power, Porter in Labour/Delivery Unit who died unexpectedly on 2nd April 2020.

During the year a number of our retired staff died and we send our sincere condolences to their families. They include: Dr Declan Meagher, Consultant Obstetrician/ Gynaecologist and former Master, Dr Mary Bergin, Consultant Anaesthetist, Ms Kathleen Mulligan, CNM 1 and Ms Anna Patricia Byrne, Catering Department.

Conclusion

The Board are grateful for the unrelenting work in the face of increasing challenges and dedication shown by the Executive Management Team led by the Master Professor Shane Higgins, The Director of Midwifery and Nursing Ms Mary Brosnan, the Secretary/General Manager Mr Ronan Gavin and their assistants Ms Bernadine O'Driscoll and Ms Clare Gray as well as all members of the medical, health & social care professionals, midwifery & nursing, administration, maintenance, catering, portering and household staff.

Mr William Johnston
Honorary Secretary

Secretary/General Manager's Report

In 2019 overall activity levels within the Hospital increased slightly and continue to be at levels close to 8000 mothers delivered. The number of births increased by a few hundred and again there was an overall increased complexity of patients receiving care. As in recent years many Hospital staff continued to be engaged on a number of projects associated with improving the facilities and services for patients. These included the extension of the National Maternal Newborn Clinical Management System (MNCMS) into the Gynaecology Department in September. The co-location project to the campus at Elm Park continued with contractors continuing onsite with enabling works including the Pharmacy and the extension of the car park. The detailed design has been substantially completed during 2019 and much of the focus during 2020 has been on preparing the final business case for submission to Government in early 2020 to enable the project to be put out to tender. Once again many congratulations to everyone involved in the NMH, SVUH, HSE Estates and the design team in bringing the project to this stage. The NMH Co-Location sub-committee continued during the year to overview the ongoing progress of the project. We continue to deal with the challenges of maintaining services on the current site, with the limitations of the buildings and the problems associated with the aging infrastructure growing very year. The issues and concerns relating to the current site in Holles Street are acknowledged by all parties. As every month passes the necessity for our new co-located modern facility with modern patient care facilities grows more urgent. The NMH has a number of years remaining on this site while the new facility is constructed and certain infrastructural deficiencies will require that urgent works will be undertaken in the coming year in order to provide safe services on the current site until the co-location.

It is anticipated that slightly increased levels of activity will be experienced in 2020. These activity levels, when combined with continued increases in complexities due to many factors including age, advances in fetal medicine, tertiary referrals and other demographic factors, will continue to increase the burden for all staff. Interactions with external stakeholders such as the National Women and Infants' Health Programme (NWIHP), Ireland East Hospital Group, Sláintecare and HSE, DOH and other stakeholders such as HIQA continue to have an influence on the direct delivery of care to patients and the various resources required to provide this care in an appropriate manner. The introduction of the new services under the Health (Regulation of Termination of Pregnancy) Act 2018 at the start of the year was a major change for the NMH and other Hospitals that introduced these services. The inception of this service required



Dr Tina Murphy RIP, MNCMS Project Manager and Assistant Director of Midwifery and Nursing with Prof Shane Higgins at his Inauguration Ceremony

extensive discussions and consultations both internally and externally and necessitated guidance and resources. Once again it is very important to highlight the need for ongoing positive engagement and consultation between clinicians and service providers and the National bodies in advance of the introduction of any developments or proposed changes in services. We again highlight the importance that appropriate resources are allocated to allow for the proper implementation of all such programs and initiatives. The wide range and increased complexity of the activities delivered at NMH are exceptional by any comparison and particularly when viewed in the context of limitations on resources, staffing, financial and infrastructural requirements.

As already noted the infrastructural issues on the Holles Street site continue to cause concern and these issues are a priority for the management team in the context of providing patient care and complying with the required external standards and regulations. The Pharmacy relocated to the new facility early in 2019, the 5A lift underwent substantial upgrades including a new access on the fourth floor, works continued on the LDU expansion (Labour, Delivery Unit) and the contractors commenced works on the Theatre extension. Urgent onsite infrastructure issues such as these have been identified and recognised by the Hospital and

have been communicated to both the HSE and Ireland East. There remain certain issues that are of such concern that the Executive Committee (the Board) has approved urgent works, even in the absence of formally identified funding, in order to ensure the ability to continue to provide services to patients on the current site.

As in previous years funding remained an area of ongoing focus during 2019. Continued pressures on patient incomes, reimbursements from insurers and collectability continued as a focus for the Finance Committee and the Finance Department. There is ongoing dialogue with insurance companies regarding process issues and interpretation of levels of cover relating to patient billing. Patient information and communications regarding billing legislation and patients and insurers' obligations continues to be strengthened. Patient incomes continue to represent a large part of the Hospital overall financial resources and without this income we would be unable to provide the full range of services.

Staff at all levels and in all departments are the Hospital main resource and hence remain a major concern for the management team. Trends of recent years of experienced staff retiring continues to be a concern and particularly in relation to skill mix in a number of areas. Other external roles continue to attract our trained staff due either to location, housing, transport and sometimes direct financial benefits. Once again many of the smaller maternity units which have less intense and less complex activity levels are seeking additional staff and these roles prove attractive for many reasons. There are also many options often to engage in non frontline work in a number of other related sectors in both public and private institutions ie HIQA, hospital groups, NWHIP. The continued implementation of the Maternity Strategy has assisted somewhat with additional staff funding but it has also meant more jobs in other smaller Hospitals as previously noted. Qualified, trained, skilled and experienced staff are the prime resource in providing high quality patient services. We need to continue to develop and pursue initiatives to ensure that when we invest time and money in staff that we then retain these qualified and experienced staff.

Once again excellent clinical outcomes were sustained throughout the year despite the limitations of facilities and the strain on other resources. These outcomes are due to the continued commitment and enthusiasm of all staff.

We are proud of the fact that many Departments continue to attain and maintain accreditation to the highest of national and

international standards. Our labs have attained and retained accreditation to ISO15189 and we continue to maintain accreditation for the entire Hospital to environmental standard ISO14001:2015. Once again, our Catering Department were presented with a number of awards during the year, including a Distinction in the Food Safety Assurance Award. Our Pharmacists were finalists in the Patient Safety Category in the Hospital Professional Awards and the Dietitians were presented with awards at the Irish Nutrition and Dietetic Institute Research Symposium. All staff involved in these areas deserve to be congratulated for their efforts.

I would like to thank Professor Shane Higgins, Master, for his leadership and support over the first year of his seven year term. I would also like to thank Ms Mary Brosnan, Director of Midwifery and Nursing and Dr Roger McMorrow, Clinical Director for their continued support throughout the year. I also wish to thank Mr Alistair Holland and Mr Francis Rogers for their assistance and advice though the year. The continued support of Clare Gray ensures that much of the Hospitals administrative functions continue to be handled in a most efficient and professional manner and I wish to thank Clare for the continued invaluable contribution she makes to both myself and the Hospital. Finally, I wish to thank all the members of the Finance and Executive Committees for their continued assistance and support throughout the year.

It is with regret that I note the untimely and unexpected passing of our colleagues Dr Tina Murphy, ADOMN in March 2019 and Mr Ronan Power, Porter, Labour/Delivery Unit in early 2020. They will both be greatly missed by their friends and colleagues throughout the Hospital. A number of retired staff died during the year including Dr Declan Meagher, former Master and Consultant Obstetrician & Gynaecologist and long serving Governor. May they all rest in peace.

Despite all the challenges that face us every year the Hospital continues to provide a quality service with excellent clinical outcomes. This is no doubt due to the fantastic staff that work throughout the NMH. The coming years will present many other challenges and opportunities and as always our aim will be to continue to serve our patients and their families to the best of all of our abilities. The commitment of our staff is evident from our results and I thank everyone for their efforts throughout the year.

Ronan Gavin
Secretary/General Manager

Director of Midwifery and Nursing

This past year was interesting, eventful and challenging in equal measure. It was the start of the new Mastership of Professor Shane Higgins who took over the role at a time of great change, the introduction of the service of termination of pregnancy, following the passing of the required legislation at the end of December 2018.

The new TOP service was being introduced into all maternity hospitals, which was a major challenge, given the current inadequate infrastructure. The first week of January was extremely stressful for all of the health care professionals involved, with the requirement to develop guidelines, care pathways, recruit staff and create the appropriate governance structures for the new termination of pregnancy service. Staff in all parts of the hospital struggled with the challenge of dealing with this new service. At a practical level, the hospital infrastructure does not lend itself to facilitating privacy and there is a real deficit of single room accommodation. However with the usual 'can-do' approach of the team, the service was established and has been supported by a superb multidisciplinary team who are caring for women undergoing termination of pregnancy in the most professional and empathic manner.

Each year I remark on the efforts of the midwifery and nursing team in caring for women, babies and the families which takes great personal commitment. I receive countless messages from women who have been in touch to thank staff for their care and support during their pregnancy or gynae procedure. This is so appreciated by the staff as it is very easy to forget the fundamental and positive impact of the work of midwives and nurses on the lives of so many people. In February the INMO union called a national 'strike' which was the second time in the history of the professions that nurses and midwives were on strike for better pay and conditions. This was immensely challenging for the hospital, but with the cooperation of the union strike committee, the three week period passed uneventfully and a national resolution was reached to allow services to resume normally.

During the year our gynaecological/women's health services continued to expand. Services include urodynamics, colposcopy, perineal clinic, adolescent clinics, gynae-oncology, sub-fertility and outpatient hysteroscopy clinics and nurses are helping to drive improvements in all of these specialist areas.

The Neonatal intensive care unit experienced a very busy year, especially in the care of very premature babies. Advancements in care such as neonatal therapeutic hypothermia and the extension of national neonatal transport service ensures that neonatal outcomes are improving year on year with the expertise of the neonatal multidisciplinary team. The PRIME initiative to ensure that premature babies receive expressed breastmilk in the first hours of life has been extremely successful in improving neonatal outcomes and reducing the level of infection in neonates. It is a credit to the lactation and neonatal team that this initiative has been successfully implemented.

The community midwifery team have continued to develop and mentor other community teams in hospitals within IEHG and across the country. The 'labour hopscotch' tool which was launched two years ago was evaluated by its creator Sinead Thompson, as part of a research study in conjunction with UCD. The findings were published and launched in December at an event hosted in the hospital, attended by national midwifery leaders and Department of Health officials. Sinead is intending to work with the National Women and Infants Health Programme to introduce the Labour Hopscotch to all nineteen maternity units in Ireland in the coming year.

Whilst the birth rate in 2019 has decreased nationally and within our hospital, it is very clear that the complexity of our case mix is higher. Many women are becoming pregnant at an advanced age, more women require assisted fertility treatment, levels of obesity are rising. When women have higher care needs, they attend the clinics provided by midwives and the MDT (assisted care pathway). When a woman experiences a high risk pregnancy, the care is provided by obstetricians (specialist care pathway) and also supported by midwives and the multidisciplinary team. Each year some of our midwives are undertaking more specialist education in high dependency care, which is required due to additional numbers of women who require this care during and after the birth of their baby.

One of the consequences of increasing caesarean section rates is the rise in the number of pregnancies complicated by placenta accreta spectrum. In March, the Placenta Accreta Spectrum Support group was launched in the hospital by Professor Donal Brennan. The support group was arranged with the assistance of Rachel Irwin, Quality Manager of the NMH. It was attended by many women who have been through such a complicated pregnancy and surgery involved and the PASS group is chaired



Charter Day Midwifery and Nursing Medal Prize Winners: Lucille Sheehy, Assistant Director of Midwifery & Nursing, Clinical Practice Development Coordinator, Aisling Taylor, Dawn Smyth, Elaine McEllistrom, Siobhan O'Doherty, Anna Mockler with Mary Brosnan, Director of Midwifery & Nursing

by co-founder Naomi Cooney. The group meets in NMH monthly and is being joined by women from other hospitals who have experienced this complication. The group has also been fundraising and has launched excellent educational resources and a very informative website.

Bereavement care is central to providing a holistic approach for women and their families. Our team continue to evolve their approach to meeting the needs of bereaved parents, with the establishment of a new miscarriage support group led by Brenda Casey. On the first Sunday in October, the Annual Remembrance service was held in St Andrews Church, Westland Row with almost 1000 parents, families and staff participating. We could not do this without a lot of support from current and former retired staff and we are also very grateful to Feilecain and A Little Lifetime for their support in helping us to provide cool cots and memory boxes for parents when they have experienced a bereavement during the year.

During the year, the planning of the new National Maternity Hospital at the SVUH campus continued at a pace and we are very fortunate to have been joined by Pauline Treanor who took on the role of Project Management Coordinator, supported by Gillian Canty and colleagues in the project management office. Accenture were appointed in July to support the Operational Readiness function and to assist in the development of a business case for the NMH@Elm Park project. Many midwifery and nursing staff are working on user groups, which is essential in order to maximise the clinical expertise in the planning phase.

Part of planning for our future in Elm Park involves preserving our present and past. In April, we welcomed Jeanette Lowe as our Artist in Residence, to collate an anthology of the hospital in a photographic form. In September we also welcomed Emilie Pine as our Writer in Residence. Emilie is spending time in the hospital meeting staff and patients to create a literary piece to reflect life in the hospital. We look forward to seeing both outcomes of this creative approach which is exciting for our hospital team.

Education of midwifery and nursing students is essential to ensure we have a highly skilled midwifery and nursing workforce for the future and we continue to work with our academic partners in UCD to ensure our programmes are meeting the needs of the service. I wish to congratulate all of our graduates and staff who undertook postgraduate programmes, on their achievements during the year. The education team led by Lucille Sheehy, the clinical placement coordinators, higher diploma midwifery co-ordinator, clinical skills facilitators and the preceptors in each of the clinical areas provided great support to the students. I particularly want to pay tribute to Carmel Conaty who was voted by the students as Preceptor of the year.

The Joint Research Network (JRN) with UCD and NMH continues to develop and we have had published two reports this year the Perineal Management Study and an evaluation of the Labour Hopscotch framework. Members of the JRN presented findings from a number of research projects nationally and internationally at conferences. The JRN won the research category at the Irish Health Centre Awards in September. We marked the International Day of the Midwife on the 5th May and the International Day of the Nurse 12th May, with a joint celebration in the sitting room hosted by the practice development team and it was a wonderful event for all.

In 2019 many senior staff members, Nicola Clarke, Joan Ward, Teresa O'Driscoll, Margaret Cooke, Mary Giblin, Niamh Dougan, Eileen Sheridan, Lorraine O'Hagan, Joyce Miley, Brenda Hayes and Aine Daly retired from our team after many long years of service to the hospital which was greatly appreciated by ourselves and by patients throughout their careers. We wish each of them many years of good health and happiness in the future.

I want to reiterate my gratitude to all the midwifery and nursing and care assistant staff for all of their efforts to support maternity, neonatal and gynaecology care within the hospital. I want to pay particular tribute to my Assistant Directors of Midwifery and Nursing on day and night duty who are personally supportive to me and without whom I could not function. I particularly wish to congratulate Ann Calnan and Valerie Kinsella on being promoted to Assistant Director of Midwifery and Nursing. Caroline Brophy on achieving her AMP (Assisted Maternity Care) and Valerie Spillane and Carol Pugh to their CMM 3 roles. They have made a great contribution to our team in the last year. I am also extremely grateful to my PA Siobhan Flanagan and my HR colleague Lisa Murray who work with me daily in my office supporting myself and the team, with humour and professionalism.



Mary Brosnan, Director of Midwifery & Nursing with Carmel Conaty who was voted by the students as Preceptor of the Year

Finally, I will end with a tribute to our dear friend and colleague Tina Murphy who died suddenly and tragically in March after a very brief illness. Tina was an incredible friend who worked in the hospital for most of her life. She was professional, hard working, loyal and generous. She was the first midwife to be awarded a PhD in Midwifery, whilst working clinically. She was the Project Manager for the successful introduction of the electronic patient record, MNCMS. She was a true 'Holles Street' midwife and is missed every day by all of us.

Mary Brosnan
Director of Midwifery & Nursing

Audit Committee

The Audit Committee continued its work throughout the year monitoring and reviewing the Hospital's internal financial controls.

During the year the Committee met with the Hospital's external auditors, PWC, to agree their terms of engagement for the annual financial audit. The Committee approved the Financial Statements, the Annual Report and the Annual Compliance Statement.

The Committee reviewed reports prepared by the Hospital's Internal Auditors on IT Governance and Security, Human Resources, Internal Financial Controls, Risk Management as well as a follow up review on previous internal audit recommendations.

The Committee has also considered the implications of the adoption of the Charities' SORP (Statement of Recommended Practice) for the Hospital's accounts.

The members of the Audit Committee are Mr Frank Downey (Chair), Ms Michelle Connolly, Prof Peter McParland, Ms Mairéad Butler and Mr Aidan Devlin. Mr Ronan Gavin (Secretary/General Manager, NMH) and Mr Alistair Holland (Financial Controller, NMH) also normally attend Committee meetings.

Frank Downey

Chair

House Committee

The House Committee is one of the longest serving sub committees of the Board and meets five times each year. The Committee conducts unannounced independent quality assurance inspections of the Hospital's facilities and equipment and communicates these findings to the Executive Management Team and the Board. The House Committee plays a significant role in ensuring that the Hospital's infection control strategies are effective and identifying issues that might otherwise be overlooked.

In 2019, the Committee assessed 10 clinical areas of the hospital, achieving an overall score of 93.06%, exceeding the hospital's target of 85%.

The 2019 members of the House Committee were: Ms Catherine Altman, Chair, Ms Mary Brosnan, Director of Midwifery & Nursing, Ms Sarah Appleby, Ms Sheena Carton, Ms Jane Collins, Ms Fiona Davy, Ms Elaine Doyle, Ms Lydia Ensor, Ms Judith Meagher, Ms Kate Higgins, Ms Margaret McCourt, Ms Margo McParland, Ms Anne Murphy, Ms Teresa Murphy, Ms Kathleen O'Grady, Ms Aoife O'Shea and Ms Bernie Spillane.

The Committee wishes to thank Prof Shane Higgins, Master, Ms Mary Brosnan, Director of Midwifery & Nursing, Mr Ronan Gavin, Secretary/General Manager and Mr Mark Anderson, Hygiene Services Manager for their support and assistance during the year.

Catherine Altman

Chair



Bernie O'Brien, Assistant Director of Midwifery and Nursing, Mary Brosnan, Director of Midwifery and Nursing, Dr Roger McMorrow, Consultant Anaesthetist, Margaret Hanahoe and Ann Rath Assistant Directors of Midwifery and Nursing (Left to right) celebrating Culture Night! (image credit Jeannette Lowe)

Quality Risk and Patient Safety Committee

The Quality Risk and Patient Safety (QRPS) Committee of the Board operates under the mandate (terms of reference) approved by the Executive Committee (Board) in November 2018 which are reviewed and amended where necessary on an annual basis.

The aim of the QRPS Committee is to:

- i. Drive quality, risk and patient safety strategy, management and improvement within the National Maternity Hospital; and,
- ii. Provide a level of assurance to the Board that there is adequate and suitable governance of quality, risk and patient safety in place.

To this end the QRPS Committee met 5 times during the year (mandated to meet at least 4 times per year) to consider reports, both internally and externally generated, and key performance indicators evidencing the application of the hospital's clinical risk management and governance framework.

Other matters considered during the year included:

- The development of a Performance and Patient Safety dashboard for Board reporting purposes.
- Presentation by Assistant Director of Midwifery and Nursing on Open Disclosure obligations
- Presentation by Chief Pharmacist of Hospital's contingency planning for continuity of critical pharmacy supplies in the event of a hard Brexit

- Approval of updated Risk Management Policy
- Implementation of General Data Protection Regulation (GDPR)
- Oversight of the management of specific risks related to the implementation of the National Maternal and Newborn Clinical Management System (MN-CMS).
- Migration of QRPS systems to cloud based platform.

The 2019 members of the QRPS Committee were : Ms Jane McCluskey (Chair until March); Mr Aidan Devlin (Vice Chair until March, Chair since March); Ms Patricia O'Shea (Vice Chair since March); Dr Ingrid Browne; Ms Mairéad Butler (appointed November 2019); Mr Frank Downey; Prof Declan Keane, Dr Roger McMorro (appointed November 2019), Prof Colm O'Herlihy and Cllr Naoise Ó Muirí. In accordance with Clause 8.1 of the QRPS Committee mandate, Ms Mary Connolly (External Advisor, AON), Dr Luke Feeney (Director of Quality Risk and Patient Safety) and Mr. Ronan Gavin (Secretary/Manager of NMH) also normally attend QRPS meetings.

The Committee wishes to thank the Master, Mr Ronan Gavin, Dr Luke Feeney and Ms Mary Connolly for their support and assistance during the year.

Aidan Devlin
Chair



NMH 'Keep Cups' were launched during the year to celebrate our 125th Anniversary and World Prematurity Day. Introducing Keep Cups is just one of the initiatives the NMH GoGreen Team worked on to help build a greener future for generations to come

Board of Governors

Governors Ex-Officio

Dr Diarmuid Martin (Archbishop of Dublin – Chairman)
 Councillor Paul McAuliffe (Lord Mayor - Vice Chairman)
 Prof Shane Higgins (Master)
 Very Rev. Fachtna McCarthy, Administrator, Parish of Haddington Road
 Very Rev. John McDonagh, Parish Priest of the Parish of Sandymount
 Very Rev. Enda Cunningham, Administrator, Parish of St. Andrew, Westland Row

Nominated by the Minister for Health

Ms Patricia O'Shea
 Vacant

Nominated by Dublin City Council

Councillor Claire Byrne (*to June*)
 Councillor Mícheál MacDonncha (*to June*)
 Councillor James Geoghegan (*from June*)
 Councillor Catherine Stocker (*from June*)

Governors Elected

1969 Dr Alan O'Grady
 1980 Dr John R McCarthy
 1980 Dr Niall O'Brien
 1981 Mr J. Brian Davy
 1983 Mrs Judith Meagher
 1985 Dr Jack T. Gallagher
 1986 Mr Gabriel Hogan
 1989 Mrs Anne Davy
 1990 Mrs Margaret Anderson
 1990 Mrs Kathleen O'Grady
 1991 Dr John F. Murphy
 1992 Dr Frances Meagher
 1992 Mr Kevin Mays
 1995 Dr Declan O'Keeffe
 1995 Professor Colm O'Herlihy
 1996 Mr William Johnston, (Honorary Secretary)
 1997 Dr Peter Boylan
 1998 Mrs Joanne Keane
 1998 Mrs Anne Murphy
 1998 Mr Frank Downey
 1998 Mr Anthony Garry



Nicholas Kearns, Deputy Chairman, Mary Brosnan, Director of Midwifery & Nursing, Prof Shane Higgins, Master and Ronan Gavin, Secretary/Manager at Charter Day celebrations



Siobhan O'Doherty was awarded the Hospital Gold Medal (BSc Midwifery) by Nicolas Kearns, Deputy Chairman

- 2000 Dr Freda Gorman
- 2001 Mrs Jane Collins
- 2001 Ms Alexandra Spain
- 2001 Mrs Margo McParland
- 2001 Mrs Catherine Altman
- 2001 Dr John Murphy, Paeds
- 2003 Mr Niall Doyle
- 2003 Ms Lydia Ensor
- 2003 Ms Sara Appleby
- 2005 Ms Caroline Hayes (Simons)
- 2005 Dr Peter Lenehan
- 2005 Dr Orla Sheil
- 2005 Prof Peter McParland
- 2005 Ms Sheena Carton
- 2005 Ms Elaine Doyle
- 2005 Prof Declan Keane
- 2005 Ms Maeve Dwyer
- 2007 Dr Kevin McKeating
- 2007 Mrs Mary Donohoe
- 2008 Ms Catherine Ghose
- 2011 Mr Barry Dixon
- 2011 Ms Paula Reid
- 2011 Ms Suzanne O'Brien
- 2011 Ms Margaret McCourt

- 2011 Ms Bernie Spillane
- 2011 Ms Teresa Murphy
- 2011 Ms Eugénée Mulhern
- 2011 Ms Fiona Davy
- 2012 Dr Michael Robson
- 2012 Dr Deirdre MacDonald
- 2013 Prof Fionnuala McAuliffe
- 2013 Ms Jane McCluskey
- 2013 Ms Isabel Foley
- 2013 Cllr. Naoise Ó Muirí
- 2013 Ms Elizabeth Nolan
- 2014 Dr Ingrid Browne
- 2015 Mr Stephen Vernon
- 2015 Ms Rachel Hussey
- 2015 Ms Niamh Callaghan
- 2015 Mr Aidan Devlin
- 2015 Ms Lisa Taggart
- 2015 Ms Helen Caulfield
- 2015 Mr Pdraig McManus
- 2015 Ms Marie Daly Hutton
- 2015 Mr Nicholas Kearns (Deputy Chairman)
- 2016 Ms Michele Connolly (Honorary Treasurer)
- 2016 Ms Aoife O'Connor
- 2017 Ms Mairéad Butler
- 2017 Ms Christine Moran
- 2017 Mr Justice David Barnville
- 2018 Dr Roger McMorrow
- 2019 Dr Rhona Mahony
- 2019 Dr Paul Downey
- 2019 Mrs Kate Higgins
- 2019 Ms Aoife O'Shea
- 2019 Ms Caroline Devlin
- 2019 Ms Denise Cole
- 2019 Ms Gráinne Hennessy

The Board

Nicholas Kearns, *Deputy Chairman*

Nicholas Kearns served as a judge of the Supreme Court from 2004 – 2009 and was President of the High Court from 2009 to 2015 and a Judge of the High Court from 1998 to 2015. He retired as President of the High Court in December 2015. He was elected Deputy Chairman of the National Maternity Hospital in November 2015.



