





# Contents

Page	
5	Introduction
6	<b>Ireland South Women &amp; Infants Directorate Management Structures</b>
8	Executive Management Committee
9	Communication and Collaboration
10	<b>Our Maternity Units</b>
10	Cork University Maternity Hospital
16	South Tipperary General Hospital
20	University Hospital Kerry
25	University Hospital Waterford
29	<b>2020 Highlights</b>
52	<b>Neonatology Report</b>
59	<b>Obstetrics Report</b>
67	<b>Gynaecology Report</b>
75	<b>Specialist Perinatal Mental Health Service</b>
79	<b>Staffing across Ireland South Women &amp; Infants Directorate</b>
81	<b>Education, Research and Innovation</b>
92	<b>Appendix</b>



## Clinical Data – List of figures and tables

Page

6	<b>Figure 1:</b> The multidisciplinary membership of the EMC
7	<b>Figure 2:</b> Ireland South EMC major work streams
7	<b>Figure 3:</b> EMC subcommittee structures
76	<b>Figure 4:</b> Specialist Perinatal Mental Health Team staffing
81	<b>Figure 5:</b> Research income in the Department of Obstetrics and Gynaecology, 2009-2020
	<b>Neonatology Report</b>
55	<b>Table 1.0:</b> Number of admissions to the Neonatal Unit by year
55	<b>Table 1.1:</b> Infants admitted to NNU by gestational age groups
55	<b>Table 1.2:</b> Infants admitted to NNU by birthweight
55	<b>Table 1.3:</b> Reason for admission to NNU
	<b>CUMH VON Very low Birthweight Infants (VLBW)</b>
55	<b>Table 2.0:</b> Born to the Neonatal Unit
56	<b>Table 2.1:</b> Number of CUMH VON VBLW
56	<b>Table 2.2:</b> Gestational age of CUMH VON VLBW infants admitted to NNU
56	<b>Table 2.3:</b> Birthweight of CUMH VON VLBW infants admitted
56	<b>Table 2.4:</b> Additional clinical demographics of CUMH VON VLBW infants
57	<b>Table 2.5:</b> Summary of respiratory support for CUMH VON VLBW infants
57	<b>Table 2.6:</b> Major morbidities amongst CUMH VON VBLW infants admitted to NNU
57	<b>Table 2.7:</b> Total cases with encephalopathy
	<b>Obstetrics Report</b>
59	<b>Table 3.0:</b> Frequencies of maternities and births 2014-2020
59	<b>Table 3.1:</b> Distribution of maternal and delivery characteristics
60	<b>Table 3.2:</b> Distribution of maternal and delivery characteristics – Vaginal delivery
60	<b>Table 3.3:</b> Distribution of maternal and delivery characteristics – Instrumental delivery
60	<b>Table 3.4:</b> Induction of labour characteristics
60	<b>Table 3.5:</b> Incidence of caesarean delivery per total mothers delivered, 2020
61	<b>Table 3.6:</b> Distribution of labour epidurals
61	<b>Table 3.7:</b> Distribution of obstetric blood transfusions
61	<b>Table 3.8:</b> Inutero transfers admitted
61	<b>Table 3.9:</b> Inutero transfers sent out
61	<b>Table 4:</b> Total clinical incidents as reported to NIMS
	<b>Perinatal Mortality</b>
62	<b>Table 5.0:</b> Perinatal deaths
63	<b>Table 5.1:</b> Perinatal mortality rates
	<b>Ireland South Case Reviews</b>
63	<b>Table 5.2:</b> CUMH case reviews – Stillbirths
64	<b>Table 5.3:</b> CUMH case reviews – Early neonatal deaths
65	<b>Table 5.4:</b> CUMH case reviews – Late neonatal deaths
65	<b>Table 5.5:</b> STGH case reviews – Stillbirths
65	<b>Table 5.6:</b> STGH case reviews – Early neonatal deaths
65	<b>Table 5.7:</b> UHK case reviews – Stillbirths
65	<b>Table 5.8:</b> UHK case reviews – Late neonatal deaths
65	<b>Table 5.9:</b> UHW case reviews – Stillbirths
66	<b>Table 5.10:</b> UHW case reviews – Early neonatal deaths
66	<b>Table 5.11:</b> UHW case reviews – Late neonatal deaths
66	<b>Table 6:</b> Severe maternal morbidity
	<b>Gynaecology Report</b>
70	<b>Table 7.0:</b> CUMH gynaecology service – outpatient attendances 2020
70	<b>Table 7.1:</b> CUMH gynaecology service – inpatient and day case procedures 2020
73	<b>Table 7.2:</b> Numbers of attendances in gynaecology outpatient clinics at UHK, STGH and UHW 2020
73	<b>Table 7.3:</b> Numbers of inpatient and day case gynaecology procedures
	<b>Specialist Perinatal Mental Health Service</b>
75	<b>Table 8:</b> Complete SPMHS Multidisciplinary Team, Model of Care, November 2017
76	<b>Table 9:</b> Headline numbers/clinical activity April to December 2020
	<b>Staff</b>
79	<b>Table 10:</b> Staffing across Ireland South Women & Infants Directorate
	<b>Appendix</b>
96	<b>Table 11:</b> Ireland South Women & Infants Directorate Grand Rounds 2020