William Johnston, *Honorary Secretary*

William Johnston is an economics graduate of Trinity College Dublin, a solicitor, the external examiner in Banking Law for the Law Society, a member of the Banking Law Senior Advisory Board of the International Bar Association, and a Director of the Housing Finance Agency and the Port of Waterford.



Michele Connolly, *Honorary Treasurer*

Michele Connolly is a Chartered Accountant with over 25 years commercial experience. She is currently a partner in professional practice. She specialises in supporting State, Semi State, not for profit and commercial companies in fund raising, development of new infrastructure and general financial matters.



Prof Shane Higgins, *Master*

Shane Higgins, is a Consultant Obstetrician/Gynaecologist and the current Master of The National Maternity Hospital. He is an Associate Professor at UCD, Department of Obstetrics & Gynaecology and has a special interest in Maternal-Fetal Medicine. Shane has a broad range of clinical and management experience gained within Ireland, Scotland and Melbourne, Australia.



David Barniville

David Barniville is the Judge in charge of the Commercial Division of the High Court and is also the designated arbitration judge. He previously practised as a Senior Counsel at the Irish Bar. David was previously chairman of the Council of the Bar of Ireland and of Irish Rule of Law International and was a member of the Legal Services Regulatory Authority and of the Legal Aid Board.



Dr Ingrid Browne

A graduate of RCSI medical school, Ingrid Browne has been a Consultant Anaesthesiologist for the past 16 years to National Maternity Hospital and St Vincent's University Hospital. She is a fellow of the College of Anaesthesiologists and holds a Masters in medical science. She completed post graduate fellowship training in obstetric anaesthesia at Columbia University NYC.



Mairéad Butler

Mairéad Butler is a Chartered Accountant and has spent most of her career in financial services in Dublin and Sydney, working in risk, compliance and communications roles. She is also a Director of An Cosán, a charity focused on education as a pathway out of poverty.



Fr Enda Cunningham

Son of a NMH nurse, Fr Enda serves as Administrator of Westland Row parish and chaplain to the National Maternity Hospital.



Aidan Devlin

Aidan Devlin is a Chartered Accountant and a UCC Commerce graduate. He is a member of the Institute of Directors in Ireland and the Mediators Institute of Ireland. Aidan has over 35 years' experience in Corporate Banking and Project Finance both in Ireland and the Middle East and is a Senior Manager with National Asset Management Agency. Aidan was a founding board member of the NMH Foundation.



Frank Downey

Frank Downey has over 30 years' experience as an Actuarial and Employee Benefits Consultant. Frank is an economics graduate of Trinity College, Dublin, a Director of Invesco Limited and an actuary and advisor for corporate clients. Frank also acts as a trustee for a number of large pension schemes.



Cllr James Geoghegan

James Geoghegan is an elected member of Dublin City Council, practising Barrister at Law in Ireland with a mixed civil practice with a focus on Banking Law, Administrative Law, European Union Law and civil proceedings related to crime.



Prof Declan Keane

Declan Keane has been a Consultant Obstetrician since 1985 and is a former Master of the Hospital. He has worked in the UK and the USA and was recently appointed as a Professor to the RCSI. He has considerable administrative experience and was a former member of the National Women's Council and was the obstetrician advising the Citizen's Assembly on the 8th Amendment.



Prof Fionnuala McAuliffe

Fionnuala McAuliffe is Chair and Professor of Obstetrics & Gynaecology, UCD, Director UCD Perinatal Research Centre, Head, Women's and Children's Health, UCD, Consultant Obstetrician & Gynaecologist at The National Maternity Hospital. Her subspecialty area is maternal and fetal medicine and she is Programme Director of the RCOG maternal and fetal medicine subspecialisation fellowship at NMH. She has received significant grant funding both nationally and internationally. Fionnuala has developed guidelines for pregnancy both in Ireland, UK and internationally.



Jane McCluskey

Jane McCluskey is a lawyer with a large multinational technology company and has over ten years' experience practising corporate, commercial and intellectual property law. She is also a registered trade mark agent. Jane is Mum to three children, all of whom were born at the National Maternity Hospital.



Dr Roger McMorrow

Roger McMorrow is a graduate of The Queens University of Belfast and he has been a consultant anaesthetist at the National Maternity Hospital and St Vincent's University Hospital since 2009. He has served as Clinical Director of the NMH since January 2018. He has a specialist interest in high risk obstetrics, clinical risk and high altitude mountaineering. In 2007 he was part of an expedition that reached the summit of Mt Everest.



Prof Peter McParland

Peter McParland is a Consultant Obstetrician/Gynaecologist in the National Maternity Hospital with a special interest in Maternal Fetal Medicine.



Christine Moran

Christine Moran is a commerce graduate of UCD, a Chartered Accountant, a Chartered Director and a Certified Investment Fund Director. She previously held senior leadership roles in the corporate and institutional markets and has extensive experience in the areas of governance, finance and risk management. She is a non-executive director of several commercial and not-for-profit organisations.



Eugénée Mulhern

Eugénée Mulhern is a senior adviser in the Corporate and M&A Practice of A&L Goodbody. She was formally Director in Corporate Finance in J&E Davy for 15 years. Eugénée has a degree in Law and Economics from NUIG, an LLM in International Commercial Law from UCD and an MBA from Trinity College Dublin. She has also received a certificate and diploma in Company Direction from the Institute of Directors.



Dr John Murphy

John Murphy is a Consultant Paediatrician in the National Maternity Hospital and Paediatric & Neonatal Clinical Lead with the HSE in Clinical Strategy & Programmes Directorate. His is also editor of the Irish Medical Journal.



Cllr Naoise Ó Muirí

Naoise Ó Muirí has served as a Dublin City Councillor since June 2004 and is a former Lord Mayor of Dublin. Naoise studied Engineering at the National University of Ireland, Galway and runs a technology company.



Prof Colm O'Herlihy

Colm O'Herlihy is a medical graduate of University College Dublin and an Obstetrician Gynaecologist. He served as Assistant Master in the National Maternity Hospital and subsequently as Professor of Obstetrics & Gynaecology in UCD and the NMH for over 30 years. He has been a member of the Irish Medical Council and is currently a member of the Board of the Nurses & Midwives Board of Ireland.



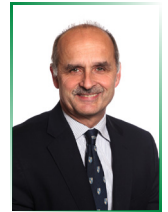
Patricia O’Shea

Patricia O’Shea is a law graduate of University College Cork and is Group Head of Legal Affairs & Secretariat for a semi-state company. She was formerly General Counsel of a US multinational company serving as Company Secretary and a Director of a group company.



Dr Michael Robson

Michael Robson is a Consultant Obstetrician/Gynaecologist and former Master of the NMH. Dr Robson is Joint National Clinical Lead for the development of the Maternal and New-born Clinical Management System (electronic patient record). He also developed the methodology for the classification of caesarean sections, known world-wide as the Robson 10.



Cllr Catherine Stocker

Catherine Stocker is a member of Dublin City Council. Her professional background is in the area of higher education access for Trinity College Dublin. She has also worked previously for Newstalk FM.



Stephen Vernon

Stephen Vernon is one of the founders of Green Property Group and has extensive experience in property and property development in Ireland and the UK. A Bristolian, educated in London, Mr Vernon has been based in Ireland for several years.



Committee Members

Executive Committee (The Board)

Dr Diarmuid Martin, *Archbishop of Dublin, Chairman*
 Lord Mayor of Dublin, Cllr. Paul McAuliffe, *Vice Chairman*
 Mr Nicholas Kearns, *Deputy Chairman*
 Ms Michele Connolly, *Honorary Treasurer*
 Mr William Johnston, *Honorary Secretary*
 Prof Shane Higgins, *Master*
 Mr Justice David Barniville
 Dr Ingrid Browne
 Ms Mairéad Butler (*from Jan*)
 Cllr. Claire Byrne (*to June*)
 Very Rev. Fr Enda Cunningham
 Mr Aidan Devlin
 Mr Frank Downey
 Ms Isabel Foley (*to Nov*)
 Cllr. James Geoghegan (*from June*)
 Prof Declan Keane
 Dr Rhona Mahony (*Jan to June*)
 Mr Kevin Mays (*to June*)
 Ms Christine Moran
 Ms Eugénée Mulhern
 Dr John Murphy
 Prof Fionnuala McAuliffe
 Ms Jane McCluskey
 Cllr. Mícheál MacDonncha (*to June*)
 Prof Peter McParland
 Dr Roger McMorrow (*from June*)
 Ms Elizabeth Nolan (*to June*)
 Prof Colm O'Herlihy
 Cllr. Naoise Ó Muirí
 Ms Patricia O'Shea
 Dr Michael Robson
 Cllr. Catherine Stocker (*from June*)
 Mr Stephen Vernon

In Attendance

Mr Ronan Gavin, *Secretary/General Manager*
 Ms Mary Brosnan, *Director of Midwifery & Nursing*
 Mr Alistair Holland, *Financial Controller*

Finance Committee

Mr Nicholas Kearns, *Deputy Chairman*
 Ms Michele Connolly, *Honorary Treasurer*
 Mr William Johnston, *Honorary Secretary*
 Prof Shane Higgins, *Master*
 Ms Isabel Foley (*to Nov*)
 Ms Denise Cole (*from Dec*)
 Ms Christine Moran

In Attendance

Mr Ronan Gavin, *Secretary/General Manager*
 Ms Mary Brosnan, *Director of Midwifery & Nursing*
 Mr Alistair Holland, *Financial Controller*

Audit Committee

Mr Frank Downey, *Chair*
 Ms Michele Connolly, *Honorary Treasurer*
 Ms Mairéad Butler
 Mr Aidan Devlin
 Prof Peter McParland

In Attendance

Mr Ronan Gavin, *Secretary/General Manager*
 Mr Alistair Holland, *Financial Controller*

QRPS Committee

Mr Aidan Devlin, *Chair*
 Ms Patricia O'Shea, *Vice Chair*
 Dr Ingrid Browne (*from Jan*)
 Ms Mairéad Butler (*from Sept*)
 Mr Frank Downey
 Prof Declan Keane
 Ms Jane McCluskey
 Dr Roger McMorrow (*from Sept*)
 Prof Colm O'Herlihy
 Cllr. Naoise Ó Muirí

In Attendance

Ms Mary Connolly, *AON*
 Dr Luke Feeney, *Director of Quality, Risk & Patient Safety*
 Mr Ronan Gavin, *Secretary/General Manager*



Dr Larry Crowley, Consultant Anaesthetist at the Annual NMH Fashion Show in aid of The NMH Foundation held during the year

Co-location Committee

Mr Stephen Vernon, *Chair*
 Ms Michele Connolly, *Honorary Treasurer*
 Ms Isabel Foley (to Nov)
 Ms Gráinne Hennessy (from Dec)
 Dr Roger McMorrow (from Dec)
 Ms Elizabeth Nolan (to Jun)

In Attendance

Prof Shane Higgins, *Master*
 Dr Orla Sheil
 Ms Pauline Treanor
 Mr Ronan Gavin

Nominations Committee

Mr Nicholas Kearns, *Chair*
 Mr William Johnston, *Honorary Secretary (from Jan)*
 Ms Michele Connolly, *Honorary Treasurer (from Jan)*
 Prof Shane Higgins, *Master (from Jan)*
 Dr Peter Boylan
 Prof Declan Keane
 Ms Eugénée Mulhern
 Dr John Murphy
 Ms Paula Reid

In Attendance

Mr Ronan Gavin, *Secretary/General Manager*

House Committee

Ms Catherine Altman, *Chair*
 Ms Mary Brosnan, *Director of Midwifery & Nursing*
 Ms Sara Appleby
 Ms Sheena Carton
 Ms Jane Collins
 Ms Fiona Davy
 Ms Elaine Doyle
 Ms Lydia Ensor
 Mrs Kate Higgins (from Jan)
 Ms Judith Meagher
 Ms Margaret McCourt
 Ms Margo McParland (to Dec)
 Ms Anne Murphy
 Ms Teresa Murphy
 Ms Kathleen O'Grady
 Ms Aoife O'Shea (from June)
 Ms Bernie Spillane

In Attendance

Mr Mark Anderson, *Hygiene Services Manager*

NMH Executive Ethics Committee

Dr John Murphy, *Consultant Paediatrician, Chair*
 Mr William Johnston, *Honorary Secretary*
 Prof Shane Higgins, *Master*
 Ms Catherine Altman
 Dr Peter Boylan
 Dr Ingrid Browne
 Mr Frank Downey
 Dr Paul Downey (from Jan)
 Ms Maeve Dwyer (to Dec)
 Mr Kevin Mays (to June)

Professional Advisors

Law Advisors

Mason, Hayes & Curran, South Bank House, Barrow Street, Grand Canal Dock, Dublin 4.
 Arthur Cox, Ten Earlsfort Terrace, Dublin 2.

Bankers

The Bank of Ireland, 2 College Green, Dublin 2.

Auditors

External
 Price Waterhouse Coopers, Chartered Accountants, One Spencer Dock, North Wall Quay, Dublin 1.
 Internal
 BDO, Beaux Lane House, Mercer Street Lower, Dublin 2.



Mary Brosnan, *Director of Midwifery*, Kerry Beckett, *Marketing Manager*, its4women.ie, Evie Baxter, Victoria Smurfit, Dr. John Murphy, *consultant neonatologist, The National Maternity Hospital* and Prof Brendan Buckley, *Chair of Fighting Blindness*

Members of Staff

Resident and Visiting Medical Staff

Master

Prof Shane Higgins, MRCOG, FRANZCOG, MPH (Melb)

Department of Obstetrics and Gynaecology

Dr Cathy Allen, MB, MRCOG, MRCPI
 Dr Grainne Flannelly, MB, BCh, BAO, FRCOG, FRCPI, MD (Aberdeen)
 Dr Myra Fitzpatrick, MD MRCOG
 Dr Gerard Agnew, MRCPI, MRCOG
 Prof Donal Brennan MB, MRCPI, MRCOG, PhD
 Dr Venita Broderick, MB, BCh, BAO, MRCPI, MRCOG
 Dr Stephen Carroll, MB, BCh, BAO, FRCOG, FRCPI, MD (UCD)
 Dr Siobhán Corcoran MB BCh BAO MRCPI MRCOG MD
 Dr Zara Fonseca-Kelly, MB BCh BAO MRCPI MRCOG
 Dr Mona Joyce, FRCOG
 Dr Eithne Linnane, MB, BCh, BAO
 Dr Fiona Martyn, MB, BCh, BAO, MRCOG
 Dr Rhona Mahony, MD, FRCOG, EF, FRCPI, Hon FACOG
 Prof Peter McParland, MD, FRCOG, MRCPI
 Dr Ruaidhri McVey, MB BCh BAO LRCP&SI (Hons) MRCSI MRCPI
 MRCOG MD MCE MSc
 Dr Laoise O'Brien, MB, BCh, BAO, MRCPI, MRCOG
 Dr Michael Robson, FRCS, MRCOG, FRCPI
 Dr Orla Sheil, MD, FRCOG, FRCPI
 Dr Helen Spillane, MB, BCh, BAO, MRCOG
 Dr Jennifer Walsh MB BCh BAO MRCPI MRCOG PhD
 Prof Mary Wingfield, MD, FRCOG

Department of Obstetrics and Gynaecology, University College Dublin

Prof Mary Higgins, MSc (Ox), MD, FRCOG, FRCPI
 Prof Fionnuala McAuliffe, MD, FRCOG, FRCPI
 Dr Donal O'Brien, MB, MRCOG, MRCPI

Department of Obstetrics and Gynaecology, Royal College of Surgeons

Prof Michael Foley, MB, MAO, FRCPI, FRCOG
 Prof Declan Keane, MD, FRCPI, FRCOG, Professor/Senior Lecturer in Obstetrics/Gynaecology

Department of Pathology and Laboratory Medicine

Director: Dr Susan Knowles, MD, FRCPath, FFPATHRCPI
 Dr Joan Fitzgerald MB, BCh, BAO, BSc, FRCPath, FRCPI, FFPATHRCPI
 Dr David Gibbons, MB, FCAP
 Dr Paul Downey, MB, FRCPI, FRCPath, FFPATHRCPI
 Dr Eoghan Mooney, MB, MRCPI, FRCPath, FFPATHRCPI
 Dr Karen Murphy, MB, FRCPath, FFPATH, FRCPI

Department of Paediatrics and Neonatology

Director: Dr Claudine Vavasseur, MB, BCh, BAO, MRCPCH, MD
 Dr Anna Curley, MB, MRCPI, MD
 Dr Jan Franta, MUDr
 Dr Lisa Mc Carthy, MB, MRCPI, PhD
 Prof John F Murphy, MB, FRCPI
 Prof Colm O'Donnell, MB, MRCPI, MRCPCH, FRACP, PhD
 Dr Jyothsna Purna MBBS, MRCPCH (UK)
 Dr Deirdre Sweetman, MB, MRCPI, PhD
 Dr Anne Twomey, MD, MRCPI, FAAP
 Dr Eoin O'Curraín, MB BCh BAO, MRCPI, FRACP

Department of Anaesthetics

Director: Dr Larry Crowley, MB BCh BAO, MRCPI, FCARCSI
 Dr Ingrid Browne, MB, BCh, BAO, M Med Sci, FFARCSI
 Dr Siaghal MacColgain, MB BCh BAO LRCP SI, FCARCSI, DPMCAI
 Dr Siobhan McGuinness, MBBS, FANZCA, GradCertHlthProfEd
 Dr Kevin T McKeating MB BCh BAO, FFARCSI, FFPMAI
 Dr Roger McMorrow, MB, BCh, BAO, FCARCSI, Dip Med Man, Dip Mtn Med (*Clinical Director*)
 Dr Ola Petter Rosaeg, MB, FRCPC

Psychiatrist

Dr Anthony McCarthy, MB, BAO, BCh, MRCPI, MRCPsych

Department of Radiology

Department Lead: Dr Gabrielle C. Colleran, MB, BCh, BAO, MD, IMRCS, FFR RCSI
 Dr Brigid V Donoghue, MB, DMRD (London), FRCR, FFR, RCSI (to Nov)
 Dr Risteard O'Laoide, FRCR, FFR, RCSI, FRCPI
 Dr Ian Robinson, MB ChB FRANZCR CCD
 Dr Suzanne Shine MB BCh

Respiratory Physician

Dr John Garvey, MB, BCh, BAO PhD, MRCRI, MRCP

Cardiovascular Medicine

Prof Alice Stanton MB, BSc, P Grad Dip (Stats), PhD, FRCPI

Diabetic Physician/Endocrinologist

Prof Mensud Hatunic MD, MRCPI

Ophthalmologist

Dr Michael O'Keeffe, MB, FRCSE

Honorary Consulting Staff

Physician in Chemotherapeutic Medicine

Dr David Fennelly, MB, BCh, BAO, LRCSI, MRCPI

Adult Nephrology

Prof Alan Watson, MD, FRCPI, FACP, FRCP

Dr John Holian MB, MRCPI, PhD

Occupational Physician

Dr Sheelagh O'Brien MRCPI, MSc, FFOMI

Chemical Pathology

Prof Carel LeRoux, MBChB, MSc, FRCP, FRCPath, PhD

Dr Patrick Twomey, BSc, MB, FRCPath, FFPATHRCPI

Microbiology

Dr Niamh O'Sullivan, LRCP&SI, MB, BCh, FRCPath

Anatomical Pathology

Dr Peter Kelehan, MB, MSc, FRCPath

Hepatology

Prof Aiden McCormick MD FRCP FRCPI FEBGH FAASLD

Gastroenterology

Dr Juliette Sheridan, PhD, MB BCh BAO, MRCPI

Surgeons

Mr Enda McDermott, MCh, FRCSI

Prof Martin Corbally, MB, BCh, BAO, MCh, FRCSI, FRCS (Paed Surg)

Mr Feargal Quinn, MB, FRCSI

Oto-Rhino-Laryngologist (ENT Surgeon)

Mr Alex Blayney, MCh, FRCS, FRCSI

Urological Surgeons

Mr David Mulvin, MCh, FRCSI

Mr David Quinlan, FRCSI

Mr Gerry Lennon, NCH, FRCSI

Genitourinary Medicine

Prof Fiona Mulcahy, MD, FRCPI

Gastroenterologist

Prof Hugh E Mulcahy MD, FRCPI

Orthopaedic Surgeon

Mr Damian McCormack, BSc, MCh, Orth

Dermatologist

Dr Aoife Lally, MB MRCPI

Paediatric Cardiologists

Dr Paul Oslizlok, MB, FRCPI

Dr David Coleman, MB, ChB, FRACP

Dr Colin McMahon, MB, BAO, BCh, MRCPI, MRCP (UK), FAAP

Adult Cardiology

Dr John Erwin, tbc

General and Colorectal

Prof P Ronan O'Connell, MD, FRCSI

Dr Ann Hanley, MD, FRCSI

Paediatric Neurology

Dr Bryan Lynch, MB, BCh, BAO, FAAP

Dr David Webb, MB, BAO, BCh, MRCPI, MD, FRCPCH

Prof Mary King, FRCPCH, FRCPI

Paediatric Neurosurgery

Mr Darach Crimmins FRCF (FN)

Mr John Caird, MD, MMedSci, FRCS (SN)

Adult Neurologists

Dr Conor O'Brien, MB, MSc, PhD, CSCN (Emg), FRCPI

Dr Janice Redmond, MT, MD, FRCPI, FACP, DAB Psych Neuro, DAB Elec-Diag Med
 Prof Niall Tubridy, MB, BCh, BAO, MD, FRACP, FRCPI

Paediatric Infectious Diseases

Prof Karina Butler, MB, FRCPI

Infectious Diseases

Prof Colm Bergin, MB, FRCPI, MRCP (UK)

Clinical Geneticist

Dr William Reardon, MD, MRCPI, FRCPCH, FRCP (London)

Palliative Medicine

Dr Marie Twomey, MB, MRCPI

Rheumatology

Prof Douglas J Veale MD FRCPI FRCP (Lon)

Prof Oliver FitzGerald MD FRCPI FRCP (UK)

Neonatology

Prof Eleanor Molloy, MB, BCh, BAO, PhD, FRCPI, MRCP, MRCPC



Hilda Wall CMM3 Neonatal Unit, Dr Freda Gorman, retired Consultant Neonatologist and Dr Anne Twomey, Consultant Neonatologist (image credit Jeannette Lowe)

Non-Consultant Hospital Doctors

Specialist Registrars in Obstetrics/Gynaecology

January to July

Dr Ann McHugh SpR *Assistant Master*
 Dr Somaia Elsayed SpR
 Dr Aoife McSweeney SpR
 Dr Rachel Elebert SpR
 Dr Michael Carey SpR *UCD Tutor*
 Dr Ciara McCormick SpR
 Dr Catherine McNestry SpR *RCSI Tutor*
 Dr Aoife McTiernan SpR
 Dr Catherine Windrim Reg
 Dr Kate O'Doherty Reg
 Dr Mary Barrett Reg
 Dr Simon Craven Reg SMH
 Dr Ciara Nolan Reg
 Dr Abdelaziz Satti Reg
 Dr Branko Denona
 Dr Manon Vouga Reg
 Dr Fatima Rowili Fellow

July to December

Dr Sorca O'Brien SpR *Assistant Master*
 Dr Hugh O'Connor SpR
 Dr Nikita Deegan SpR
 Dr Daniel Galvin SpR *UCD Tutor*
 Dr Eibhlin Healy SpR
 Dr Nada Warreth SpR
 Dr Alison Demaoi SpR
 Dr Laurentina Shaler SpR
 Dr Alex Dakin Reg
 Dr Emma Tuthill Reg SMH
 Dr Maria Cheung Reg
 Dr Roisin McConnell Reg
 Dr Abdelaziz Satti Reg
 Dr Zainab Ashraf Reg
 Dr Manon Vouga Reg
 Dr Fatima Rowili Fellow

Research / Lecturer Registrars

January to June

Dr Clare O'Connor (Maternal & Fetal Medicine)
 Dr Lucia Hartigan (Merrion Fertility Clinic)
 Dr Fiona Reidy (Merrion Fertility Clinic)
 Dr Rebecca Moore (Fetal Medicine)
 Dr Adriana Olaru (Labour Ward Fellow)

July to December

Dr Gillian Ryan (Maternal & Fetal Medicine)
 Dr Fiona Reidy (Merrion Fertility Clinic)
 Dr Grace Ryan (Fetal Medicine)
 Dr Adriana Olaru (Labour Ward Fellow)
 Dr Niamh Keating (Maternal Medicine Fellow)
 Dr Bobby O’Leary (Urogynaecology Research Fellow)

Senior House Officers in Obstetrics/Gynaecology

January to June

Dr Sara Mohan
 Dr Clare Kennedy
 Dr Siobhan Moran
 Dr Roisin Ryan
 Dr Hira Mumtaz
 Dr Marguerite O’Brien
 Dr Ronan Bredin
 Dr Aoife De Faoita
 Dr Emma Travers
 Dr Catriona Tiernan
 Dr Kimberly Kelly
 Dr Michael Wall
 Dr Katherine Edwards
 Dr Sahr Yambusa
 Dr Jeet Chatterji
 Dr Dagmar Kozlová
 Dr Lisa O’Sullivan

July to December

Dr Kaya Scannell
 Dr Sarah Murphy
 Dr Molly Walsh
 Dr Sadhbh Doherty
 Dr Karen Mulligan
 Dr Maeve White
 Dr Charlotte Collery
 Dr Naomi Smith
 Dr Claire Cullen
 Dr Alina Zidaru
 Dr Diarmuid Linehan
 Dr Amy Hanahoe
 Dr Sinead Keohane
 Dr George McGill
 Dr Aine Goggins
 Dr Brian Reilly
 Dr Fiona Hurley

Specialist Registrars / Registrars in Neonatology

January to June

Dr James Trayer SpR
 Dr Allen Jenkinson SpR
 Dr Bronwyn Power SpR
 Dr Doireann Eves SpR
 Dr Lucy Geraghty SpR
 Dr Siobhan McCormack SpR NMH/Limerick
 Dr Niall Linnane SpR Neonatologist
 Dr Nicoleta Barbu Reg
 Dr Valerie Tsang Reg
 Dr Ahmed Afifi Reg

July to December

Dr Claire Connellan SpR
 Dr Ross Foley SpR
 Dr Anne-Marie Hayes SpR NMH/Limerick
 Dr Aoife Cassidy SpR
 Dr Deborah Condren SpR
 Dr Sharon Dempsey SpR
 Dr Javaid Saeed Reg
 Dr Nicoleta Barbu Reg
 Dr Ibrahim Dafalla Reg
 Dr Abhidhamma Kaninde Reg



Dr Jenny Walsh, Prof Fionnuala McAuliffe and Prof Mary Wingfield at Dr Veronica Donoghue’s retirement celebration (image credit Jeannette Lowe)

Senior House Officers in Neonatology

January to June

Dr John Coveney
 Dr Doireann McMorro
 Dr Sinead Brannick
 Dr Kevin Gaughan
 Dr Deirdre O'Sullivan
 Dr Sean Kelleher
 Dr Ciannait Lehane
 Dr Sinead O'Donnell
 Dr Leah Loughlin

July to December

Dr Sarah O'Loughlin
 Dr Alwyn Charles
 Dr Hope Murphy O'Connor
 Dr Cormac Duff
 Dr Laura Ryan
 Dr Nicola Duffy
 Dr Neline Venter
 Dr Leah Loughlin



Mala Rangajamy, Senior Midwife and Corin Panton, 4th Year Midwifery Student, Nursing and Midwifery Staff, Ruby Jaison, Lactation Consultant (image credit Helen Batson)

Specialist Registrars / Registrars in Anaesthetics

January to June

Dr Sarah Ryan SpR
 Dr Damian Kerrigan SpR
 Dr Hishaam Saumtally BST
 Dr Dallas Walker BST
 Dr Junaid Hashmi Fellow
 Dr Michela Corradini Fellow
 Dr Francesca Biggi Fellow
 Dr Zeyad Dawood Fellow
 Dr Hebatalla Moustafa Reg
 Dr Abdul Sattar Reg
 Dr Ibrahim Eskarose Reg

July to December

Dr Richard Skelly SpR
 Dr Caroline Smyth SpR
 Dr Jennifer Kielty SpR
 Dr Daniel Lehane SpR
 Dr Zeyad Dawood Fellow
 Dr Andrew O'Donoghue BST
 Dr Yosef Awad Reg
 Dr Hebatalla Moustafa Reg
 Dr Ahmed Khattab Reg
 Dr Abdul Sattar Reg
 Dr Ibrahim Eskarose Reg

Specialist Registrars / Registrars in Pathology

January to June

Dr Zornitsa Tsvetanova SpR

July to December

Dr Claire Roberts SpR

Registrar in Psychiatry

Dr Firdous Murad Snr Reg
 Registrar in Psychiatry
 Dr Firdous Murad Snr Reg

Senior Midwifery & Nursing Staff

Director of Midwifery & Nursing

Mary Brosnan, MSc, RGN, RM, Adjunct Associate Professor, UCD Fellow Ad Eundem, RCSI

Assistant Directors of Midwifery & Nursing – Day Duty

Ann Calnan, BSc (Nursing Mgmt), RGN, RM, RNP
 Nicola Clarke, MSc (Mid), MSc (Health Info), RSCN, RGN, RM, IBCLC, Dip (HSP), FFNM (RCSI) Retired May 2019
 Geraldine Duffy, BSc (Neonatal Studies), RGN, RM, ANNP (UKCC), Dip (Health Economics), Professional Certificate in Governance (Level 9)
 Valerie Kinsella, MSc (Healthcare Ethics & Law), RGN, RM, HDDI
 Ann Rath, BSc (Nursing Mgmt), RGN, RM
 Shideh Kiafar, RM, MSc (*Infection Prevention and Control*)
 Tina Murphy, PHD, RGN, RM, BNS, RNP (*MN – CMS Project Co-Ordinator*) RIP March 2019

Assistant Directors of Midwifery & Nursing – Night Duty

Martina Carden, RGN, RM, Dip (Mgmt)
 Bernadette O'Brien, RGN, RM, BMS, RNP
 Margaret Hanahoe, RGN, RM, RNP

Assistant Director of Midwifery & Nursing – Clinical Practice Development Co-ordinator

Lucille Sheehy, MSc, BMS, RGN, HDip (RM)

Advanced Midwife / Nurse Practitioners

Anitha Baby, MSc, RM, BSc (Nursing), RNP *Triage Services*
 Caroline Brophy, MSc, RGN, RM, BNS, RNP *Outpatients Clinic*
 Usha Daniel, MSc, BSc (Nursing), RNP, P. Grad. Dip (Diabetes), (*Diabetes*)
 Linda Kelly, MSc, RCN, RGN, RM, P. Grad Dip (Nursing) Dip Mgt (*CMS Women's Health & Urodynamics*)
 Deirdre Madden, MSc, RPN, RMP (*Perinatal Mental Health*)
 Shirley Moore, MSc, H. Dip (Neonatal Nursing), RM, RGN, RNP, (*Neonatology*)

Clinical Midwife / Nurse Managers 3

Gillian Canty, MSc, Graduate Dip in Healthcare Risk Management & Quality BSc (Midwifery) BSc (Nursing Mgmt), HDip (Midwifery), RGN, RM, RNP *Project Team*
 Martina Cronin, BSc (Nursing Mgmt), RGN, RM *Delivery Ward*
 Catriona Cullen, MSc, BSc (Nursing), RGN, RM *MN- CMS*
 Teresa McCreery, MSc, RGN, RM, RSCN *Community Midwives*
 Carol Pugh, RGN, RM, Mgt *Degree Postnatal Services*

Karen Sherlock, RGN, RM, BNS *Theatre*
 Valerie Spillane, MSc (Diagnostic Imaging), BSc, RGN, RM, MA *Fetal Medicine Unit*
 Hilda Wall, RGN, RM, Dip (Healthcare Mgmt) *Neonatal Unit*

Clinical Midwife / Nurse Managers 2

Emily Barriga, BSN, RGN *Neonatal Unit*
 Maggie Bree, RGN, RM *Theatre*
 Carmel Breen, RGN, RM, BMS *Night Duty*
 Mariola Buczkowska, RGN, PgDip NICU, MSc (Neonatal Nursing) *Neonatal Unit*
 Barbara Cathcart, MSc, (Diagnostic Imaging), RGN, RM *Fetal Medicine Unit*
 Sive Cassidy, BSc, RGN, RM (*MN – CMS*)
 Michelle Clarke RGN, RM, RNP *Delivery Ward*
 Linda Collins, RGN, RCN, BSc, PgDip NICU, MSc (Neonatal Nursing) *Neonatal Unit*
 Breda Coronella, RGN, RM *Neonatal Unit*
 Joanne Courtney, MSc (Diagnostic Imaging), RGN, RM *Fetal Medicine Unit*
 Siobhan Crisham, RGN, RM, BNS *Theatre / Recovery*
 Jill Dowling, MSc RGN, RM, RNP *Delivery Ward*
 Eleanor Durkin, MSc, Hdip Midwifery, BMS, RN, RPN
 Margaret Fanagan, RGN, RM, IBCLC, Dip HA *Antenatal Education*
 Florrie Fee, RGN, RM *Neonatal Unit*
 Aileen Fox, RGN, RM, IBCLC *Early Transfer Home Team*
 Jennifer Fitzgerald, BMS, RGN, RM, H. Dip *Gynaecology Clinic*
 Carmel Flaherty, RSCN, RGN, RM, HDip Health & Safety *Occupational Health*
 Emily Flynn, RGN, RM, HDip *Emergency Care Area*
 Eimear Guinan, RGN, RM, BMS *Postnatal Ward*
 Dana Hardy, RGN, RM, BNS *Theatre*
 Brenda Hayes, MSc, RGN, RM *Postnatal Ward (Retired June 2019)*
 Bianca Hein RM, RNP *Delivery Ward*
 Carolin Holmes, RM *Perinatal Mental Health*
 Jilby Jacob, RGN, RM, MN, MHCM *Postnatal Services*
 Jean Kavanagh, RGN, RM, RNP *Delivery Ward*
 Jane Langenbach, BSc (Nursing) RGN, RM, RNP *Delivery Ward*
 Remy Mathew, RGN, RM, RNP *Postnatal Services*
 Erica Mullins RGN, RM *Night Duty*
 Helen McHale, RGN, RM, RNP *Antenatal Ward*
 Maria O'Connell, RGN, RM *Gynaecology Clinic*
 Gwen O'Neill, RGN, RM, RNP *Delivery Ward*
 Breid O'Dea, RGN, RM *Outpatients Clinic*
 Rebekah Prabakaran, BSc (n) RN, RM, MSc (N) *Neonatal Neonatal Unit*

Anya Phillips, RGN, RM, HDip *Midwifery Delivery Ward*
 Alphonsa Pius, MSc. Health Informatics, BSc. (Nursing) RGN, RM,
IBCLC MN -CMS
 Sara Rock, RGN, RM *Neonatal Unit*
 Kim Ryan, MSc. GradDip, BSc. BComm, RM *MN -CMS*
 Brid Shannon, HDip (Diabetes), Dip (Mgmt) RGN, RM, RNP
Delivery Ward
 Linda Smiles, RGN, RSCN *Neonatal Unit*
 Caitriona Sullivan, RGN, RM, DipMgt *Night Duty*
 Helen Thompson, MSc Leadership, BMS (hons), RGN, RM *Night Duty*
 Molly Vinu, BSc, MSc Med-Surg, MSc Health Informatics *MN-CMS*
 Joan Ward, RGN, RM, Dip Mgt. *Gynaecology Ward (Retired November 2019)*

Clinical Midwife/Nurse Specialists

Jacinta Byrne, MSc, RNT, RN, RM (*CMS – Haematology*)
 Brenda Casey MSc, RM, BSc Nursing, RNP (*CMS Bereavement*)
 Sharon Croke MSc (Diag Imaging) RGN, RM (*CMS – Sonography*)
 Ciara Coveney MSc, BSc, HDip, Grad Dip (Diabetes) RM, RGN, RNP
 (*CMS – Diabetes*)
 Sarah Cullen, MSc, RM, BSc. Nursing (*CMS Bereavement*)
 Lisa Hyland, MSc (Diag Imaging) RGN, RM (*CMS – Sonography*)
 Denise McGuinness, BSc, MSc, RGN, RM, IBCLC RNT (*CMS – Lactation*)
 Lorraine O'Hagan, MSc, BMS, RGN, RM, Dip (Social Studies) IBCLC,
 RNP (*CMS - Lactation*) (*Retired May 2019*)
 Niamh Meagher, MSc (Diag Imaging) RGN, RM (*CMS – Sonography*)
 Heather Hughes, MSc (Diag Imaging) RGN, RM (*CMS – Sonography*)
 Cecilia Mulcahy, RGN, RM, MSc (*Diag Imaging*) (*CMS - Sonography*)
 Betty Murphy, RGN, RM (*CMS – Sonography*)
 Caroline McCafferty, BSc (Nursing Mgmt) RGN, RCN, (*CNS - Neonatal*)
 Ciara Murphy, RN, ENB 405, RCH (Dip HE), BNS (*CNS – Neonatal*)
 Celine O'Brien, MSc, RGN, RM (*CMS – Maternal Medicine*)
 Eimear Rutter, Grad. Dip (Diabetes), RGN, RM (*CMS Diabetes*)

Community Midwives

Sarah Byers, RGN, RM
 Kate Casey, RGN, RM
 Katie Cosgrove, RGN, RM
 Niamh Cummins, BSc (Midwifery), RGN, RM
 Katie Hearty, BSc (Midwifery), RGN, RM
 Julie Higgins, BSc (Midwifery), RGN, RM, RNP
 Ivana Lambe, BSc (Midwifery)
 Clodagh Manning, RGN, RM, RNP

Roisin McCormack, BSc (Midwifery), RGN, RM, RNP
 Bernie O'Callaghan, RGN, RM
 Fiona Roarty, RGN, RM, PHN
 Sinead Thompson, BSc (Midwifery), RGN, RM, Dip HE

Clinical Skills Facilitator

Niamh Dougan, RGN, RM (retired March 2019)
 Aoife Lennon, RGN, Post GradDip
 Saila Kuriakose, MSc, RGN, RM
 Colette O'Neill, MSc, RM

Neonatal Clinical Skills Facilitator

Fidelma Martin, RGN, DipHe(RSCN), BNS Neonatal Unit
 Thankamma Mathew, RGN, H. Dip (*Neonatal Intensive Care*)

Neonatal Resuscitation Officer

Laura Eager, RGN, RSCN, H. Dip (Neonatal Studies)

Cancer Nurse Co-ordinator

Sarah Belton, MSc (Nursing) RGN
 Emma McKinney, BSc, PGrad Dip Adult Cancer Nursing

Post Registration Midwifery Programme Co-ordinator

Ann Marie Dunne, MSc (Edu), P. Grad Dip, RGN, RM

Clinical Placement Co-ordinators

Sharon Egan, MSc, Hdip Midwifery, BSc Nursing
 Orla Gavigan, BMS, RGN, RM, Dip (Mgmt)
 Theresa Barry, BSc (Nursing Mgmt), RGN, RM
 Elaine Creedon, MSc, BSc (Midwifery), RGN, RM, BNS

Haemovigilance Officer

Bridget Carew, RGN, RM, H. Dip (Healthcare Risk Mgt), H. Dip. (Quality in Healthcare)

Nurse Colposcopists

Gina Baldesco, BSCCP Nurse Colposcopist, RGN
 Dymphna Casey, BSCCP Nurse Colposcopist, RGN, RM
 Marie Collery, BSCCP Nurse Colposcopist, RGN, RM
 Siobhan Griffin, BSCCP Nurse Colposcopist, RGN, RM
 Lisa Hughes, RGN, RM
 Sinead Kausley, RGN, RM
 Deirdre O'Neill, BSCCP Nurse Colposcopist, BSc, RGN, RM

Senior Administration Staff

Secretary/General Manager

Ronan Gavin, BBS (Finance), FCA

Financial Controller

Alistair Holland, BA, FCPA

IT Manager

Martin Keane, B. Comm (to Jul)
Con Grimes (Acting from Aug)

Human Resources Manager

Yvonne Connolly, BA in IR & ER Grad CIPD

Director of Quality, Risk and Patient Safety

Luke Feeney, D. Prof, MSc

General Services Manager

Tony Thompson, Dip (HSM), Dip (SCM)

A/Purchasing and Supplies Managers

Linda Mulligan and Lorraine McLoughlin

Patient Services Manager

Alan McNamara

Information Officer

Fionnuala Byrne, MSc, BA (ICT), P. Grad Dip (Stats)

Health & Safety Officer

Martin Creagh, BSc, Dip (HSWW), IOSH

Facilities Engineering Manager

Neil Farrington, MSc (MMT), P. Grad Dip (MMT)

Quality Manager

Rachel Irwin, MSc (Nursing Mgmt), BSc, RM, RGN

Compliance and Operations Manager

Carl Alfvag LL.M (Master of Laws)

Data Protection Officer

Emmanuel Ogungbe, MSC, CISM, CIPP/E

Clinical Risk Managers

Clare O'Dwyer, HDip (Healthcare Risk Mgt), BSc (Nursing Mgt), RGN, RM.

Laurence Rousseil, BSc (Midwifery), H. Dip (Midwifery), RGN, RM, RNP, Grad. Dip (Healthcare Risk Mgt & Quality)



Nicola Clarke (centre), Assistant Director of Midwifery and Nursing who retired during the year with her colleagues Ann Rath and Lucille Sheehy, Siobhan Flanagan and Lisa Murray

Project Programme Office - NMH at Elm Park

Dr Orla Sheil, Operational Programme Manager, Clinical Lead
 Dr Jenny Walsh, Joint Chair, Digital Health Steering Group
 Pauline Treanor, Operational Programme Manager, MBA; PGDip Corp. Governance
 Mr Martin Keane, Project ICT Lead, (B Comm.)
 Damian McKeown, Project Co-Ordinator, MBA
 Eoghan Hayden, Commissioning & Transitioning Pillar Lead, MSc (Clinical Engineering), BSc (Computer Science)
 Emmett Travers, Operations & Business Enablement Pillar Lead, BSc (Eng) MEng
 Gillian Canty, Operational Readiness Deputy Lead, MSc (Midwifery)
 Martin Creagh, Co Location Deputy Lead, BSc, Dip (HSWW), IOSH
 Geraldine Duffy, People Pillar Lead, BSc (Neonatal Studies), Dip. (Health Economics)
 Sarah McCourt, Project Administrator



Judith Nalty, Physiotherapy Manager and Ciara Ryan, Senior Physiotherapist

Allied Health Professionals

Medical Social Workers

Kaylene Jackson, Head Medical Social Worker, MSocSc, NQSW
 Ciara McKenna, Senior Medical Social Worker, BSocSc, NQSW
 Laura Harrington, Medical Social Worker, BA, H. Dip (Sp), MSocSc, NQSW
 Aoife Shannon, Medical Social Worker, BA, H. Dip (Sp), MSocSc, NQSW
 Jane Toolan, Medical Social Worker, BA Arts (Int), H. Dip (Sp), MSocSc, NQSW

Radiographers

Angela O'Sullivan, DCR, Dip (MS), P. Grad Dip (MUS)
 Mary Corkery, DCR
 Bernadette Ryan, DCR
 Val Grimes, DSR (R)
 Carmel O'Connor, DSR (R)
 Clara Nolan, BSc (Hons) Radiography, HDip BS, Msc MRI
 Una Murphy, MSc, MRI, BSc Rad CCT
 Carla Groves, Dip Radiography, Msc Ultrasound
 Laura Moyles, BSc (Hons) Radiography, HDip BS, Msc MRI

Physiotherapists

Judith Nalty, Physiotherapy Manager, BSc (Physio), MISCP
 Lesley-Anne Ross, MSc (Physio), MISCP
 Jo Egan, BSc (Physio), MISCP
 Leah Bryans, BSc (Physio), MISCP
 Ciara Ryan BSc Physio MISCP
 Sarah Fitzmaurice BSc Physio MISCP
 Laura O'Sullivan BSc Physio MISCP (from Jul)

Consultant Clinical Biochemist

Dr Orla Maguire, MSc, FRCPath EurClinChem

Laboratory Manager

Marie Culliton, MSc, MBA, FACSLM

Chief Medical Scientist

Anya Curry, MSc, FACSLM
 Bernadette O'Donovan, MSc, FACSLM
 Paula Whyte, MSc, FACSLM
 Catherine Doughty, MSc, FACSLM
 Luke MacKeogh, MBA, FACSLM

Surveillance Scientist

Carol O'Connor, MSc, FACSLM

Senior Support Services

Central Decontamination Unit

Pam Hutchings, BSc (Decontamination)

Pharmacists

Dorothy McCormack, Chief Pharmacist, MSc (Pharm), MPSI, (to March)

David Fitzgerald, Chief Pharmacist: MPharm, MSc, MPSI (from April)

Áine Toher, Senior Pharmacist Medication Safety / MN-CMS: BSc (Pharm), MSc, MPSI

Anne Clohessy, Senior Pharmacist Maternal Medicines Clinic, BPharm, MSc, MPSI

Noreen O'Callaghan, Senior Pharmacist, BSc (Pharm), P. Grad Dip (Clinical), MPSI (to March)

Montserrat Corderroua, Senior Pharmacist NICU: BSc (Pharm), MSc, MPSI

Louise Delany, Antimicrobial Pharmacist:, MPharm, MSc, MPSI (from Sept)

Benedetta Soldati, Senior Pharmacist Medicines Reconciliation: MPharm, MPSI (from Oct.)

Pharmaceutical Technicians

Linda Simpson, Senior Pharmacy Tech.

Hannah Kerr, Basic Grade Pharmacy Tech. (from Jun)

Psychosexual Counsellor

Meg Fitzgerald, BSocSc, MSW, NQSW, Dip PST

Senior Dieticians

Roberta McCarthy, BSc/DipHumNut&Diet, MINDI

Sinead Curran, BSc/DipHumNut&Diet, MINDI

Clinical Engineering

Eoghan Hayden, Chief Clinical Engineer, MSc (Clinical Engineering), BSc (Computer Science)

Dara Keeley, Senior Clinical Engineer, BEng (Engineer Technician), H. Dip (Computer Science)

Maighread Gallagher, Senior Clinical Engineer, MSc (Bioengineering), BEng (Electrical and Electronics Engineering)

Vasanth Pillai, Senior Clinical Engineer, MSc (Clinical Engineering), Dip. (Instrument Technologies)

Clinical Psychologist

Marie Slevin, MA

Portering Services Manager

Claudiu Zselemi

Laundry Services Supervisor

Joe Staunton (to Feb)

Glenn Kynes (from Apr)

Hygiene Services Manager

Mark Anderson, BA

Catering

Manager: Elizabeth Byrne, BA (IR and Personnel Mgt), CIPD, H.Dip (Hospitality Mgt) QQI L6 & QQI L6 Auditing

Gavin Kearney, BSc (Hospitality Mgt.) (to May)

Beata Banach, BA (Marketing & Event Mgt), MSc. (Food Science)

QQI L6 & QQI L6 Auditing (from Oct)

Gillian McKeown, H. Dip (Hospitality), QQI (L6)

Martina Guiney, H. Dip (Hospitality Mgt) QQI L5

Paul Humphreys, Executive Chef, QQI (L6)

Engineering

Sean Murray, Senior Ass. Technical Services Officer B. Eng (Tech) Msc.