## 2020 at a glance



Births:

**10,612**

Women gave birth:

**10,398**



Gynaecology  
Outpatients:

**38,586**



Only Maternity  
Directorate in Ireland



Total WTE:

**959.8**

Consultant Obstetrician & Gynaecologists: **34**

Consultant Neonatologists: **8**

Midwifery: **704.91**

NCHD: **102**

HSCP: **24.15**

Admin: **86.74**

Academic partner:



**UCC**

University College Cork, Ireland  
Coláiste na hOllscoile Corcaigh

### National specialities/ achievements

- Specialist Perinatal Mental Health Service developed in line with the National Model of Care for SPMHS, November 2017.
- Continuing to deliver services to the women and infants of our region during the COVID-19 pandemic in the safest way possible.
- Educational, antenatal and postnatal videos published online for parents and would-be parents during the COVID-19 pandemic.
- National Gestational Trophoblastic Disease Centre.
- CUMH NICU is the only centre for therapeutic hypothermia outside Dublin.
- Virtual visiting for babies introduced in Neonatal Intensive Care Unit in partnership with the INFANT Research Centre at UCC.
- Funding secured from the National Women & Infants Health Programme (NWIHP) to develop specialist services for women in the region, including the set-up of a new Regional Fertility Hub in Cork to serve Ireland South.







## Introduction

In 2017, a new Directorate structure for maternity services in Ireland South was set up by the South/South West Hospital Group. A first in the HSE: a fully devolved budget and executive authority for a Clinical Director. Since then, the Ireland South Women & Infants Directorate has continued to lead the way in the development of a clinically-led network of maternity hospitals.

In early 2020, we found ourselves facing an unprecedented situation with the presence of COVID-19 in our community. It brought many challenges to our maternity units and I am proud of how the multidisciplinary teams across Ireland South responded, working tirelessly and in collaboration with each other, sharing knowledge, expertise and learnings to continue bringing the best and safest care to women and infants in our region during extraordinary times.

In 2020 we delivered 10,612 babies across our four units: University Hospital Waterford (UHW), University Hospital Kerry (UHK), South Tipperary General Hospital (STGH) and Cork University Maternity Hospital (CUMH). We delivered an average of 29 babies a day across the group. As we have seen in recent years, this figure follows a 3.6% decrease on the previous year and reflects a continuing general decline in the birthrate nationally.

The COVID-19 pandemic brought pain and suffering to many people across Ireland and the globe. My sincerest thanks to those women and their families for their support and understanding at this time. Making decisions to cancel non-urgent clinics and restricting visitor access to our hospitals were implemented in line with public health advice and were not taken lightly. The understanding and ongoing support of our families in helping us to limit the spread of COVID-19 in our hospitals and communities can never be underestimated.

We faced many challenges during 2020 in the face of COVID-19. Gynaecology waiting list management has been a key area of focus for the Directorate in the past few years. At the start of March 2020, the waiting list at CUMH was at an all time low of 922 but due to COVID-19 and resulting clinic cancellations, the list had grown to 1,700 by August 2020. Hard work and sheer determination from our multidisciplinary team reduced the waiting list down to 1,033 by the end of the year.

In this report we outline our work along with our management and strategic frameworks. We place a strong emphasis on open communication across the Directorate and have included information about how we make our communications work for us and how we adapted meetings and shared information and education with each other, our patients and the wider community in 2020. We also bring you some of our highlights from the year which we regularly share with our staff across the Directorate in our quarterly newsletter, UltraNews.

Sincere thanks to the South/South West Hospital Group and the National Women and Infants Health Programme (NWIHP) for the support and belief that you have in our Directorate to deliver the best maternity services possible both now and into the future. Finally, thank you to our entire staff who have truly shown their dedication to maternity services and our patients in this past year. Along with hospitals across the country, staff at our four maternity units remained firmly focussed on the safe delivery of maternity services to the women and infants in our community and for this, we will always be grateful.