Anne Dowling, Engineering Services Coordinator, BFS, MIB (Grad)

Michael Loughnane, Maintenance Supervisor (from Aug)

Graham Tucker, Draughtman Technician



Glenn Kynes, appointed Laundry Supervisor in 2019

Clinical Reports

Antenatal Education

Childbirth education has sought to give women a more active role in the birth experience, while at the same time helping women to understand the physiology of childbirth and the appropriate interventions that may be necessary during the process of labour and delivery. It promotes confidence in mothers and their partners to meet the challenge of childbirth and early parenting.

In the hospital courses of classes are run as a team effort with the specialized knowledge and skills of the midwife, physiotherapist and dietitian coming together to offer a comprehensive structured education to the mother and her partner. Eleanor Durkin and I share a midwifery post in the department.

There is a great demand for classes particularly couples classes and evening classes. It is difficult to meet the demand for evening classes, with a limited number of staff. There are thirteen courses running each week, eleven of which include partners with two classes in the evening at 5.30pm. In 2019, there was a total of 109 courses, with an attendance rate of (2,005 ladies). The classes have been extremely busy with large numbers in each group.

The course of classes either consists of five classes or two classes covering all aspects of labour in detail. There are also two refresher classes for multiparous and one class a month for mothers who have had a caesarean birth. There is a young mums and a class for mothers expecting twins and also an elective caesarean section class. Mothers and their partners are also taken on a one to one basis if it is necessary.

We are also involved with providing postnatal baby care classes and in the education of midwifery students, medical students and visiting midwives and registrars to the hospital.

It is important to assess the level of satisfaction with the preparation for labour and with their childbirth experience. An important aspect of antenatal education is to see mothers post delivery; their feedback is imperative and very helpful to us. Evaluation questionnaires are carried out at regular intervals.

Margaret Fanagan
Clinical Midwife Manager 2



The BSc Midwifery Class of 2019 Graduation Ceremony

Bereavement

The increasing recognition of the importance of a comprehensive bereavement service has been reflected in the implementation of The National Standards for Bereavement Care Following Pregnancy Loss and Neonatal Death (HSE 2016). The Bereavement Midwife's role has developed and evolved since its inception in 2007. Central to the role is the provision of practical and emotional support to couples and their families following miscarriage, termination, stillbirth and neonatal death.

The CMS in Bereavement works as part of the multidisciplinary team facilitating and co-ordinating follow up consultant led appointments. Dr Stephen Carroll met with 30 couples in the Stillbirth Clinic in 2019. Follow up was also arranged with individual consultants for a further 40 couples with a significant amount of time invested in organising time frames for those that require joint obstetric and paediatric appointments. The recurrent miscarriage clinic remains busy with a high demand for appointments. 90 women were counselled in the recurrent miscarriage clinic with a further 23 counselled in the mid trimester loss clinic led by Dr Cathy Allen.

The CMS in Bereavement arranged burial in the Holy Angels Plot in Glasnevin for 50 babies who died through miscarriage. A considerable amount of time is invested in organising and preparing babies for burial so that they are buried with dignity and respect.

Educational input with staff and students within the hospital and UCD has continued. Our research investigating the confidence and competence of student midwives to deliver compassionate bereavement care has been presented internationally. The workshop has been evaluated and incorporated into the curricula for student midwives.

We continue to work in conjunction with the NMH Foundation and thanks to the generosity of our supporters have been in a position to improve the service provided to bereaved parents.

Brenda Casey, Sarah Cullen
Clinical Midwife Specialists in Bereavement

Debbie Tarleton
Bereavement Midwife



Chapel of Rest

Breastfeeding Support Services

The Breastfeeding Support Team promotes protects and supports breastfeeding at The National Maternity Hospital.

65% of mothers were documented on MN-CMS breastfeeding on discharge but this is not fully recorded on MNCMS so the

exact total of mothers breastfeeding on discharge is unavailable for 2019. There is on-going education for staff regarding the importance of recording accurate and timely the documentation on MNCMS.

Education Programmes - Clinical Staff	Education Mothers – Antenatal and Postnatal
8 hour breastfeeding course – 6 programmes	Preparation to Breastfeed Classes – 2 per month
Non consultant hospital doctors – 2 sessions	Breastfeeding clinic – weekly
Public health nurse students and MCA student – clinical education study days.	Antenatal colostrum harvesting OPD Diabetic clinic – weekly

Consultation Overview 2019

Consultation type	Number of women seen
One to one consultant on ward	3,540
One to one consultation in NICU	493
Breastfeeding Clinic	956
Preparation to Breastfeed Class	1,200
1:1 Antenatal consultations	59
1:1 Postnatal post discharge consultation	60
Antenatal Colostrum Harvesting education	200

Support is available from the team between Monday and Friday but an extra day was introduced this year to provide a 6 day service every second week.

The Breastfeeding Support Team are developing a dedicated Lactation role for the NICU. We currently work with a multi-disciplinary team to support mothers better in the NICU and to provide more human milk for premature and sick babies.

Quality initiatives for 2019 include the elimination of the sale of formula milk in the hospital shop in line with Baby Friendly Initiative Standards. A review of the readmission rates of women with mastitis in the NMH was undertaken by the team to allow us continue to improve our management and care of breastfeeding mothers. Also a trial of HSSD sterilisation of re-usable expressing kits in the NICU was commenced to reduce possible cross contamination and to reduce the impact on the environment.

For International Breastfeeding Week, the Breastfeeding team invited guest speakers to talk about the following topics: 'The Burden of Mastitis in Ireland', 'Breastfeeding Support Groups in

Ireland' and 'Anxiety in Motherhood'. For National Breastfeeding Week we had a panel discussion with a Multi-disciplinary team; the topic was Antenatal Hand Expression of colostrum.

The Breastfeeding Support Team is involved in the LatchOn study: a protocol for a multi-centre, randomised controlled trial of perinatal support to improve breastfeeding outcomes in women with overweight and obesity. This study is being undertaken in collaboration with UCD, Regional Hospital Mullingar, St. Lukes General Hospital Kilkenny and Wexford General Hospital. Out former colleague Denise McGuinness, took over the responsibility for this study for 2019/2020.

Breastfeeding Support Team



Breastfeeding dyad Lyndsey Daly with her baby Isla (image credit Helen Batson)

Community Midwifery Service

The aims of the Domino/Homebirth service is to provide continuity of care and choice to low risk women throughout pregnancy, labour and the postnatal period.

Antenatal Care

Women who attend this service have combined care with their GP's. The antenatal clinics take place in St. Michael's Hospital in Dun Laoghaire, the Primary Health Centres in Leopardstown, Pearse St., Newtownmountkennedy and Churchtown and the Health Centres in Bray and Greystones. There are seven Domino and homebirth clinics weekly, Newtownmountkennedy being the newest which started in January 2019 to facilitate the growing population of young families in the area. Antenatal classes have continued successfully with a high percentage of women attending with their birthing partners, irrespective of their choice of place of birth.

	New	Follow Up
Community Midwives NTMK	52	192
Community Midwives Bray Clinic	40	372
Community Midwives Churchtown Clinic	74	498
Community Midwives Dunlaoghaire Clinic	95	570
Community Midwives Greystones Clinic	47	422
Community midwives Churchtown	71	498
Community Midwives Leopardstown Clinic	76	453
Community Midwives Pearse Street Clinic	80	531
	535	3038

Domino - Dublin post natal Home Visits	5586
Domino – Wicklow post natal Home Visits	1930

Intrapartum care

In cases where complications arise, the women's care is carried out by the community midwives in conjunction with our medical colleagues. It should be noted that the figures presented in this report include all women irrespective of pregnancy complications or outcomes.

Early Transfer Home

The Early Transfer Home (ETH) team had a busy year with over 7000 home visits. A further midwife on the team has been trained in the newborn examination leading to earlier discharge times for Domino women and reduced the need for homebirth women to attend the hospital for this checkup. This service has been positively evaluated by midwives and the service users.

Antenatal Attendances	
ETH - Ballinteer Home Visits	329
ETH - Dunlaoghaire Home Visits	252

Postnatal Home Visits	
ETH - Dublin Home Visits	5586
ETH - Wicklow Home Visits	1930
Total	7486

In addition, the service also provides mixed risk satellite antenatal care in conjunction with a consultant obstetrician as well as a postnatal early transfer home programme (ETHP)

Wicklow Satellite Booking Clinic Attendances		
	New	Follow Up
Bray	144	0
Newtownmountkennedy	203	0
Arklow	67	527
Bray	0	788
Greystones	6	720
Loughlinstown	90	542
Wicklow	0	771

A '0' reflects a clinic that does either new or follow up visits only

Future

The team continues to provide a midwifery led service and will strive to continue to develop simple innovative changes to enhance service user and service provider experience.

Teresa Mc Creery

Community Midwifery Manager

Diabetes Mellitus

Diabetes Mellitus					
Year	Type 1 diabetes	Type 2 diabetes	GDM and prev GDMs	Impaired glucose tolerance	Total
2015	44	14	382	213	653
2016	42	17	365	248	672
2017	46	24	302	223	595
2018	40	13	354	251	658
2019	39	20	364	231	654

Treatment of Women with Gestational Diabetes 2019	
Insulin	85
Metformin	64
Total	149

In line with previous years, 2019 saw an overall increase in the number of referrals into the diabetes in pregnancy service. All women who attend the multidisciplinary service are offered education and specialist review with the multidisciplinary clinic. The numbers of women with gestational diabetes mellitus (GDM) have remained constant this year.

Glycaemic control is a pivotal factor in combatting the adverse effects associated with poorly controlled GDM. Initial management of GDM generally consists of dietary modification, exercise and regular monitoring of fasting and 1-hour postprandial blood glucose through capillary and venous blood sampling. Where euglycaemia is not achieved through this initial treatment plan, pharmacological therapy (metformin and insulin) is indicated to optimise glycaemic control.

The majority of women with gestational diabetes achieve normal glucose levels through diet and exercise intervention (~75%). This is taught at group structured education held weekly in the hospital in collaboration with dietetics. Women are then reviewed in a midwifery led clinic as part of the diabetes in pregnancy MDT clinic held on Fridays. Whilst the majority of women are able to control their glucose levels through lifestyle intervention, a significant proportion will require pharmacological management with either metformin or insulin therapy (~25%). GDM also has longer-term health implications. Mothers have a 50% increased risk of type 2 diabetes within five years of the diagnosis of GDM – there continues to be significant health promotion education to reduce these longitudinal health outcomes.

The number of women with pre-existing diabetes has remained constant at 59 patients. In 2019 we saw increase in the number of women with Type 2 Diabetes Mellitus (n=20). This is up over 50% from nine women in 2018. This is in line with a worldwide increasing upward trend in obesity and the development of type 2 DM in women of childbearing age.

Whilst the numbers of women with pre-existing diabetes remains stable, there is a significant increase in the complexity of care required. Many of these women access multiple specialities across hospital services and display an array of complex co-morbidities which necessitates comprehensive specialist care throughout pregnancy.

The diabetes midwifery team is comprised of Mrs. Usha Daniel (AMP), Mrs Eimear Rutter (CMS) and Ms Ciara Coveney (CMS). We remain committed to the delivering evidence based, patient centred care to this high risk cohort. The midwifery team delivered antenatal lifestyle education for women diagnosed with GDM with a newly implemented physical activity programme. NMH continues to be a centre of excellence for continuous subcutaneous insulin pumps and sensor technology in pregnancy.

The successful antenatal expression of breastmilk programme has continued to yield positive outcomes for both mother and infants throughout 2019. Research on this project is also ongoing in conjunction with our academic partners in UCD.

Ms Coveney is a member of the IEHG Integration and Transformation group and was also accepted to speak at the International Congress of Midwifery 2020 due to be held in Bali, Indonesia.

Ciara Coveney

Advanced Midwife Practitioner (Candidate)



Usha Daniel (third from front right), Advanced Midwife Practitioner Diabetes, and Maternity Dietitian Hilary Divine (front left) with the Minister for Health Simon Harris at the "Pre-pregnancy Planning with Diabetes" conference in Jan 2019

Maternity Outpatient Clinic

Activity remains at a high level in the public and semi-private outpatient clinics. Up to 65% of women are now choosing to attend as a public patient to the hospital. This has increased from approximately 60% 5 years ago. To meet this increasing demand, we are continuously developing both our antenatal and postnatal services. The clinic opening hours have been expanded; we now run clinics 12 hours a day from 7.30 am to 7.30 pm, three days a week to meet service needs. Our Midwifery-led service continues to develop both with the hospital and in Primary Care Centre.

As the medical complexity of the pregnant women continues to increase, the number of specialist clinics offered by the hospital continues to grow to meet this developing need. Specialist clinics include maternal medicine, haematology, pre-term surveillance, endocrine, diabetes, hypertension and the pain management clinic. Services are offered such as cardiac, neurology, rheumatology, respiratory, hepatology and gastroenterology by specialist clinicians. As part of the multidisciplinary care offered by the hospital, social work, dieticians, mental health and physiotherapists, work as part of the team offering care to the increasing number of mothers with complex mental health and social issues.

Our postnatal clinic continues to offer quality and continuity of care to women who experience complications during the pregnancy and in the postnatal period. Up to 25 mothers are seen in the clinic each week. Referrals are from within the hospital, GPs, PHNs and other maternity hospitals.

In an effort to improve patient privacy and reduce the time a patient spends waiting in the clinic, we are in the process of introducing timed clinic appointments in the public clinic. We already have timed clinic appointments in the semi-private clinic and this is working well.

Women attending as an unbooked 'casualty' attendance attend a purpose built specialist area to meet their needs. We are now working on developing our public clinics to provide a modern outpatient clinic for women attending.



An image of the NMH Outpatients Clinic as it was in 1938 and how it looks today. Works are in place to modernise the area (image credit Jeannette Lowe and Crampton Archive)

Overall Summary of Obstetric Clinic Attendances 2019

	New Attended	Follow Up Attended	Total Attendances	Total DNAs	DNA Rate
Antenatal Clinic	2,894	15,331	18,225	2,091	10.3%
Antenatal Midwives Clinic	0	897	897	62	6.5%
Antenatal 1st Visits	536	0	536	60	10.1%
Pearse Street Antenatal 1st Visits	386	0	386	88	18.6%
	3,816	16,228	20,044	2,301	
Phlebotomy Bloods					
Phlebotomy Bloods	5,821	501	6,322	427	6.3%
Maternal Medicine Clinic (Consultant led)	196	1,474	1,670	176	9.5%
Pre-Term Surveillance Clinic	112	1,477	1,589	108	6.4%
Haematology Clinic	565	341	906	189	17.3%
Anti D Clinic	828	0	828	26	3.0%
The Poppy Clinic - Postnatal Follow Up Clinic	168	506	674	126	15.8%
Antenatal GTT's	520	0	520	27	4.9%
Epilepsy Clinic	36	92	128	24	15.8%
Maternal Medicine Clinic (Midwifery led)	22	74	96	5	5.0%
Midwife Teenage Clinic	1	30	31	3	8.8%
Hypertension	0	28	28	6	17.6%
SPC Antenatal Clinics					
SPC Antenatal Clinic	1,570	7,749	9,319	148	1.6%
SPC Booking Clinic	2,015	6	2,021	35	1.7%
	3,585	7,755	11,340	183	1.7%

Does not include Community Midwifery, Diabetes, Nutrition, Satellite or Private Clinics

Caroline Brophy

Clinical Midwife Manager II

Outpatient Department (OPD)

Colposcopy & Gynaecology Outpatient Clinics

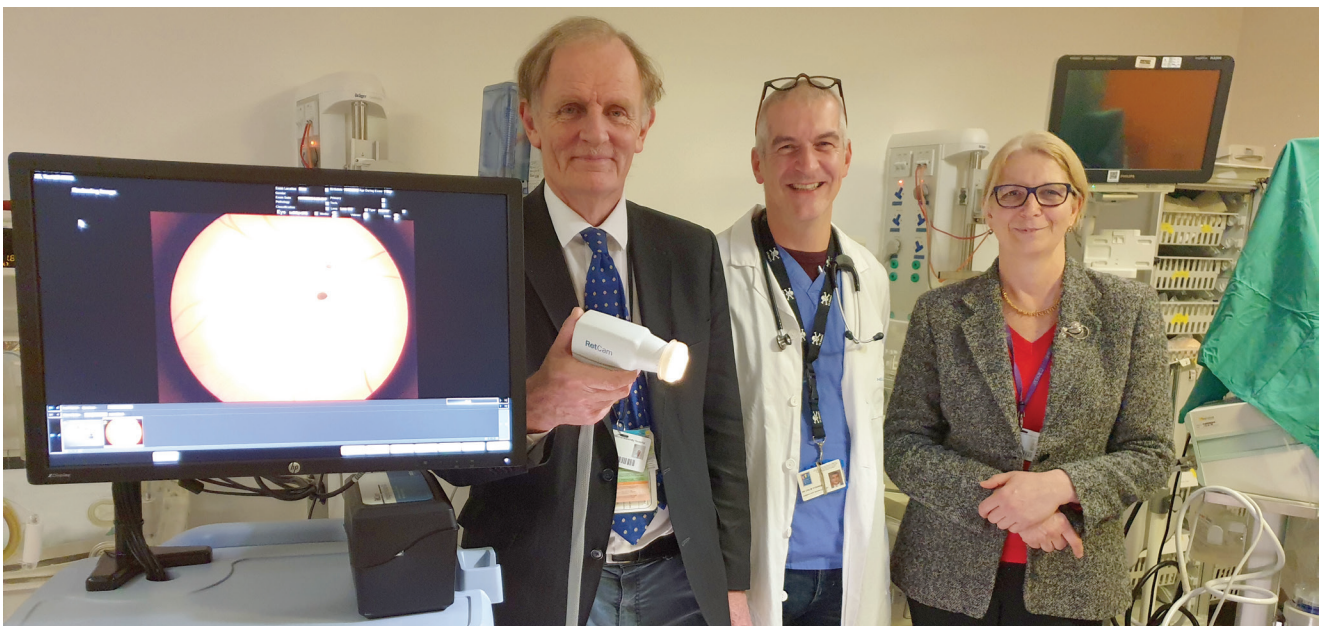
A wide range of services are offered at the Gynaecology Outpatient Department which include specialist services in Colposcopy, Oncology, Urogynaecology, Reproductive Medicine, Endocrine, Adolescent

services and Recurrent Miscarriage services. It has been another very busy and challenging year, but despite this the outpatient services continued to deliver a high standard of patient centred care.

Colposcopy and Gynaecology Clinic Activity 2019				
	New Attended	Follow Up Attended	Total Attendances	DNA Rate per Clinic
Colposcopy	2,303	5,121	7,424	12.0%
Gynaecology	3,491	4,866	8,357	17.9%

The build of the Gynaecology module of the NMH Electronic Healthcare Record (EHR) continued during the year. This module of the Maternity Newborn Clinical Management System (MNCMS) 2019 involved many multi-disciplinary meetings between the other participating hospitals: Cork University Hospital, Kerry University Hospital and The Rotunda Hospital as well as the HSE. Pathways were developed and education of the staff in the use of the EHR began in August and was rolled out to the Gynaecology services in the National Maternity Hospital in September. The introduction of the EHR had a significant impact on the clinic workload and the staff adapted very well to accommodate this. Clinic numbers were reduced for the initial few weeks while the system was being introduced but were quickly resumed as normal.

The Outpatient hysteroscopy service continued to expand in 2019 with the majority of referrals from GPs. The clinic works in close collaboration with the ultrasound/scanning department. Four sessions are conducted on a weekly basis in the Gynaecology Outpatient Clinic. Indications include post-menopausal bleeding (PMB), fertility issues and removal of intrauterine devices. We are performing more operative cases thereby significantly reducing the number of women requiring procedures under general anaesthetic in Theatre and occupying Inpatient beds.



Up to 500 premature babies born annually at the National Maternity Hospital will now receive the most advanced sight-saving screening available, following the introduction of a new retinal camera in its neonatal unit. The sight-saving piece of equipment, RetCam, was formally launched by Fighting Blindness ambassador, Victoria Smurfit, who was at The National Maternity Hospital to celebrate World Prematurity Day

Gynaecology Clinic – Hysteroscopy Attendances

	Hysteroscopy	Truclear polypectomy	Betocci Hysteroscopic Removal Mirena	Required General anaesthetic	Total
Clinic 1	68	30	22	13	133
Clinic 2	76	29	10	15	130
Clinic 3	170	2	9	9	190
Clinic 4	81	n/a	n/a	n/a	81
Total	395	61	41	37	534

Hysteroscopy Referral Reasons

Referral Indication	Postmenopausal bleeding	Menstrual irregularity/ IUCD insertion/ Retrieval	Fertility/Miscarriage	Other	Total
Clinic 1	65	60	6	2	133
Clinic 2	65	45	20	0	130
Clinic 3	132	55	0	3	190
Clinic 4	n/a	n/a	81	n/a	81
Total	262	160	107	5	534

Outpatient Hysteroscopy Summary Table

	2015	2016	2017	2018	2019
No. of Patients*	260	317	477	471	582
Outpatient Hysteroscopy Procedures	196	290	401	432	534
Diagnostic Hysteroscopy	-	-	-	355	395
Operative Hysteroscopy	-	-	-	76	102
Cases requiring general anaesthetic	-	-	-	13.5%	6.7%

* 582 patients were referred but only 534 were suitable for outpatient hysteroscopy treatment

Fertility Service Review

An audit of the Fertility service was undertaken during the year and involved reviewing the waiting time for a fertility consultation with the aim of reducing the DNA rate and improving the efficiency of the clinic. A database of fertility referrals from GP's was created to record everything. On receipt of a referral, women are sent a fertility pack and asked to attend the NMH for an Anti-Mullerian Hormone blood test as well as Rubella screening. The male partner is asked for a semen analysis and both partners complete female and male health screening questionnaires. Once the questionnaires have been received and the results of bloods and semen analysis have been completed an appointment will then be sent.

Fertility Service Review Results

	Mar - Aug 2018	Mar - Aug 2019
Total referrals	78	107
Number of appointments sent	78	42 (39%)
DNAs	25 (32%)	1 (2%)
Average waiting time from appointment sent to clinic date	178 days	52 days
Average number of clinic visits	2	1

These results show that from Mar – Aug 2019, there was a reduction in the number of appointments sent to women with the introduction of the new process reducing the DNA rate by 30%. There was also a reduction in the time patients waited for a fertility appointment from 6 months to 2 months.

Jennifer Fitzgerald

CMM2 Gynaecology Clinic

Urodynamics

2019 was another busy year for the Urodynamics department. The Department of Health mandated pause on the surgical use of MESH for pelvic organ prolapse and Stress Urinary Incontinence continued. The number of women having surgery for urinary incontinence remains low with the resulting incidence of postoperative urinary retention lower than previous years. From a maternity perspective the number of women who developed protracted postnatal urinary retention and antenatal urinary retention was similar to previous years. The majority of women with urinary retention were managed successfully with Clean Intermittent Catheterisation however in a departure from usual management 2 women were discharged with Supra-pubic catheters in situ.

The introduction of the electronic healthcare record (EHR) for gynaecology patients in Sept 2019 had an impact on the clinic workload as we adapted to the change, clinics are now back to full capacity. Prior to the introduction of the EHR a lot of time was invested by the team into developing Urodynamics and Urogynaecology specific documentation, including order sentences and care plans. We worked closely with both the national Cerner team and the local Cerner team to develop this documentation.