### **John R. Higgins**

UCC Professor of Obstetrics and Gynaecology  
Clinical Director

# Ireland South Women & Infants Directorate Management Structures

## Executive Management Committee

The Executive Management Committee (EMC) of the Ireland South Women & Infants Directorate supports the Clinical Director in the exercise of management oversight for maternity, neonatology and gynaecological services. It is chaired by the Clinical Director and meets weekly.

The EMC has a multidisciplinary membership (see Figure 1) and deals directly with the clinical service (operations), strategy and planning, and capital development within the maternity units of Ireland South (see Figure 2). The EMC delegates to standing committees in the areas of quality and patient safety, information governance, education and training, and research and innovation (see Figure 3).



Figure 1: The multidisciplinary membership of the EMC

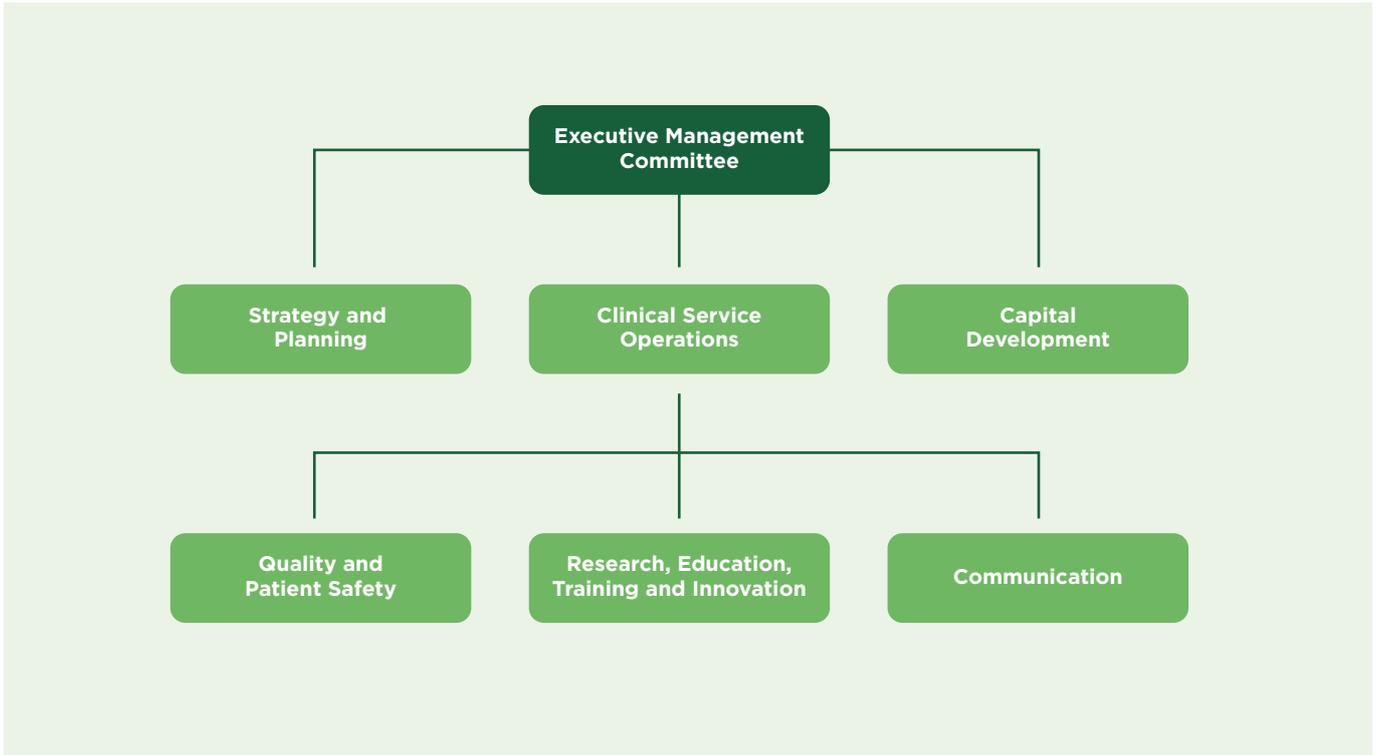


Figure 2: Ireland South EMC major work streams

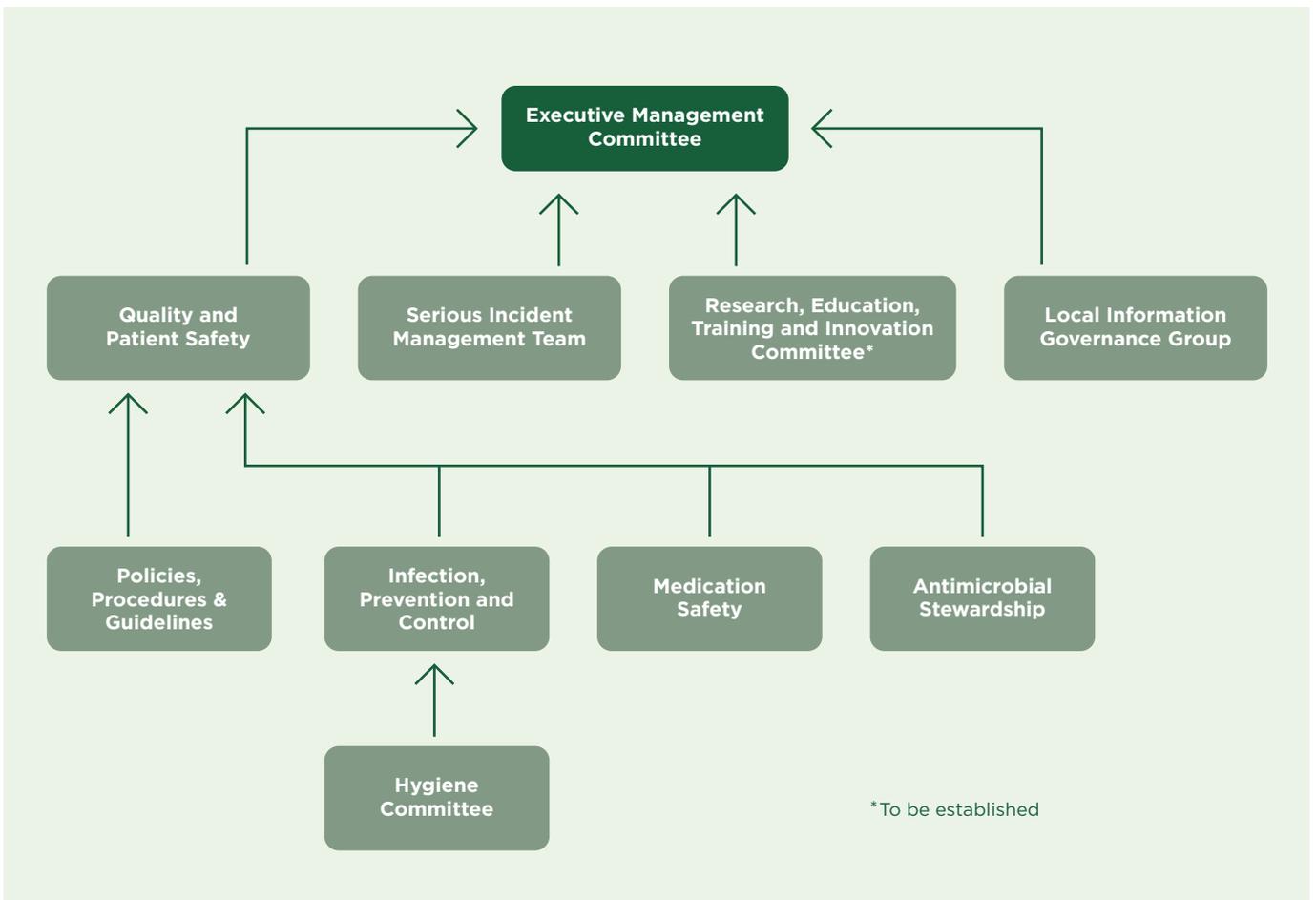


Figure 3: EMC subcommittee structures

# Executive Management Committee



**Professor John R. Higgins**  
Clinical Director