Collaboration between the NMH and the pelvic floor centre in St Michaels Dun Laoghaire continues. 2019 saw the appointment of a CNS in Urogynaecology in the pelvic floor centre, as part of her induction and training she attended the Urodynamics clinic in NMH for a number of weeks and we continue to support her from an education perspective.

Consultation and engagement continued throughout 2019 to advance the plans for establishing the NMH as one of the National Centres for women with MESH complications. This work continues and it is hoped that the clinic will be up and running in 2020.

Linda Kelly

CMS Urodynamics



Katie Keogh, Kevin & baby Charlotte who was the smallest surviving member of the Neonatal Intensive Care Unit weighing born at just 27 weeks and weighing just 390g, Charlotte spent the first three months of her life in the NMH

Neonatology

In 2019 we welcomed 1,579 babies into the Neonatal Unit 8. We cared for 115 babies born <1.5kg and continued to contribute their clinical data to the Vermont Oxford Network (VON). Of particular importance, none of this VON cohort developed necrotising enterocolitis in 2019. PRIME (PRe-term Infants need Milk Early), a multidisciplinary initiative continued successfully in 2019, with increasing numbers of preterm babies receiving mothers own milk earlier and an increasing numbers of preterm infants were discharged solely breast feeding. Enthusiasm and expertise from our lactation support midwife, Helen Batson and an additional Neonatal Dietician Roisin Gowan, has provided further nutritional benefits to our patients. Therapeutic hypothermia was provided in NMH for 13 babies in total, 6 inborn and 7 outborn infants. There were 3,443 patient visits to the outpatient baby clinic. Our psychologist Marie Slevin continues to carry out neurodevelopmental assessments at 2 years of our most vulnerable infants, examining our outcomes and identifying the need for rehabilitation.

It is our great privilege in NICU to accept babies from all over the country and the National Neonatal Transport Programme (NNTP) is an integral part of neonatal care. This facilitates 24 hour direct access to specialist neonatal consultant and transported almost 600 neonates in 2019 throughout Ireland. The NNTP Educational outreach programs continue to develop with consultants from NMH providing local neonatal education to regional centers. These developments allow the NMH and NNTP to further the aims of providing, early, appropriate transfer decisions, pre-hospital stabilisation and specialised neonatal care en-route during patient transports. Service enhancements of National Neonatal Transport programme (NNTP) in 2019 included the appointment of an additional transport consultant in NMH. We are delighted to welcome Dr Eoin O'Curraín back to the NMH Neonatal Unit from Melbourne.

Dr Emma Dunne also rejoined the group in her role as UCD tutor in Neonatology and has commenced her PhD research examining temperature regulation in preterm infants. Dr Madeline Murphy has recruited internationally over 200 babies <29 weeks for her POPART study, looking at the efficacy of oropharyngeal surfactant at the time of delivery. Of course this research would not be possible without the participation of our patients with consent of their parents. Thank you.

2019 also saw the opening of the neonatal book club, with members as young as 24 weeks gestation this was a hugely popular initiative supported by a multidisciplinary team as well as some local bookshops.

Thank you also to all those that donated to the NMH Neonatal Unit through the NMH Foundation and Fighting Blindness. This led to the purchase of a Retcam in 2019: an essential piece of equipment to help save the sight of our smallest babies. This was launched on World Prematurity Day 2019.

Alongside welcoming new additions to the department we have had to bid farewell to our most esteemed colleague Dr Veronica Donoghue. Most fondly known as Dr D, she is the most excellent Paediatric Radiologist, author and colleague. No ask was ever too big. Dr D introduced the use of neonatal and fetal MRI to NMH, delivered a masterclass in neonatal imaging on a weekly basis and had acted as a mentor to many of us throughout our training. We are so grateful and we wish her well.

Thank you to all staff in the NMH Neonatal Unit for your expertise, care and dedication in benefiting our patients.

Dr Claudine Vavasseur
Consultant Neonatologist

Ultrasound Department and Fetal Medicine Unit

The Ultrasound Department incorporating the Fetal Medicine Unit is an outpatient service for obstetric and gynaecological ultrasound, early pregnancy assessment, fetal medicine clinics and in-utero procedures. It is a tertiary referral centre for fetal medicine cases that includes the management of high-risk pregnancies and the diagnosis of fetal illness and abnormality. Thus, the service provides first trimester screening, detailed anomaly scanning, monitoring of multiple pregnancy, assessment of fetal well-being, amniocentesis, chorionic villus sampling, management of rhesus disease and fetal therapies including intrauterine transfusion, fetal shunt placement and laser therapy for twin-to-twin transfusion syndrome. Referrals for fetal medicine consultations, investigations and therapies are accepted from across the country of Ireland.

Gynaecology ultrasound clinics are provided by sonographers and consultant radiologists. Referrals received from the gynaecological out-patient clinic, private consulting rooms and general practitioners often request ultrasound as a first line investigation for pelvic pain and abnormal uterine bleeding. Gynaecological ultrasound is frequently used to evaluate and diagnose conditions in the pelvis, for example, ovarian cysts, abnormal uterine bleeding and uterine fibroids.

The team in the Ultrasound Department includes midwife sonographers, specialist radiographers, healthcare assistant, administrators, fetal medicine specialists, MFM fellow and a therapist. The midwife sonographers and radiographers provide a routine ultrasound service and unscheduled emergency appointments to approximately 400 obstetric and gynaecological patients per week. In 2019, there were 35,745 scans recorded on the ultrasound reporting system (ViewPoint): 7,884 of these were performed by Merrion Fetal Health, 26,981 were mainly performed in the Ultrasound Department but also in Private Rooms and other areas of the hospital. A further 880 were gynaecological scans performed in the main Ultrasound Department. There were 667 HCG bloods reviewed and followed up in the Early Pregnancy Assessment Unit. In addition to performing ultrasound scans, we provide CTG assessments, phlebotomy, counselling and antenatal care. The table below gives details of clinic attendances during the year as recorded on the patient management system (iPMS).

There are eight fetal medicine clinics per week for patients within our service and patients referred from external maternity units. The fetal medicine midwives together with the fetal medicine specialists provide care and support to these women who often need increased surveillance, prenatal tests, and extensive counselling. The fetal medicine midwife, being a dedicated contact person for these couples has a hugely important supportive role, caring for women at a vulnerable time in their lives. They also ensure clear communication is maintained with the referring centres which is essential in the management of these complex cases. The weekly perinatal MDT meeting continues as an effective forum to discuss these cases among the wider medical team.

There is a weekly specialist clinic for multiple pregnancies led by Dr Carroll and CMS Cecelia Mulcahy providing ultrasound surveillance and antenatal care to all monochorionic and any complicated dichorionic twin pregnancies. The National Fetal Neurosurgery



Claire Cowan, Staff Midwife, with her baby Margot born during the year.
(image credit Jeanette Lowe)

Programme led by Dr Crimmins and Mr. Caird from Temple Street Children's Hospital and the Fetal Cardiology Programme led by Prof McMahon from Our Lady's Children's Hospital, Crumlin further add to the management of fetal medicine clinics providing patients with specialist antenatal assessment and counselling.

We are delighted to welcome Claire Flahavan, Therapist, who joined the staff in 2019. She works closely with the fetal medicine team when therapeutic support may be helpful to individuals and couples and we are very grateful for her valuable contribution to patient care.

Teaching and education is an integral part of our work within the department for both midwifery and medical staff and students. We contribute to the clinical and theoretical components of the MSc and Graduate Certificate Ultrasound Courses in association with UCD. Clodagh Craven completed the MSc in Ultrasound at UCD. The unit had presentations at the British Medical Ultrasound Society Scientific meeting in UCD, February 2019. Finally, we express huge thanks to Dr Siobhán Corcoran and CMS Heather Hughes for their great work in organising the ISUOG-approved 'Dublin First Trimester Symposium' to be held in January 2020.

	2019		2018	
	Attendances	DNA Rate	Attendances	DNA Rate
Non Routine Scans	8,495	6.7%	8,041	7.1%
Routine Scans	4,918	2.6%	4,933	3.0%
Early Pregnancy	2,406	5.6%	2,354	8.7%
Beta HCG Clinic	2,296	1.5%	1,539	2.5%
High Risk	2,143	3.1%	2,385	3.5%
Casualty	2,022	1.0%	2,276	0.7%
Semi private clinic 1st Trimester Scans	1,596	1.9%	1,526	2.5%
Insulin Dependant	576	3.0%	527	2.9%
Identical twins	553	1.1%	610	1.6%
High Risk/Rhesus	476	3.3%	436	2.9%
Cardiology	224	1.8%	193	3.0%
Research	221	2.7%	362	2.8%
T+12 & Emergencies	169	18.8%	219	12.0%
Counselling Service	72	0.0%	55	1.8%
	26,167		25,456	

Valerie Spillane CMM 3

Antenatal Outpatient & Ultrasound Service

Quality, Safety & Risk Management

Clinical Governance

Clinical governance, a component of healthcare governance, continues to be the framework through which we are accountable for continuously improving the quality and safety of our services and safeguarding high standards of care by creating an environment in which clinical care will flourish. This requires the implementation and management of the “pillars” of clinical governance - effective service provision, risk management, patient experience, communications, resource management, strategy and learning - all underpinned by the solid foundations of systems awareness, team working, ownership, leadership and collaborative team working of staff, patients, patient families and members of the public. Such implementation and management is evolving towards an effective patient-NMH professional partnership

During 2019 within our clinical governance structures, our Clinical Governance Executive Committee met monthly (N=10) to discharge its responsibility to continuously monitor and manage the quality and safety of our services. This committee was supported by our Clinical Incident Review Group, meeting fortnightly (N=26) with responsibility for on-going, multi-disciplinary, critical review of reported clinical events to underpin high standards of care.

Activities during 2019 include:

- Appointment of a Claims Coordinator Support.
- Management of 90 additional risks.
- Management of 2,014 incidents.
- Coordination of 38 new claims.
- Continuation implementation of hospital-wide TeamSTEPPS 2.0 framework (*Team Strategies and Tools for Enhanced Performance and Patient Safety*). During 2019, 290 staff have been trained (*clinical staff 233 and non-clinical 57*), as well as the continuous improvement of all aspect of our Clinical Risk and Legal services.

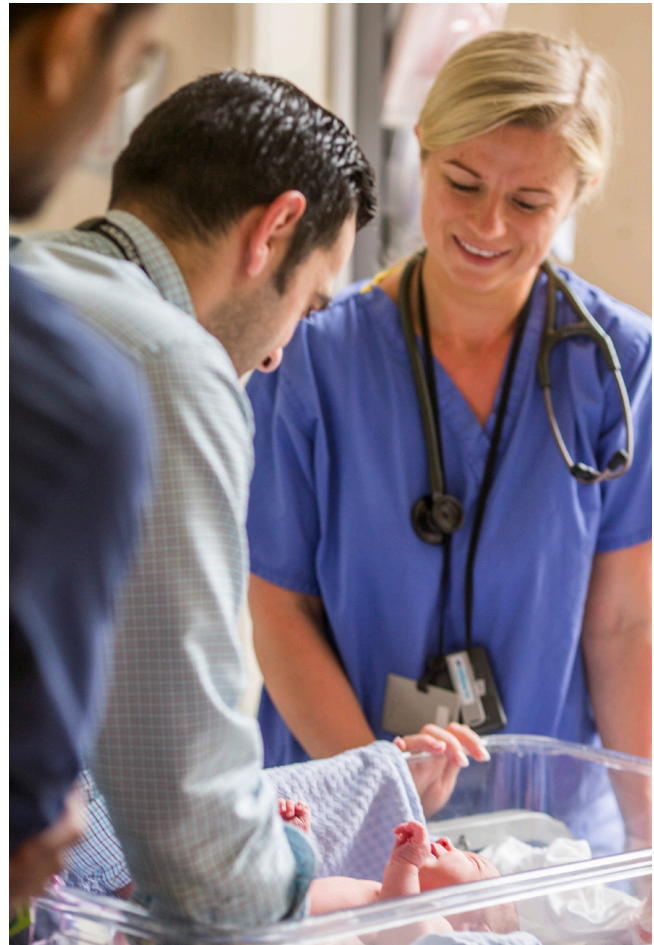
Plans for 2020 include:

- Migration of all clinical risk and legal management systems to the “Cloud” (*facilitated by Zoho*).
- Continuing roll-out of TeamSTEPPS 2.0.
- Provision of clinical risk training for hospital staff.
- Tighter integration with quality management systems.

Clare O’Dwyer & Laurence Rousseil

Clinical Risk Managers

Clinical Risk and Legal Department



Quality



During 2019, the Quality Department continued to lead and evolve continuous improvement in the NMH achieved primarily through our 3 core “systems”:

- Patient Feedback Management System (underpinning excellence in Patient Advocacy).
- Quality Improvement Registry.
- Audit Management System.

The Quality Dept. delivered through our Clinical Governance Executive Committee (*CGEC - meeting monthly*) for the review and approval of evidence-based practice and compliance with national standards and guidelines. The CGEC was underpinned by the multidisciplinary Quality, Risk and Health and Safety Committee which focussed on ensuring operational processes are in place to continuously monitor, evaluate and improve NMH quality and safety.

During 2019 the Quality Dept. continued to represent the hospital on the following external entities:

- IEHG Quality and Patient Safety Forum.
- IEMESH pathways sub-committee.

Quality activities during 2019 included:

- Continued improvement of NMH quality management systems.
- Completion of the new Patient Safety Complaints Advocacy programme.
- Management of 94 written and 44 verbal complaints.
- Facilitation of Managing Difficult Complaints Training workshops (x2).
- Continued management of IEMESH Pathways supporting women experiencing MESH problems.
- Delivery of Healthcare Audit workshops.
- Proactive involvement with community partners to enhance integration, coordination and seamless delivery of care including meetings of our GP Liaison Committee (x5) and the Patient Voice Group (x6).
- Coordination and management of NMH GP Study Days (x2).
- Contribution to Patient Safety Awareness Week (piloting of Quality and Safety Walk-rounds).

Plans for 2020 include:

- Continued evolution of core management systems.
- Formal establishment of Quality and Safety Walk-rounds.
- Development of a HIQA Maternity Standards self-assessment tool
- Roll out of the National Communications Plan.
- Revision and multi-platform provision of the NMH Patient Experience Survey.
- Participation in the National Maternity Experience Survey.
- Information evenings for our Community Partners (*PHN's, Practice Nurses, Doulas*).
- NMH GP Study Day.
- Continuing staff professional development.
- Sharing learning, and learn, within and beyond our hospital network.

Rachel Irwin

Quality Manager

Health and Safety

The National Maternity Hospital Health and Safety Department is dedicated to ensuring the safety, health and wellbeing of all our patients, staff, visitors and contractors. This is achieved by promoting and facilitating a safety conscious culture to ensure a safe environment and place of work in line with best practice.

Attendances at the twenty six Health and Safety Training sessions were favourably received by five hundred and five individuals during the year. The induction program for staff is further complemented by the mandatory study day which is open to both clinical and non-clinical staff. This runs regularly throughout the year and ensures all staff has an opportunity to refresh their health, safety and emergency procedures awareness. In addition, online training is also available for staff.

Fire Safety Consultants provided training for twenty six of our fire wardens in 2019. The hospital liaises closely with the Dublin Fire Brigade. There were eight hundred and thirty one individuals involved in the mock evacuations conducted. Ski sled awareness training is also provided during manual handling.



Nicole Elizabeth McKeown with her partner and son Jenson.
(image credit Helen Batson)

Contractor Management remains a key focus area. Additional minor capital projects undertaken improve site facilities and patient safety in the long term. These additional construction activities including the new 'Internal Building Team' require the effective implementation of contractor management controls. Managers in control of the workplace and our contractors work together to ensure safe systems of work are in place and working effectively.

The Annual Accident Review was conducted and there were a number of initiatives during the year to raise staff awareness of these hazards. All staff are engaged in working proactively with managing these risks to ensure a safe working environment for all our patients, visitors and staff.

Sincere thanks to all employees proactively working as a team to improve the safety culture within the Hospital. Thanks also to all members of the Quality, Risk, Health and Safety Committee which met on twelve occasions during 2019, to the Safety Representatives, Support Services Teams, Nursing & Midwifery and clinical teams.

While 2019 has been a busy year it is likely that 2020 will be even more challenging given the current constraints, scheduled complex and challenging projects and current financial environment.

Martin Creagh
Health and Safety Manager

Central Decontamination Unit

The department is committed to the highest level of quality in the decontamination (cleaning, disinfection and sterilisation) of Reusable Invasive Medical Devices (RIMD). Sterility assured reprocessing of RIMD is achieved through adherence with Decontamination Policies, Procedures and Guidelines.

Activity

Activity levels have continued to remain high year on year. In total 34,426 packs were sterilised in 2018. Non-conformance / complaints were 1.4% of production.

Audit

HIQA have commenced their auditing of decontamination and reprocessing of Reusable Medical Devices.

Training & Education

The HSSD Manager/Decontamination lead has completed a Bsc in Sterile Services Management, in IT, Tallaght, and also has completed the Decontamination Lead: Role and Responsibilities (DLR) Course in Eastwood Park Training Facility in the UK. The HSSD Deputy manager has commenced a degree in sterile services management in TU Dublin Tallaght.

Quality/Risk

A departmental risk register is in place on Database Oasis Risk Management System (DORMS) and escalation procedures are in place should this be necessary. The following audits took place during the year: Daily Quality Control Audit, Weekly Automatic Control Test, Monthly Key Performance Indicators, Quarterly Hygiene Audits and Annual Infection Control Audit.

Infection Control

Four Environmental Monitoring audits took place in 2019 where we sampled the air and surfaces from all rooms and water from the reverse osmosis water treatment unit. The results were discussed at the quarterly Infection Control meeting.

IAP Room Renovation

In November works on the IAP Room commenced to upgrade the room to a class 8 to comply with recommend standards. This involved a complete refurbishment of the room. A new HEPA Filtration air handling system, and also a new air-conditioning unit were installed.

Pamela Hutchings

HSSD Manager



*Ben McCrimmon, Central Decontamination Unit.
(image credit Helen Batson)*

Infection Prevention & Control

Surveillance of Infection

- Blood stream infection (BSI): No MRSA, Vancomycin-Resistant Enterococci (VRE) or Carbapenemase-Producing Enterobacterales (CPE) BSI was detected in any patient in 2019. There were 5 *S. aureus* BSI, two of which were healthcare associated (0.4 per 10,000 bed days used).
- The central line associated blood stream infection (CLA-BSI) rate was 3.0 per 1000 catheter days in the NICU in 2019 compared to 3.25 in 2018.
- There were two cases of ventilator associated pneumonia in the NICU a rate of 4.3 per 1000 ventilator days compared to zero cases in 2018.
- The rate of neonatal early onset GBS disease (culture or PCR positive) was 0.62 per 1000 births in 2019 compared to 0.38 in 2018.
- No infant had meningitis diagnosed in 2019.
- Four women developed maternal sepsis in 2019 (0.51 per 1000 maternities compared to 0.88 in 2018). One woman developed septic shock and three had sepsis. Two were antenatal following preterm rupture of the membranes, one was intrapartum and one was postnatal. All women recovered. The organisms identified were *E. coli* (2), *Streptococcus mitis* (1) and no organism identified (1). There was no gynaecology sepsis case.
- No patient was colonised or infected with CPE; 1776 patients were screened for CPE in 2019.
- One case of *Clostridium difficile* infection was detected in 2019 (0.2 per 10,000 bed days). It was not severe, there was no recurrence and no outbreak occurred.
- No norovirus infection was identified.
- Seventy cases of influenza were detected. None were healthcare associated.
- The overall surgical site infection rate for 2019 was 5.7% (136/2380); 5.5% (64/1162) for elective and 5.9% (72/1218) for emergency caesarean sections.

Hand Hygiene

- 499 clinical staff (91%) received hand hygiene training.
- Hand hygiene audits results: Q1-2: 92% and Q3-4: 95%.
- 1915 patients participated in hand hygiene satisfaction survey: satisfaction rate 100%.
- Activity adjusted figure for alcohol hand gel use was 42.5L / 1000 BDU (national average was 34.2L / 1000 BDU)

Compliance rate for Peripheral Vascular Catheter Care Bundles is 94% and 97% for Urinary Catheter Care Bundle

Antimicrobial Stewardship

- Consumption: 33.2 DDD/100BDU were used in 2019. This represents a 6.2% decrease on 2018 figure (35.4). Antimicrobial app updated for adults and neonates. Further 30% reduction in gentamicin use in 2019 compared to 2018. National Point Prevalence Survey 2019: 17% prevalence of antimicrobial prescribing, an increase from 14% in 2018. Compliance with guidelines was 96%.

Environmental screening:

- Quarterly Legionella testing of sentinel water outlets: there was 1 reading >1000cfu/L which remained positive after corrective actions including open flushing and disinfection. Preventative actions to address the source identified a colonised WHB on another floor on the same water circuit. The re-test result was negative. There were a number of low level results <1000cfu/L which were cleared with flushing.
- Quarterly *Pseudomonas aeruginosa* testing continues of all 12 hand hygiene sinks in NICU: No *P. aeruginosa* was detected.

Shideh Kiafar, *ADOM Infection Prevention and Control*

Dr Susan Knowles, *Consultant Microbiologist*

Simon Tokatly, *Antimicrobial Pharmacist*

Carol O'Connor, *Surveillance Scientist*

Occupational Health

Occupational Health is the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations by preventing departures from health controlling risks and the adaptation of work to people and people to their jobs. WHO 1950.

Occupational Health is a busy department that provides a service to all staff in order to maintain health and wellbeing within the workforce.

Key services continue which include pre-employment health assessments, sickness absence review, vaccinations, pregnancy and ergonomic assessments.

Consultations with the Occupational Health Physician were up considerably from the previous year to 216 and clinical nurse consultations were down to 323 ranging from pre-employment medicals, vaccinations, pregnancy assessments, first –aid consultations to ‘drop-ins’.

We have yearly intakes of both under graduates of BSc midwifery and HDip midwifery students and bi-yearly intake of NCHD’s. The NCHD’s now have a National Training and Planning Programme (NDTP) from the HSE which links in with an Occupational Health module for their medical forms and vaccination records. National

training was rolled out for all Occupational nurses and on-going training available.

We had another increase in our flu vaccine uptake for 2019/2020 seasons. We had an overall rate of 67.8% due mainly to overall public awareness and doing on site, ward clinics sessions plus thanks to the peer vaccinators which helped with shift and night work clinics. Extra peer vaccinators were recruited, bringing the total to 19. We increased our total rates from 42% in 2016/2017, 54% in 2017/2018, 66% in 2018/2019 seasons.

Occupational Blood Bodily fluid exposures continue to be monitored and updated algorithms for OBE exposure sent to all clinical departments.

The added Employee Assistance programme (EAP) has been a great asset to staff and their families in times of concerns big and small and many avail of it. We have also teamed up with HR to provide wellbeing talks for all staff which are well received.

Staff member Suzanne Howard continues to help on a part-time basis with the huge volume of administrative duties.

Anne-Marie Kelly
Occupational Health, CMM2 (Acting)



Social Committee members (left to right) Sarah McCourt, Amanda O'Connor, Helen McCrimmon, Maighread Gallagher and Ann Rath (front) enjoying the staff barbecue during the summer

Allied Health Services

Clinical Nutrition and Dietetics

The department provides a service to Neonatology, Maternity Services and Women's Health – including Diabetes in Pregnancy and Gynaecology. We are active members of the Multidisciplinary Teams in each of these specialities.

Despite a reduced number of births, clinical activity remained high due to ever increasing complexity of care, in addition to other demands on the service including specialist dietetic support and expertise for colleagues, research, education and contribution to specialist groups.

A priority continues to be support for maternal milk (MM) feeding. The multidisciplinary quality improvement plan (QIP) to improve MM provision for preterm babies in the Neonatal Unit, PRIME (PRe-term Infants need Milk Early), was expanded to include further initiatives to support breastfeeding, and continues to achieve success.

The reduction in the use of neonatal individualised parenteral nutrition (PN) following the introduction of improved standard PN was maintained, ensuring substantial savings in costs and ordering times.

In maternity and gynaecology, the DNA rate was reduced by 2/3 through a range of measures to improve access, including regular phone clinics and email check-in.

Several other QIPs were undertaken, including nutritional analysis of patient menus and expansion of evening snacks with the Catering Department. For the first time, we facilitated placement of postgraduate dietetic students for Catering training and supervised 2 MSc thesis projects. The results of qualitative research into women's experience of hyperemesis contributed to improved care. A proposed multidisciplinary nutrition and self-care program for young women attending the Daisy Clinic, led by Dietetics (EOB), was supported by the Linen Guild.

The ongoing audit of nutrition in the Neonatal Unit continued and details will be provided in the Neonatal Clinical Report published separately, and audits of antenatal classes were completed.

The team contributed to the revision of HSE National Nutrition in Pregnancy Guidelines and organised a successful conference in November with Maternity Dietitians Ireland.

The department plays an active role in the hospital Healthy Ireland (HI) program and our administrator coordinates many of the health promotion campaigns. Activities included a weight management program for staff, body mass index and health assessments on World Diabetes Day, introduction of a healthy meeting's policy and a range of activity challenges.

Other Department/Dietetic activities include:

- Conducted and contributed to research.
- Presentations at a range of conferences and study days.
- Staff education.
- Clinical training of UCD postgraduate MSc dietetics students.
- Contribution to Hospital Committees: Nutrition and Hydration Committee (SC, RMC), Healthy Ireland Group (SC co-chair).
- Membership of professional groups: Diabetes Interest Group (INDI), Neonatal Dietitians Ireland Group (chair RMC), Maternity Dietitians Ireland Group, and Research Interest Group (INDI).
- Dietetic/HSCP representation on national groups: HSE Neonatal and Paediatric Parenteral Nutrition Advisory Group (RMC), The HSE Baby Friendly Initiative Standards Group (RMC), the National Clinical Program for Diabetes (SC).
- Both managers completed the RCSI certificate in Leadership and Management.
- Two new staff members (1.5 WTE), with support from Ireland East Hospital Group, were welcomed increasing dietetic support for Maternity (Catherine Chambers) and Neonatal services. (Roisin Gowan).

Sinead Curran

Dietitian Manager, Maternity Services & Women's Health (SC)

Roberta McCarthy

Dietitian Manager, Neonatology (RM)

Clinical Engineering

The Department of Clinical Engineering continue to provide a designated, coordinated approach to the management of Medical Devices and Equipment (MDE) throughout the NMH. The department's objective is to ensure a safe, high quality service for its service users to enable better outcomes for patients.

2019 saw further hospital and HSE investment in MDE with the procurement of over 200 new and replacement medical devices, bringing the total number of in-service devices to 2478. The introduction of the Clinical Engineering on-line requisition system, EasyNet, saw an improvement in department efficiency by reducing time spent on administrative duties as well as providing greater accuracy with equipment life cycle history. This has enabled the department to continue maintaining its high level of in-house preventative maintenance with approximately 76% of medical devices maintained internally. The department's integration with HSE guidelines and policies with respect to MDE continues, as the national implementation of the Medical Devices / Equipment Management Policy is rolled out including the anticipated introduction of the Medical Device Equipment Quality Assessment and Improvement Tool (QA&I Tool).

With the on-going redevelopment of the hospital on its current site, and its proposed relocation to St Vincents University Hospital, Clinical Engineering participated on several committees

providing advice on all aspects on the management of Medical Devices including risk assessment and cost effectiveness. Other committees and projects that required departmental involvement include the National Maternal-Neonatal Clinical Management System (MN-CMS) and the design and development of a new Fluoroscopy Suite. The department also represents the hospital on several external committees such as the BEAI (Biomedical Engineering Association of Ireland) and the Health and Social Care Professions Expert Group and has continued its close working relationship with the National Neonatal Transport Program.

Department members continue to keep up to date professionally in order to maintain an appropriate level of competence by participating in many internal and external lectures / presentations and by furthering their academic qualifications with the completion of a Diploma in Project Management and the commencement of the Higher Diploma in Computer Science in order to up skill due to the introduction of MNCMS and the ever increasing risks in cyber security.

I would like to take this opportunity thank the team: Mr Dara Keeley, Mr Vasanth Pillai and Ms Maighread Gallagher for their on-going commitment and dedication to the NMH and its service users.

Eoghan Hayden
Head of Department



Vasanth Pillai and Dara Keeley from Clinical Engineering enjoying the Christmas lunch (image credit Jeannette Lowe)

Medical Social Work

New referrals to the department	693
Cases carried over from 2018	328
Total	1021

Total number of new referrals to TUSLA in 2019	59
High risk infant discharges*	25 (42%)

* *Infants discharged home under TUSLA (Child and Family Agency) safety plans or discharged into alternative care of any kind (voluntary, statutory or residential).*

The primary activity of the Medical Social Work Department (MSWD) remains in providing an individualised supported pathway to women throughout their pregnancy who are experiencing bio-psychosocial stressors. Social work interventions range from proactive collaboration to build and develop personal and community coping strategies and supports to strategic interventions to ensure the safe discharge of infants in high risk psychosocial circumstances.

Networking opportunities in 2019 included other maternity social work services nationally and community agencies including TUSLA, Treoir, Crosscare, Reception & Integration Agency, Women’s Aid, Reproductive Rights in Disability Forum among others. Networks can also generate fresh ideas and new opportunities for service improvement.

Knowledge and skills are the greatest resource of an effective social worker. MSWs were able to engage in training to improve intervention in working with abortion, adverse childhood experiences, social prescribing, Signs of Safety assessment framework, foetal alcohol syndrome, infant mental health, grief and loss in pregnancy, disguised compliance in child protection and migrant rights training.

The MSWD also provided training within the organisation and externally to UCD and Trinity College within the Schools of Social Work and Midwifery and Nursing on issues related to psychosocial risk and distress.

Highlights in 2019:

- Dáil representation: “Period Poverty”
- Collaboration: “Hidden Harm” training on Substance Use in Pregnancy
- Presentation: Dublin Maternity Hospitals “Substance Use in Pregnancy” Study Day
- Celebrating 100 years of social work in the NMH and at the National Irish Association of Social Workers event.

Kaylene Jackson

Head Medical Social Worker



Some Labour/Delivery Unit Staff (image credit Jeannette Lowe)

Pathology and Laboratory Medicine

If 2018 was the year of MN-CMS then 2019 was the year of the building. The much needed extension to the Delivery Suite had a major impact on the safe functioning of the laboratory. The expected vibrations from the necessary pile driving were expected to have a major impact on the operation of analysers in Biochemistry, Blood Transfusion, Haematology and Microbiology. All analysers needed to be placed on vibration mats and moved as far as possible from the source of vibration. Our seminar room was reconfigured as a microbiology instrument room, and the blood sciences area was reconfigured transferring Biochemistry to the front of the building and moving both Blood Transfusion and Specimen Reception. Our thanks go to the engineering department who assisted with the relocation of equipment and some reconfiguration works.

Once relocated, all analysers had to undergo reverification to satisfy accreditation requirements of the ISO 15189 standard. This work was in addition to the annual work involved in achieving and maintaining our accreditation. Congratulations are due to all the staff on their achievement. This work is in addition to supporting the increasing clinical needs of the hospital and its patients.

Service and Scientific Developments Consolidated During 2019

January 2019 saw the introduction of termination of pregnancy. This change in legislation led to a change in practice for Blood Transfusion where blood group analysis is now required to support this service in the community, ensuring that prophylactic Anti D is available as required.

The implementation of cell free (cf)DNA testing for RHD status of fetus and targeted antenatal Anti-D prophylaxis was completed and the service is now in place.

The department collaborated with clinical staff in developing a clinical pathway for identification and management of anaemia. To improve the workflow and patient management the ferritin assay is now provided by the Biochemistry Laboratory. The validation was commenced in 2018 and this service provided early in 2019. This work was greatly facilitated by the upgraded immunoassay analyser commissioned in Biochemistry.

This work, along with initiatives such as Rotem guided intraoperative transfusion and the single unit transfusion policy have led to a significant decrease in our use of all blood products with reduction in donor exposure for our patients and cost savings.



Robin Farquason, Chief Medical Scientist who retired in 2004 with Prof Shane Higgins at Charter Day celebrations

The proliferation of Point of Care Testing devices in the hospital needs careful monitoring and this draws significantly on the expertise in the laboratory. Work has commenced on the introduction of a standardised point of care glucose monitoring system in 2019 and this should be delivered in 2020.

Due to building works the planned introduction of the MALDI ToF for organism identification in microbiology was deferred. This very sensitive analyser was moved to 'cold storage' for the duration of the construction works.

The programme for histodissection by medical scientists is continuing in histopathology. Ms Paula Whyte will complete her portfolio in 2020.

Members of the department have worked with the design team, the Accenture management company and their colleagues in St Vincent's towards the integration of both departments in preparation for the co-location of the National Maternity Hospital to Elm Park Campus. We look forward to progressing with this project in 2020.

There were departures and new faces in many areas during the year. We are very grateful for the support of the Executive Management Team in assisting us with the provision of staffing resources to cover maternity leave and training to support 'out of hours' service.

Ms Orla Cormack joined Blood Transfusion as a Senior Medical scientist to support the increase service being provided. Mr Declan Ryan and Mr Philip Clarke were both promoted to Senior Medical Scientist. Ms Jenny Mulvany, Ms Grainne Gollogly, Mr Adam Bates and Mr Thomas Plunkett left their posts to pursue new career opportunities. Ms Carly Keegan returned as a Medical Scientist and Ms Alison Nolan was appointed to a permanent position as a Medical Scientist along with Ms Constance Young. Ms Laura Kennedy completed her term as Quality Officer and returned to Haematology. She was replaced by Ms Deirdre Duggan. Towards the end of the year Ms Bernadette O'Donovan took leave of absence from her post as Chief Medical Scientist in Blood Transfusion and has been replaced by Ms Natalie Sabine. Ms Catherine Doughty, Chief Medical Scientist in Biochemistry commenced Maternity Leave and has been replaced by Mr Damian Lally.

In the midst of all this change the department supported an increasingly busy and complex 'out of hours' service. Our challenge again in 2019 was to maintain both the routine and 'out of hours' service to meet the demands of the clinical service within the resources available. During 2019 training for multidisciplinary services was provided for 5 scientists bringing to 16 the number of scientists covering this service.

The department is committed to supporting development of staff and has a very active CPD programme. There are 2 scientists currently enrolled in Masters programmes. 2 Scientists, Gwen Connolly and Deirdre Duggan were successful in their Masters courses. The department continues to support the research needs of the hospital through collaboration with colleagues, development of new assays and clinical audit.

The capacity of the staff in Pathology and Laboratory Medicine to embrace and lead change is commendable. The only constant is that nothing stays the same. They have responded to the changes in working hours and increasing workload and have supported their colleagues in their academic studies while continuing to provide a quality service.

Marie Culliton

Laboratory Manager



Mary Anderson, Senior Medical Scientist, who achieved 40 years' service with The NMH in 2019!

Pharmacy

The pharmacy department safely purchase, store, compound and distribute all medicinal products used in the National Maternity Hospital, ensuring that appropriate standards for quality, safety and efficacy of medications are maintained. To that end, Brexit was high on the agenda for pharmacy in 2019, who worked diligently to ensure the supply chain for crucial medications was preserved. A list of strategically important medications with associated target stock levels of 3 – 6 months was implemented.

Pharmacists provide a clinical pharmacy service for the NICU, obstetric/gynaecology wards, maternal medicines clinic and antimicrobial stewardship, to ensure safe and effective use of medications. This is achieved through review of patients' charts using the MN-CMS along with performance of medication history checks at ward level. Pharmacists performed a clinical review of patients' chart 13,548 times in 2019.

The Chief Pharmacist plays a central role in providing the Drug and Therapeutic Committee with updated information on drug expenditure, new products, medication policies, procedures, protocols, guidelines and patient information leaflets. The committee is also notified of cost implications associated with changes in clinical practice. The Chief Pharmacist is also a member of the Research Ethics Committee.



Noreen O'Callaghan, Senior Pharmacist who retired at the end of the year after a lengthy service to the Hospital



Aine Toher, Pharmacist, Jacinta Byrne, CMS Haematology and Anne Clohessy Pharmacist were finalists in the Patient Safety Category of the Hospital Professional Awards for their work in developing the Innohep (Tinzaparin) patient information leaflets that are now used in NMH to teach patients how to self-administer Tinzaparin safely and correctly

The NMH medication safety programme, led by a Senior Pharmacist, continued to be expanded in 2019. Through the medication safety the committee, a 5-year strategy, along with an annual workplan, were devised and implemented. Activities included dissemination of quarterly medication safety newsletters, performance of audits and quality improvement initiatives, along with an extensive programme of induction and ongoing training for all clinicians.

During 2019, pharmacists continued to develop and implement the electronic prescribing module of the MN-CMS, and continued to provide training, which included an expanded programme of training at induction for NCHDs, along with "Business as Usual" optimization training for all clinicians. Pharmacists provided leadership in introduction of the Gynaecology aspect of the MN-CMS on 29th September.

The NICU pharmacist completed a Masters in Clinical Pharmacy through UCC.

David Fitzgerald
Chief Pharmacist

Physiotherapy

The Physiotherapy Department had an increasingly busy year in 2019 with over 4,200 new patient referrals. This sees the highest demand recorded to date and reflects an increasing need for physiotherapy services. This demand drives the shape of our service leading to our increased provision of group classes to try and reach our service users. Over the course of 2019 our staffing levels swung between 4.6 - 5.6 WTEs with one 0.6 WTE based in the Pelvic Floor Centre in St. Michaels Hospital.

The Physiotherapy Team provide:

- A referral based Physiotherapy service to all in-patients Mon-Friday.
- An outpatient clinic offering appointments Monday-Friday for musculoskeletal conditions and issues relating to pelvic floor dysfunction.
- A neonatal service four days weekly.
- Ongoing delivery of the hospital antenatal and postnatal education programme alongside our colleagues from Midwifery and Nutrition and Dietetics.
- A range of education sessions to facilitate early assessment and timely access to physiotherapy services e.g. Pelvic Girdle Pain Class, Pelvic Floor Care Class & Healthy Bodies after Birth Class.
- A service to the multidisciplinary Pelvic Floor Centre team based in St. Michaels Hospital every Monday and Wednesday.

Commitment to Education and Professional Development

We continued to provide Physiotherapy input into:

- Lecture Programmes for Midwifery, Medical & Physio students (RCSI and UCD)
- The Active Management of Labour Courses.
- Clinical training for UCD undergraduate Physiotherapy students

Training attended in:

- Bladder Pain Syndrome
- POGP Physio Assessment & Management of MSK conditions
- IUGA Symposium
- The Female Athlete
- Functional Assessment of the Pelvic Floor – Helen Keeble

Judith Nalty

Physiotherapy Manager

Psychosexual Therapy

The Psychosexual Therapy Clinic continues to be very active with there being an increase of over 50% new referrals received in 2019. The main source of referrals are from General Practitioners and Oncology services throughout the country as well as clinics from within the National Maternity Hospital including gynaecology, infertility, oncology, physiotherapy and post-natal clinics.

Vaginismus remains the main reason for referral for couples and individual women.

As in previous years, there remains a waiting list to be seen for an Initial Assessment. Following this assessment, if therapy is agreed to be the right course of action, clients are seen on a fortnightly basis for approximately 12 to 30 sessions which may span over 6 to 18 months or however long is necessary to deal with the difficulty.

The Psychosexual Therapist was invited to speak at several conferences throughout the year. These included the Cancer Society's 'Living Well and Beyond Cancer Conference 2019' (Intimacy and Sexuality after a Cancer Diagnosis), the 'Institute of Obstetricians and Gynaecologists Spring Conference' (Renewing Sexual Intimacy Post Menopause) and the 'Prostate Cancer Nurse Survivorship Meeting' (Exploring Sexual Intimacy and the Effects of Prostate Cancer on Relationships). Feedback received was very positive and it is hoped clients will benefit from the sharing of information.

The Psychosexual Therapy Clinic hosted monthly Peer Group Review meetings in the hospital as well as a Cross Border Study Day comprising of Sex Therapists practising in the North and South of the country.

Lectures to Medical and Midwifery Students continue throughout the year and remain important in increasing awareness about sexual difficulties and help available.

Meg Fitzgerald

Psychosexual Counsellor

Radiology

Paediatrics

The Department of Paediatric Radiology was established in 1984 and has evolved over the years to provide a range of ultrasound and radiographic services to the hospital's paediatric patients.

Services Provided for Paediatric Patients

General radiographic examination on neonates admitted to the Intensive Care Unit and the nursery and for infants attending the outpatient clinics if required. The majority of this work is portable radiography.

- Fluoroscopic gastrointestinal contrast studies.
- Ultrasound and doppler service.
- Ultrasound examinations for developmental dysplasia of the hip.
- MR examinations for infants up to one year of age.
- Fetal MR examinations in pregnant patients.
- CT examinations via The Children's University Hospital, Temple Street, D1.

This year the National Women and Infants Health Program funded the radiology department in the NMH to provide the National Fetal MRI Program under the leadership of Dr Gabrielle Colleran. This service represents a significant service development for pregnant women in Ireland.

Services Provided for Adult Patients

- General radiographic examinations.
- Hysterosalpingograms and selective fluoroscopic examinations.
- Limited ultrasound service. Referrals are currently limited to patients referred by National Maternity Hospital consultants. The types of examinations are limited to upper abdominal examinations and transabdominal and transvaginal pelvic examinations. Emergency ultrasound (including doppler ultrasound) examinations are performed at St. Vincent's University Hospital
- Elective and emergency CT examinations via The Radiology Department, St. Vincent's University Hospital
- MR examinations via the Department of Radiology, St. Vincent's Private Hospital. Examinations include staging of cervical cancer and uterine cancer, MR characterization of ovarian masses and MR urography
- Interventional radiology procedures via the Department of Radiology, St. Vincent's University Hospital. Procedures include emergency nephrostomy and abscess drainage.

A total of 6,001 examinations were performed in 2019.

Adult services: 1,434 adult examinations were performed of these 232 examinations were hysterosalpingograms and 968 ultrasounds were performed. 162 other adult examinations were performed including x-rays and fluoroscopy.

4,567 paediatric examinations were performed. 1,939 were hip ultrasound and 544 cranial ultrasounds were performed. 1,919 other examinations were performed including x-ray, fluoroscopy and other ultrasounds, (renal, abdominal, chest, soft tissue, vascular). 168 MRIs were performed of which 101 were fetal MRI examinations.

Dr Gabrielle Colleran

Consultant Paediatric Radiologist and Head of Department of Radiology, NMH and Radiology Lead National Fetal MRI Program.



Dr Veronica Donoghue Consultant Radiologist who retired during the year after many years of service, with the Master, Prof Shane Higgins (image credit Jeannette Lowe)

Support Services

General Services

2019 was yet another busy year for the hospital with thousands starting out their new life in our historic Georgian building. The planned relocation to new state of the art co-located facility on the site of St Vincent’s University Hospital continues with pace. In the meantime General Services work closely with all in NMH to ensure service levels are optimised despite suboptimal infrastructure. Below are updates from some of the General Services Departments.

Tony Thompson
General Services Manager

Hygiene Services

The Household Department continued to provide clean and safe facilities for the use of all patients and staff in 2019. Utilising the latest technologies and cleaning methods, the department delivered 24-hour services in line with international best practices.

An important focus during the year involved identifying the operational requirements of the “next-generation” National Maternity Hospital, currently under construction. This required a full review of the existing operation’s staffing and processes, and identifying the transitional steps needed to upgrade to the larger facility.

There was also good participation in the hospital’s “Patient Safety Week,” in assembling the “Patient Risk Room” as a training tool for all hospital staff, and promoting the department’s introduction of absorbent spill pads as an added measure to improve the safety of the facilities.

The department achieved full compliance with all hospital training programs, with all staff members completing their annual skills training, as well as chemical awareness and audit training. Departmental representatives were actively involved in the national pilot of the “National Hand Hygiene Training Programme” launched by the HSE.

Mark Anderson
Hygiene Services Manager

Laundry Services

In 2019 the Laundry Department provided a 24/7 365 day service to the hospital. All Wards and Theatre, Delivery, NICU receive a number of collections of soiled linen and deliveries of fresh linen every day. Scrub Suits are also delivered to Theatre, Delivery Ward, and CSSD. Laundry also provide Coats for Doctors, Lab Staff and Students. A mop supply and laundry service for housekeeping and service of table and tea cloths etc for catering is also provided. The hospital mats are also managed by Laundry,also all the hospital curtains and nests for NICU unit.

The Department has two Staff – one working Supervisor and one Porter. Both manually deliver and collect all the laundry. The stock ordering and management of deliveries and storage of fresh and soiled linen are part of service provided.

There is no absenteeism currently

Aprox 1,000,000 pieces of linen are. delivered, collected and laundered per year. Linen includes, cot sheets, cot Blankets, Pillow cases, Towels,Adult blankets, sheets ,Duvets,gowns, scrub suits, coats and scrub suites etc

Training needs analysis conducted and all porters are trained in areas such as.

- Manual handling
- Infection control
- Emergency skills
- Team steps
- Haemovigilance
- Medical gases
- MAPA
- Mandatory training
- Hand Hygiene

New Developments in laundry department:

- Order of two laundry carts for clean linen deliveries
- New upgrade of lights in linen presses(Qip)
- New container storage in carpark for soiled linen
- Secured area for holding all linen trollys in carpark

Glenn Kynes
Laundry Services Supervisor

Portering Services

The Portering Department provides an essential frontline service within the National Maternity Hospital.

We ensure that all wards and departments are effectively and efficiently serviced, which includes:

- Transfer of patients within the hospital
- Transfer of patient specimens to the laboratory
- Assisting nursing staff in patient lifting and positioning
- Transport of medical equipment within the hospital
- Receiving and delivery of all internal post
- Assisting staff when requested
- Collection of blood and other products from the blood bank
- Collection/delivery of pharmacy products

The Department has continued to support education and training programmes and continue to undertake mandatory training on an annual basis developing new essential "Emergency Skills Training" course in conjunction with the Labour Ward, staff achieved 100% in Manual Handling.

With the on-going redevelopment of the hospital on its current site, and its proposed co-location to the St Vincent's University Hospital Campus, the Portering Department participated on several committees providing advice on all aspects on the management of Portering Services including risk assessment and cost effectiveness.

The department also represents the hospital on several committees such as the Goal 3 NMH Strategic Plan 2019-2023 and Goal 2 NMH Strategic Plan 2019- 2023, Go Green Committee.

Warm welcome to Glenn Kynes, newly appointed Laundry Supervisor, we wish him the best of luck in he's new role.

In April 2020, we were sorry to hear of the death of our colleague and friend Ronan Power. Ronan worked in the NMH for over 24 years and he is sadly missed.

Claudiu Zselemi

Portering Services Manager



Ronan Power RIP

Switch/Reception

In 2019, despite an increase in calls and patient flow, the Switch Team continued to provide a seamless customer focused link between the public and the hospital. Professionalism and a welcoming smile or voice from the switch Team is the first contact the public have with the hospital and we take great pride and pleasure in delivering this.

Kathleen McGuire

Switch Manager

Catering

The catering department continued to build on the many new changes introduced over previous years.

We retained our Distinction in the Food Safety Assurance Award, achieving 100% from an intensive audit carried out by an independent body “The Food Safety Professional Association”.

Our commitment to food safety training has continued with 7 staff completing QQI level 5 food safety, two staff have completed QQI level 6 food safety and one staff member completed QQI level 6 food safety auditing. The catering staff have completed in house training on chemicals /allergens and level 2 food safety.

2019 saw us introduce new patient and staff canteen menus with an evening snack pack going to all post -natal patients. All items available in the staff canteen have allergen and nutritional information available on the label to allow the customer to make their own decision. All units now have an allergen folder available for reference. In conjunction with the “Go Green Committee” we reduced our use of all disposable cups and highlighted and encouraged staff to use to recyclable cups for all their beverages.

In conjunction with the diabetic department the catering department has been approved for a trial for an electric ordering system. This will allow us to follow the patient’s path throughout the hospital from admission to discharge. Only two sites were picked for this trial so the department is delighted with the opportunity to progress with this.

We continue to cover all aspects of any functions for the hospital in house events, from retirement parties, GP study days, graduation days to Charter Day celebrations and Christmas lunches. The team works hard to deliver the highest quality of service.

2020 will see plenty of new challenges for us and we will continue to improve all areas we can and would like to thank all departments in the hospital and especially our staff for their help and support throughout the year.

Elizabeth Byrne
Catering Manager



The Catering Team receiving their award from The Food Safety Professional Association

Chaplaincy

During 2019 the Chaplaincy team provided spiritual, emotional, grief and bereavement support to bereaved families who have experienced, early miscarriage, mid trimester loss, stillbirth and neonatal death. In addition to this, we provided support to bereaved families who availed of the new abortion services at the NMH.

The table below gives the number of cases the Chaplains were involved in during the year. The 'undocumented support' includes care given to bereaved families who did not avail of the full range of chaplaincy services. Support was also provided to families whose babies death had not been acknowledged in any way in the past. Support was also extended to bereaved families who have had to travel abroad for a procedure, and came to the chaplaincy department to seek support after this very sad event. We also provide support to staff members.

	2019	2018
Miscarriage	8	30
IUD/Stillbirth	108	103
T.O.P.	20	3
Neonatal Death	33	27
Services - Naming / Baptisms/removals, etc.	151	85
Undocumented Support	50	0
Total	370	248

The Chaplaincy Department organized and led liturgies for significant events in the life of the hospital. This year's Remembrance Service was very well supported by patients and their families. The service was attended by approximately 1,800 people, indicating the importance of this commemorative event. As in previous years many bereaved parents, as well as a number of bereaved adult siblings, requested that baby's names be included in the Book of Remembrance which is on permanent display in the hospital oratory.

We spent a large amount of time developing the bereavement chaplaincy service to bereaved families who availed of the T.O.P. services. Ensuring that the main focus was placed on meeting the bereaved family's needs, this support was further extended to staff members also, who were struggling to adapt to providing this new service.

The chaplaincy office was used as a quiet space providing spiritual, emotional, grief and bereavement support to bereaved families and to staff members. There was also other unspecified and unplanned support provided, this support often occurred informally with staff, patients and their families on corridors and other locations throughout the hospital.

Education

In 2019 the chaplaincy team lectured at a number of education days, e.g. Bereavement Study Day, the NCHD Induction, H. Dip students and Training day, Liberty Students Induction and Training Day and the Qualified Mid-wives Induction Day. The team are members of the Bereavement Committee and chair the Annual Remembrance Service Committee meetings. The team engaged fully with continued professional development programmes and attended all relevant conferences.

Team Work

The team work closely with many staff but particularly with the bereavement midwives; we continue to collaborate and implement any changes that help to enhance and improve the service we provide to bereaved parents and their family.

Chapel of Rest/Mortuary

The Chapel of Rest improves the service we provide to bereaved parents and their families. Bereaved parents recognise the gentle creativity and the sensitivity of the design of this room. A suitable space is also available in the chaplaincy office to support parents. We continue to work with other departments as well as various faith leaders, funeral directors, crematoriums, and cemeteries to manage Chapel of Rest and Mortuary Services

Helen Miley & Angela Neville Egan

Chaplaincy

Facilities Engineering

2019 has been seen increased activities across all departments which are detailed in the sections below. I would like to welcome Graham Tucker, Sean Murray and Michael Loughnane who joined the department during 2019; I wish them every success in their careers here at the National Maternity Hospital.

Maintenance

Michael Loughnane joined us as the Maintenance Supervisor and we wish him every success in his new post. The Department deals with routine and planned preventative maintenance throughout campus. The paperless maintenance system is managed by the Services Coordinator and has continued its success in streamlining works administration during 2019 whilst ensuring easy access for staff in reporting engineering issues identified and providing a clear management processes. Our essential repair and maintenance works in an aging building have continued successfully during 2019 ensuring as far as is reasonably possible the safety of site and the efficacy of services.

The Internal Building Team (IBT)

The IBT are tasked with undertaking minor-mid range construction projects within the NMH. 2019 has been an extremely busy year for the team and also a successful one. Construction markets are very buoyant and works undertaken by the IBT are delivered at lower rates over market (circa -20%) whilst providing improved quality, site flexibility without penalty and with improved infection, prevention and control compliance.

Internal Project Management

2019 has seen an unprecedented number of internal construction and building projects for the NMH. Whereas this brings challenges not only in terms of construction on a complex and aged brown field site, it also brings much needed additional space and facilities.

Construction of two major projects commenced in 2019 and completions are currently scheduled for 2020. These are complex projects in terms of design and constructability and will provide an extension to the Labour and Delivery Rooms available and an increase to the existing Operating Theatre numbers and support spaces on site. Illustrations can be seen below.

Environmental

The NMH is one of the few hospitals to achieve ISO 14001:2015 status. We have successfully retained our prestigious accreditation during 2019 through rigorous audit.



Works have continued in the areas waste. Healthcare Risk Wastes, Non Risk Wastes and Recycling have all shown target improvements during 2019 and we thank our colleagues who segregate waste at source for their efforts in achieving this.

Energy usage on site has also shown target progress. The use of natural gas and electricity on site, whereas essential to maintain and delivering clinical services, is monitored carefully with an ambitious programme in place for reductions. Our ISO environmental targets set during 2018 have were met during 2019.

It only remains for me to thank the Facilities Engineering Department (FED) teams for their hard work during 2019 and to acknowledge the contribution and cooperation of the various departments in which projects are taking place.

Neil Farrington
Facilities Engineering Manager

Information Technology

Throughout 2019 the IT Department made more improvements to the Storage Area Network (SAN) and network infrastructure. The SAN Equipment that was installed in August 2018 was tuned and optimised and the data from the old SAN moved across successfully. Old 3COM Switches in the following locations were shut down and cables moved to new switches or existing Juniper Switches (sharing with WIFI) – Social Work Dept., X-Ray Dept., New Lab Comms Room, Semi-private Clinic (SPC) Comms Cabinet, Engineering Lobby and Lab Basement Cabinet.

The new Pharmacy was networked and PCs installed in January 2019.

Network cabling work (repairs and additions) was also completed in the following offices and departments in an effort to remove small hubs (contribute to poor performance on network) – Admissions Dept., X-Ray Dept., SPC, Catering Offices and Lab Basement. Cabling in Lab Basement in June was necessary to allow Microbiology Lab to move as a result of piling being done as part of Delivery Ward Extension.

Upgrades: Medibridge System in Lab upgraded in June, QPulse was upgraded to version 7.0 in October, Gynae MN-CMS went live in September.

The graph above shows the workload trends for the I.T. Dept since Dec 2016 based on ITIL model. Blue line represents Category 1 (break /fix) items.

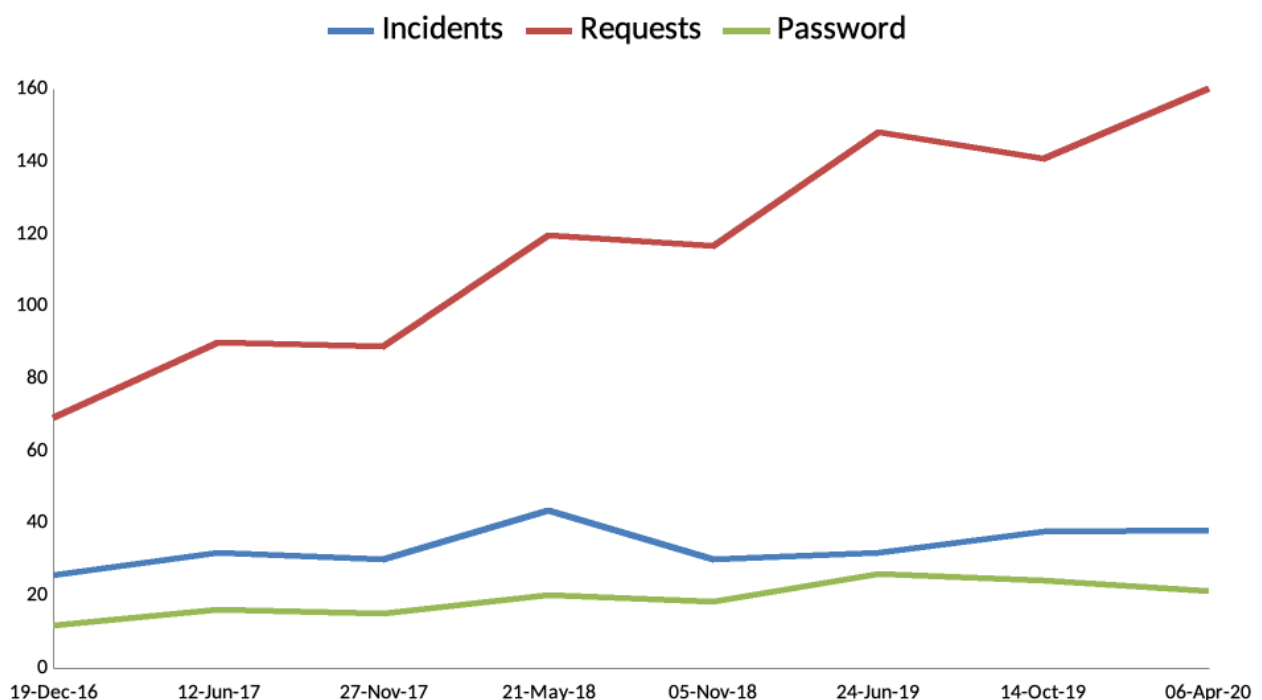
Green line represents Category 2 (password reset) items.

Red line represents Category 3 (requests for assistance) items,

IT Staff members Martin Keane, Con Grimes and Declan Corrigan also attended many meetings on the project for colocation of NMH to St. Vincent's Hospital.

Con Grimes took over from Martin Keane as I.T Manager in August 2019 when Martin was seconded to IEHG to work on the NMH @ Elm Park Project.

Con Grimes
IT Manager



Development Project Office: NMH @ Elm Park

The co-location of The National Maternity Hospital (NMH) at St. Vincent's University Hospital is progressing well. 2019 has been a very productive year with the enabling works to facilitate the progression of the project to relocate NMH on the SVUH campus. The detailed design of the new hospital, following an extensive process of engagement has been completed and signed off.

The NMH is now moving into a new planning stage, concentrating on Operational Readiness planning. This work is to prepare the NMH, as an organisation, for the move to the new state of the art hospital building and to ensure it is operationally ready to support the continuity of quality care to patients attending the NMH. It is also important that staff will feel secure in the provision of services in a new facility so the operational readiness planning will facilitate staff training and familiarisation of the new facility.

A NMH Programme Management Office (PMO) has been established with a pillar structure overseeing keys aspects of work

required. The preparation of the Final Business Case (FBC) for the project has commenced and continues to be a priority. The FBC sets out the revenue plan for the new hospital.

The NMH PMO and Executive Management Team would like to express our gratitude to all staff for their continued contribution to the project. The expertise of all our staff involved in providing NMH services are key to the success of this project.

Members of the Development Project Team & Operational Readiness Team are:

Prof Shane Higgins, Ronan Gavin, Mary Brosnan, Dr Orla Sheil, Dr Jennifer Walsh, Pauline Treanor, Gillian Canty, Martin Creagh, Geraldine Duffy, Emmet Travers, Eoghan Hayden, Damian McKeown, Sarah McCourt and Martin Keane.

Pauline Treanor

Operational Programme Manager



Staff on a Valentine's Day walk in conjunction with the Heart Foundation's annual 'Love Life Love Walking' day

Education

UCD School of Medicine, Obstetric & Gynaecology

UCD runs an extensive research and teaching programme at National Maternity Hospital in Obstetrics & Gynaecology and Neonatology. Undergraduate students attend the hospital in four iterations for a period of six weeks during their clinical studies. The module is coordinated with university lectures to provide a comprehensive grounding in all aspects of reproductive medicine. The three Academic members of staff oversee this programme; Prof Fionnuala McAuliffe, Head of Women's and Children's Health, Prof Mary Higgins and Prof Donal Brennan. Neonatology is supervised by Prof Colm O'Donnell and his team.

The John F. Cunningham Medal, awarded annually to the student who graduates with the highest grade in Obstetrics and Gynaecology, together with highest grade in their final assessment; the winner for 2018 is Dr David Connellan. The Kieran O'Driscoll Prize is awarded each year to the student who attains the highest grade in Obstetrics and Gynaecology; 2019 winner this year is Mr David O'Driscoll.

In addition, fourteen national and international medical students attend for clinical electives during the winter and summer, completing further education and research requirements. Students attended from Irish Medical schools and from University of Descartes, Paris. Many of these students have commenced postgraduate training in Obstetrics & Gynaecology.



Mr David O'Driscoll being presented with the Kieran O'Driscoll Prize by Nicolas Kearns, Deputy Chairman

UCD Perinatal Research Centre

The centre coordinates the significant research currently ongoing at National Maternity Hospital in pregnancy, nutrition, diabetes, and clinical education. The research is supported by Health Research Board Ireland, The European Union and Science Foundation Ireland. A number of large clinical intervention trials are underway including lifestyle interventions (PEARS study), 10 year follow up study of 800 mothers and infants (ROLO study and ROLO kids), a multicentre trial to increase breastfeeding amongst women with BMI > 25 (Latch-on study) all aiming to improve mother and infant health. A new research programme entitled 'Microbe Mum' was recently established which was successful in securing funding as a dedicated Science Foundation Ireland Spoke. Our research programme is currently supervising 6 PhD students and has led to over 40 publications from UCD Perinatal Centre in 2019. During the year research from UCD Perinatal Research Centre has been presented at many national meetings and at six international conferences.

Dr David Crosby was award MD for his research on the role of inflammation in fertility, with Prof Mary Wingfield as supervisor and Ms Siofra Maher received her Master's thesis on nutrition and microbiome in pregnancy. Dr Gillian Ryan submitted her thesis on vaginal delivery following CS.

Awards for research presented at international conferences

2019 Ms Cara Yelverton mother and child eating behaviours selected at European Congress of Obesity as featured on newsletter and interview

2019 Ms May Worrell best medical student prize epilepsy in pregnancy outcomes British Maternal and Fetal Medicine Society Meeting Edinburgh

2019 Dr Eileen O'Brien received dietician researcher of the year award from INDI

Prof Fionnuala McAuliffe

Chair and Department Head of Obstetrics and Gynaecology at UCD

Education and Practice Development

The Education and Practice Development Department is responsible for the organisation and coordination of ongoing education and the professional development of both qualified and student midwives and nurses at the National Maternity Hospital. We promote the philosophy of life-long learning and support staff to participate in educational programmes, conferences, seminars, and study days both internal and external. Several staff are pursuing education at Postgraduate degree, MSc and PHD levels.

In conjunction with the Centre of Midwifery Education the NMH provides an ongoing continuous professional development strategy for nurses and midwives.

The NMH in partnership with the HEIs have striven to maintain a high level of quality Midwifery and Nursing education to all students and qualified staff alike. The aim is to promote high standards of professional education, training and practice and professional conduct among nurses and midwives thus ensuring the safety and protection of the public.

In 2019 the NMH provided education and clinical placement for 20 BSc and 23 Higher Diploma Midwifery students and provided Maternity Care placements for approx. 190 UCD general nursing students. The Hospital also facilitated clinical placements for

paramedics, Public Health Nurses, Erasmus Midwifery Students and elective placements for a number of midwifery students from both Ireland and overseas, all co-ordinated through the department. The Transition Year two day midwifery programme was run again and this was very positively evaluated by those who attended.

The Joint Research Network (JRN) between the National Maternity Hospital (NMH) and University College Dublin (UCD) was established in 2007 to develop a research culture for midwives, student midwives and nurses. The JRN won the research category at the Irish Health Centre Awards.

Congratulations to the following midwifery students who were awarded prizes at the 2019 Charter Day:

Gold Medal	Dawn Smyth (Higher Diploma) Siobhan O 'Doherty (BSc).
Elizabeth O'Farrell Medal	Aisling Taylor (Higher Diploma) Anna Mockler (BSc).

Lucille Sheehy
Clinical Practice Development Co-ordinator/ADOM/NN



NMH Education and Practice Development Department with UCD Colleagues

Royal College of Surgeons in Ireland

Forty-six undergraduates from the Royal College of Surgeons attended the National Maternity Hospital for their seven weeks rotation in Obstetrics and Gynaecology; twenty-three students in January/February and twenty-three in February/April. The students learned a great deal during their time in the hospital and provided very positive feedback on their teaching.

The programme was co-ordinated in January by Dr Michael Foley and Dr Catherine McNestry, Tutor with Professor Declan Keane taking over as Associate Professor in March. Ms Miriam Shanley provided administrative support to the students. Teaching is provided by Consultants and various other members of hospital staff. In addition to the intensive obligatory e-learning programmes, the students, while rotating through all areas of the hospital, receive lectures, tutorials and 'hands on' demonstrations.

Twenty-two of our students achieved honours in their final Obstetrics and Gynaecology examination at the RCSI. Of these students, four were awarded first class honours. Ms Eva O'Connor and Ms Hannah Marsh were awarded the NMH/RCSI medal for achieving the highest marks amongst the RCSI students who attended the National Maternity Hospital. This excellent performance reflects the enthusiasm of all those taking part in the teaching programme.

Prof Declan Keane

Professor/Senior Lecturer and Consultant in Obstetrics/Gynaecology RCSI/NMH

The Medical Fund

The Medical Fund, as set out in the Hospital Charter and Byelaws, provides funding for education and research related to the medical services provided by the NMH.

The Fund generates income from the semi-private clinic and the main operational costs relate to the staffing and running of the clinic.

The operation of the clinic and the fund involves a total of ~8 personnel which excludes consultants who provide a sessional commitment and also excludes those engaged in funded research.

During 2019 a number of educational and training courses were organised for doctors and midwives and nurses. In addition, funding continued for a number of research projects and research fellows.

During 2019 total expenditure was €1.264M, including €0.291M on salaries. Included in this total expenditure is €0.111M that was spent on education and €0.434 spent on research and a charge of €0.250K in relation to depreciation. The Fund made a loss of €0.117M during the year. The Fund is engaging with the NMH Foundation in relation to establishing a number of grants to provide ongoing funding for research projects in the coming years.

The Fund is administered by a Medical Fund Council comprising the Master, Professor Shane Higgins, Dr Peter McParland who is a representative elected from the obstetrics & gynaecology consultants of the NMH, Mr William Johnston and Mr Frank Downey.

Professor Shane Higgins

Master

Research Ethics Committee

The following are members of the committee:

Dr John Murphy (Chairman)
 Lee-anne Phillips (Secretary)
 Prof Shane Higgins
 Ronan Gavin
 Mary Brosnan
 David Fitzgerald
 Ann Rath
 Valerie Kinsella
 Fionnuala Byrne
 Dr Paul Downey
 Emmanuel Ogungbe
 Dr Siobhan Corcoran
 Fionuala Watkins,
 Gemma Coady,
 Tricia Higgins
 Elaine Corcoran

The Research Ethics Committee is a National Committee and is approved to receive and approve application proposals nationally.

Monthly meetings are held with the exception of August. There is one quarter lay attendance and a quorum is required at each meeting.

Generally, the applications are approved at each meeting; if not approved the Chairman will request clarification on a particular issue.

In 2019 the Research Ethics Committee received 41 new research application proposals; 27 of these were approved at first review, 13 needed further clarification. 1 proposal did not meet ethical criteria and therefore was rejected.

During the year, our Secretary represented the National Maternity Hospital by attending GDPR and Health Research Regulations training courses for the new Data Protection (GDPR) Act 2018 as well as the New Data Protection Impact Assessment Masterclass.

Prof John Murphy (Chair)
Consultant Neonatologist



BSc Midwifery Graduation Day

Administration

Hospital Inpatient Enquiry (HIPE)

The Hospital Inpatient Enquiry (HIPE) system collects information on hospital day cases and inpatient activities in Ireland. The HIPE system and associated coding will determine the invoicing and future budget of the hospital.

In 2019 a total of 17,432 discharges were coded. HIPE staff review the entire medical record contents and extract principal diagnosis and procedures. Medical classification codes are then assigned as per ICD-10-AM Eight Edition or Turbo Coder (e-book). A principal diagnosis and up to 29 additional diagnosis as well as a principle procedure and up to 19 additional procedures. These are then grouped into a DRG (Diagnostic Related Group) which

categorizes patients into groups based on clinical similarities and resource consumption. They are then exported monthly to the Healthcare Pricing Office with a strict 30 day deadline. The hospital budget will be set based on agreed/commissioned Activity Based Funding target levels and monies will only be provided when activity is carried out and invoiced i.e. coded.

Liz Mahon
HIPE Supervisor



Nicola Clarke (centre), Assistant Director of Midwifery and Nursing celebrating her retirement during the year with her colleagues (image credit Jeannette Lowe)

Human Resources

The Human Resources Department (HR) continues to provide human resources corporate services across the Hospital for Medical, Midwifery & Nursing, Allied Health Professionals, Management /Administration, Pensions and Support Services. HR is also involved in a number of corporate initiatives across the Hospital.

HR had a very challenging and productive start to 2019 with the introduction of Termination of Pregnancy (TOP) Service, the Midwifery & Nursing Industrial Action and the ongoing administration of the Consultant Settlement Agreement which was completed in the 2nd Quarter of 2019. The Minister for Health continues to commitment to the NMH project to co-locate and a range of work streams commenced which included future workforce planning, legal arrangements, transformation programmes, IT infrastructure, commissioning and operational readiness.

It is evident that the biggest challenge for HR professionals is people related, recruiting new talent, retention of current employees and training and development. Monitoring and analysing employee turnover will help identify areas for improvement. HR will position itself within the Hospital to take the lead to examine how best to enhance the Hospital Employee Value Proposition and ensure it is well communicated.

Headcount Management

In terms of staffing levels, numbers have slightly decreased, however, HR have conducted 140 recruitment competitions over the year (including NCHD's and student midwives). This is due to the development and introduction of new services into the Hospital.

In 2019 we said goodbye to 83 members of staff 19 of whom retired. As Midwifery & Nursing department accounts for nearly half of all staff employed it's no surprise they have the highest level of movement within and outside the organisation. The primary reason for resignations was to relocate.

Absenteeism

The average absence rate remains stable in 2019 with an absenteeism rate of 3.5%. The HSE target for absenteeism with all organisations was at 3.5% for 2019. Our overall sick leave figure continues to come in line with the HSE target and is better than average across the Health Services, this is due to our dedicated staff and management of attendance.

Employee/Industrial Relations

Employee and Industrial relations are ongoing; cases are resolved quickly, informally and without any further action required. However nationally Industrial Relations (IR) activity has increased, which has an impact on local IR. The Partnership committee meet on a monthly basis with all stakeholders represented to promote communications. 2019 saw the introduction of changes in legislation i.e. Employment (Miscellaneous Provisions) Act 2018, parent leave, increase in parental leave entitlements, increase in compassionate leave and working hours for staff availing of carers leave.

Service Developments

The HR Department introduced HR Clinics in the last quarter of 2019 to include popular topics and we intend to expand this in 2020.

The 2nd National Maternity Hospital Leadership Programme (RCSI) was completed in 2019 with 16 participants. A key feature of this programme was focusing on future proofing the hospital as we plan our engagement and move to St. Vincent's University Hospital campus. In preparation for this move HR are working in the background with Accenture and NMH appointed Pillar leads gathering information and assessing staffing needs for Phase 1 of the project.

The National Maternity Hospital strategic plan for 2019 to 2023 is under way. HR is leading Goal 2 which is to "be the employer of choice and recognising that our staff are our greatest asset". This goal has 4 objectives which will involve our staff and will be people driven.

Challenges for 2020

There are a number of areas that the Hospital plan to review including, family friendly policies, further flexible working, remote working, support for an ageing workforce, return to practice, urban vs. rural, hospital re-configuration, patient expectations. Therefore it is important to have a workforce planning group to put an action plan in place to address current recruitment and retention issues.

HR assisted with a number of audit's undertaken by external agencies to ensure the Hospital is fully compliant with regulatory/ legislative requirements. An internal review of HR was completed by BDO in 2019 and the HR department are implementing the recommendations.



Sarah Cullen, Sinead Thompson, Jean Doherty, Lucille Sheehy and Sarah McCourt who along with our colleagues from UCD were winners of the Research Paper of the Year at the Irish Healthcare Centre Awards held during the year

Pensions

Department of Public Expenditure and Reform rolled out the process for submitting member's data for the Single Pension Scheme (SPSPS) since it was introduced in 2013. The NMH was identified as one of the Relevant Authorities that had a very robust system in place that allows the Hospital to successfully submit the required data. Benefit statements are up to date and issued on a yearly basis.

Social Activities/Wellbeing

There was a number of organised social and sporting events and family fun days arranged by the Hospital. The Hospital celebrated 125 years and a special event marked this celebration (themed 1920's night). Wellbeing is a HR priority and we work with the Healthy Ireland committee to arranged talks on various topics such as Stress Management, Money Skills for Life, Being your best / Motivation, Look Good Feel Good etc.

A retiree's coffee morning was introduced in October by the Hospital and it takes place on the 2nd Friday of every month

which is a great opportunity for staff who have retired from the Hospital to meet up and keep in touch.

As mentioned, 19 members of staff retired this year and each and every one of those staff will be missed by their colleagues and friends. The Hospital will also miss the expertise and knowledge these staff take with them. We wish all our former colleagues a long, health and happy retirement.

Our Assistant Director of Midwifery & Nursing in MN-CMS Dr Tina Murphy sadly passed away in March 2019 after 31 years of service, and also Ronan Power, Labour/Delivery Unit Porter who died suddenly in April 2020 after 24 years of service in the hospital. They will be remembered for their valuable contribution to the hospital and dearly missed by their colleagues, friends and NHM family.

Yvonne Connolly

Human Resources Manager

Information Management

Information Management is the collection and management of information from one or more sources and the distribution of that information to one or more audiences. One of the key factors to successful Information Management is to generate interest among users.

Improving information management practices is a key focus for many organisations across both the public and private sectors. Effective information management is not easy; there are many systems to integrate, a huge range of business needs to meet and complex organisational (and cultural) issues to address.

Information and knowledge is a key organisational resource. By guaranteeing high quality information, core data can be provided for service planning, randomised clinical trials, research and epidemiological studies. High quality data can form the foundations for policy makers, families of high-risk infants and the public.

The Information Officer works closely with IT and Patient Services Departments along with Administrative, Nursing & Midwifery and Medical Staff in the hospital. The prime areas of the role are:

- Extracting and analysing information from hospital information systems to assist management decisions and to highlight changing / emerging trends
- Coordinating Health Service Executive returns as well as media requests and parliamentary questions as they arise
- Producing hospital activity reports for the Executive Management Team, Finance and Executive Committees.
- Publication of the hospitals corporate Annual Report, Annual Neonatal Report and Annual Clinical Report

Fionnuala Byrne
Information Officer

Patient Services and FOI

The Patient Services Department is a source of information and channels patient queries in relation to Hospital services to the relevant areas. Service Users needs are constantly changing and we are determined to meet these challenges.

The Patient Services Function aims to support the Hospital's care systems by providing professional and effective support to both clinical and non-clinical areas within the Hospital. In 2019 the department continued to provide administrative services across the Hospital in the following frontline areas:

Admissions, Antenatal Education, Baby Clinic, Bereavement, Birth Notification, Central Booking, Central Dictation, Chart Retrieval, Colposcopy, Community Midwives, Diabetics & Dietetics, Early Transfer Home, Fetal Assessment Unit, Gynaecological Clinic, Medical Records, Neonatal Unit, Out of Hours Unit, Out-Patients Department, Physiotherapy, Radiology, Satellite Clinics, Social Work Department, Antenatal and Postnatal Wards.

In September 2019, the Hospital introduced phase two of the electronic MN CMS system. This saw the Gynaecological paper charts being replaced by an electronic system. This saw many changes for the Patient Services Department. The new power chart has been a great success. The Patient Administration System iPMS continues to evolve in line with Service User needs.

Freedom of Information

In 2019 there were over 1,500 written requests received under the Freedom of Information Act and Administrative Access. 80% of these requests were for copies of medical records.

I would like to thank the Staff for their dedication and hard work during 2019. I would also like to thank the Executive Management Team for their continued support and we look forward to another challenging and rewarding year ahead.

Alan Mc Namara
Patient Services Manager

Purchasing & Supplies

2019 was another busy and financially challenging year in the Purchasing & Supplies Department of The National Maternity Hospital. Activity in the hospital stayed at a very high level with the Purchasing & Supplies Department managing the provision of supplies to meet service and delivery requirements. The volume of non stock requisitions received continued to increase in 2019 thus providing us with a challenge from a pricing, processing, receipting and delivery point of view. These challenges were met head on by all members of the Purchasing & Supplies team.

Activity and interaction between the Hospital, Health Business Services and the Office of Government Procurement continued again this year enabling the hospital, when financially advantageous, to benefit through direct draw down from national contracts.

A number of significant internal projects ran through 2019 which impacted greatly on the workload within the Department from a procurement perspective. Due to the forward planning of all staff involved, these projects were equipped within the required timescales. The hard work is worth it when we see the improvements these projects provide for our patients and staff.

Our annual audit was undertaken in March and as always our full co-operation was provided at all times. This audit is an essential part of what we do in the Department to ensure best practice is adhered to at all times.

The business of the Department is to provide maximum service with minimum risk at the most economical cost whilst at all times striving to provide high quality patient focused service.

We wish to thank all the staff in this department for their continued commitment and hard work over the past year and look forward to a successful 2020 and all the challenges it will bring.

Lorraine McLoughlin & Linda Mulligan
Purchasing & Supplies Managers (Acting)

Data Protection

The Data Protection department is responsible for implementing and maintaining a Data Protection Management System (DPMS) with a framework for ensuring that the Hospital meets its obligations under the General Data Protection Regulation (GDPR) and all associated legislation.

We now have in place a GDPR Management System in compliance with GDPR and our staff are 'data privacy/GDPR' aware with knowledge and understanding of how it affects their day-to-day role as well as the need to ensure that data protection is considered in all our future planning. Key Areas:

Subject Access Request (SAR)

A system is now in place to ensure that all SARs are actioned, quality checked and sent out within the 30 days' period allowed by the law.

There has been a significant increase in the number of SARs received as against the previous year with over 50% of requests now coming from Solicitors on behalf of their clients. Less than 50% of requests are now coming directly from data subjects or their relatives.

Training

Staff training is a crucial part of protecting data privacy and is required under Article 39 of the GDPR. Data Protection training is now part of the bi-monthly mandatory training for all staff, this is in addition to data protection training for all incoming staff during staff induction. Staff in 2019 were also encouraged to take the HSEland online training provided by the HSE. The Data protection mandatory training, data protection induction training and the online data protection training on HSEland are all part of measures put in place to help us comply with the law.

Breaches

There has been an increase in the number of data breaches reported within the Hospital. Most of these are as a result of increased awareness of what constitutes data breaches. This awareness is due to the various data protection trainings currently available to all staff. NMH staff are more than aware before of the need for transparency and the need to ensure due process in reporting and in dealing with data breaches.

Emmanuel Ogungbe
Data Protection Officer

Financial Statements & Activity

Income And Expenditure

Extracts from the Hospital Income & Expenditure Account For the Year Ended 31 December 2019

	2019	2018
	€000	€000
Ordinary Income		
Miscellaneous	454	497
Accommodation Charges	13,978	14,412
	14,432	14,909
Ordinary Expenditure - Pay		
Medical NCHD's	5,704	5,499
Consultants	9,012	6,850
Nursing	26,406	25,264
Paramedical	5,472	4,933
Housekeeping	2,369	2,400
Catering	2,065	1,895
Porters	1,073	1,049
Maintenance	593	604
Administration	7,323	6,872
Pensions and lump sums	2,611	1,337
	62,628	56,703
Ordinary Expenditure - Non Pay		
Medicines, blood and gas	2,214	2,257
Laboratory expenses	2,349	1,468
Medical and surgical appliances	3,844	3,786
X-ray expenses	379	158
Provisions/catering	645	619
Heat power and light	501	483
Cleaning and washing	879	895
Furniture, hardware and crockery	64	102
Bedding and clothing	86	97
Maintenance	557	172
Transport and travel	145	124
Finance	809	1,203
Bad debt provision	(716)	(554)
Office expenses	639	795
Education and training	169	(16)
Computer expenses	512	537
Miscellaneous	1,383	1,234
Depreciation	3,127	3,077
Amortisation	(3,127)	(3,077)
	14,459	13,360
Net expenditure	62,655	55,154
Annual Allocation	66,557	57,738
less amount deferred in respect of fixed asset additions	(2,438)	(2,047)
Surplus for the year	1,464	537

Cumulative Figures

Extracts from the Hospital Income & Expenditure Account For the Year Ended 31 December 2019

	2019 €000	2018 €000
Surplus Brought Forward at start of year	1,570	1,033
Surplus Transferred from Income & Expenditure	1,464	537
Surplus Carried Forward at end of year	<u>3,034</u>	<u>1,570</u>

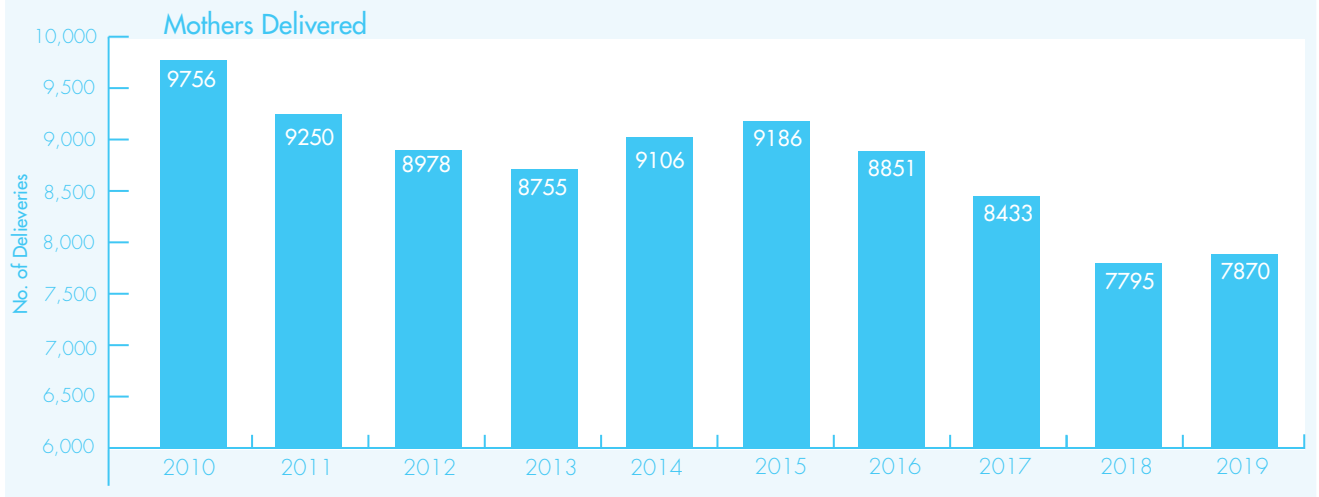
Balance Sheet

Extracts from the Hospital Balance Sheet as at 31 December 2019

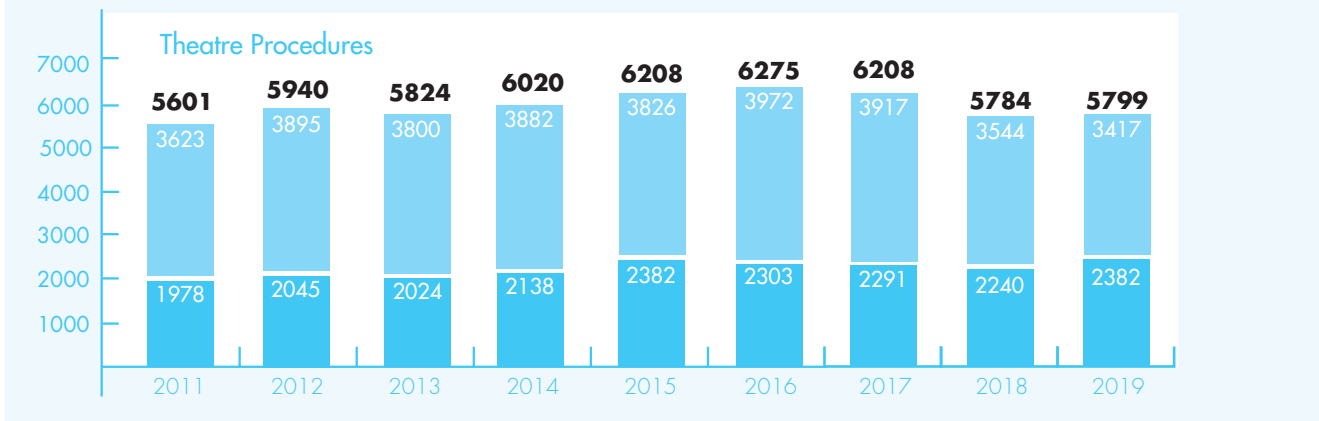
	2019 €000	2018 €000
Fixed Assets	70,868	71,019
Current Assets		
Stocks	564	314
Debtors	9,772	9,158
Cash & Bank	3,393	2,255
	<u>13,729</u>	<u>11,727</u>
Current Liabilities		
Creditors	10,015	9,478
	<u>10,015</u>	<u>9,478</u>
Net Current Liabilities	3,714	2,249
Creditors (amounts falling due after more than one year)		
Deferred Grants	(26,786)	(26,936)
Loans from Funds	(2,187)	(2,187)
Net Assets	<u>45,609</u>	<u>44,145</u>
Represented By :		
Revaluation Reserve	42,533	42,533
Accumulated Surplus at end of year	3,034	1,570
Other Funds	42	42
	<u>45,609</u>	<u>44,145</u>

Activity Analysis

Mothers Delivered	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Nullip	4704	4276	3919	3810	4037	4056	3878	3708	3300	3416
Multip	5052	4974	5059	4945	5069	5130	4973	4725	4495	4454
Total	9756	9250	8978	8755	9106	9186	8851	8433	7795	7870
% Nullip	48.2%	46.2%	43.7%	43.5%	44.3%	44.2%	43.8%	44.0%	42.3%	43.4%

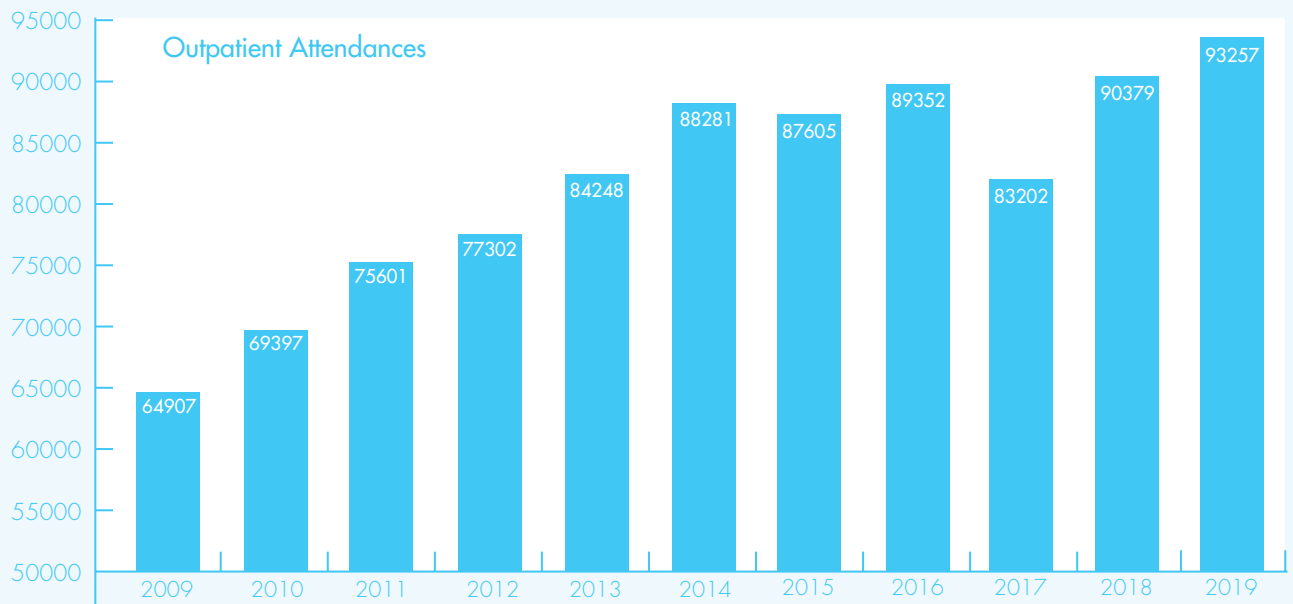


Theatre Activity	2011	2012	2013	2014	2015	2016	2017	2018	2019
Caesarean Sections	1978	2045	2024	2138	2382	2303	2291	2240	2382
Remaining Procedures	3623	3895	3800	3882	3826	3972	3917	3544	3417
Total	5601	5940	5824	6020	6208	6275	6208	5784	5799



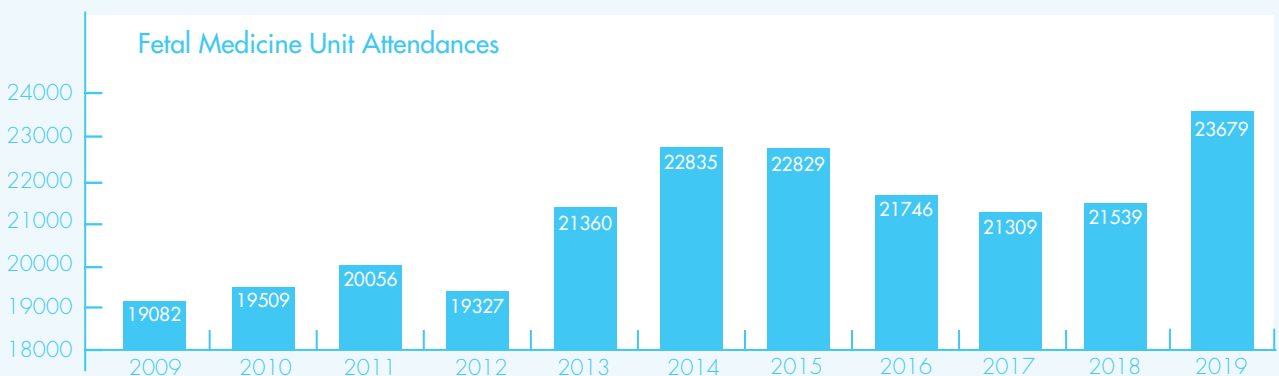
* Procedures not patients

Outpatient Activity	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Obstetric	48082	52137	53912	56201	62127	67411	65888	69157	63688	71454	73855
Gynaecology & Colposcopy	12854	13435	17245	16730	17866	16505	17940	16281	15493	15558	15959
Paediatric	3971	3825	4444	4371	4255	4365	3777	3914	4021	3367	3443
Total	64907	69397	75601	77302	84248	88281	87605	89352	83202	90379	93257



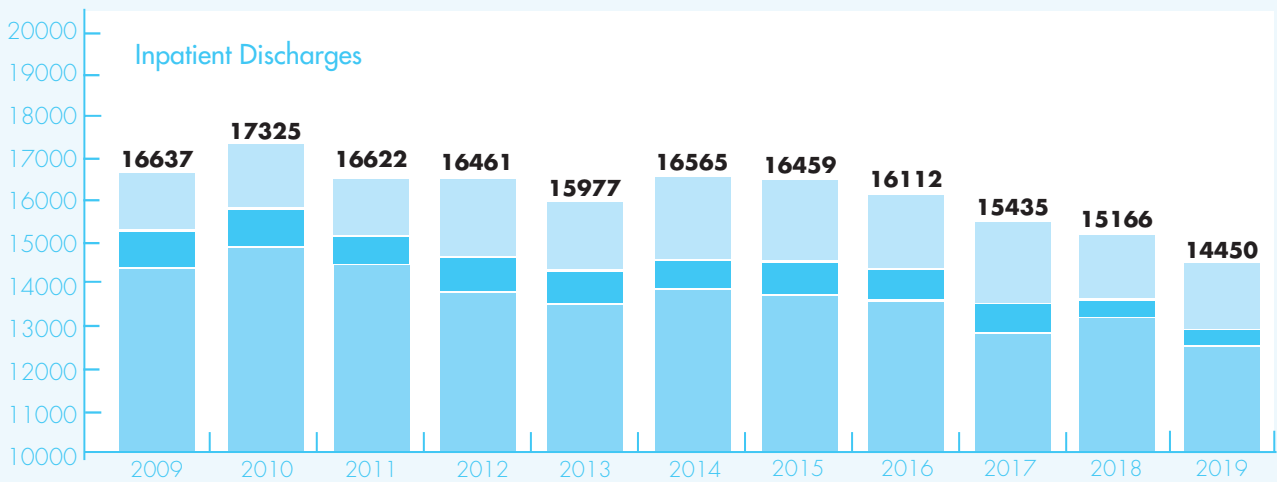
* includes sub-specialties. Excludes all unbooked attendances

Fetal Medicine Unit	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Booked Attendances	19082	19509	20056	19327	21360	22835	22829	21746	21309	21539	23679

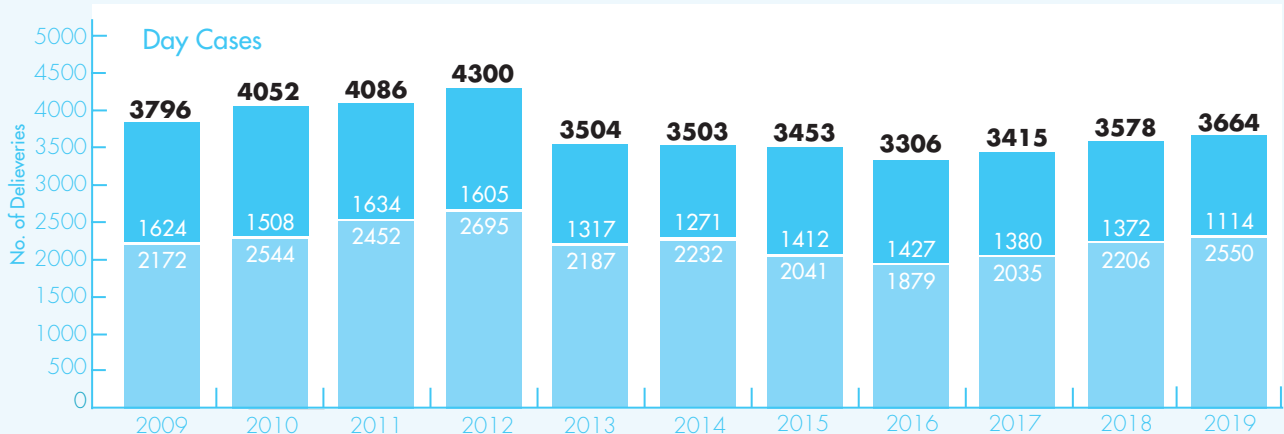


* unbooked attendances previously reported here are now seen in designated Emergency Room

Inpatient Discharges	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Obstetric	14291	14887	14339	13872	13443	13799	13680	13598	12842	13128	12428
Gynaecology	917	928	770	846	778	858	749	681	583	502	473
Paediatrics	1429	1510	1513	1743	1756	1908	2030	1833	2010	1536	1549
Total	16637	17325	16622	16461	15977	16565	16459	16112	15435	15166	14450



Day Cases	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Obstetric	2172	2544	2452	2695	2187	2232	2041	1879	2035	2206	2550
Gynaecology	1624	1508	1634	1605	1317	1271	1412	1427	1380	1372	1114
Total	3796	4052	4086	4300	3504	3503	3453	3306	3415	3578	3664





Notes



Contact: (01) 637 3372
website: www.nmhfoundation.ie

The National Maternity Hospital
Holles Street
Dublin 2

Contact: (01) 637 3100
website: www.nmh.ie