**Dr Brendan Murphy**  
Clinical Lead Neonatology



**Miriam Lyons**  
Head of Operations, Ireland South Women & Infants Directorate



**Katie Bourke**  
Director of Midwifery, CUMH



**Dr Paul Hughes**  
Clinical Lead UHK



**Dr Eddie O'Donnell**  
Clinical Lead UHW



**Dr Vijoyashree Hiremath**  
Clinical Lead STGH



**Paula Curtin**  
Director of Midwifery, UHW



**Sandra O'Connor**  
Director of Midwifery, UHK



**Sinéad Heaney**  
Director of Midwifery, STGH



**Dr Mairead O'Riordan**  
Clinical Lead Quality & Patient Safety, Ireland South Women & Infants Directorate



**Claire Everard**  
Quality and Patient Safety Manager, Ireland South Women & Infants Directorate



**Professor Richard Greene**  
Chair, Local Information Governance Group



**Maria Leahy**  
Health and Social Care Professions Representative



**Ms Orfhlaith O'Sullivan**  
Clinical Lead Gynaecology, Ireland South Women & Infants Directorate



**Stephen O'Connor**  
Finance Manager, Ireland South Women & Infants Directorate



**Donna Burtchaell**  
Communications Project Manager



**Louise Riordan**  
Administrative Coordinator

## Communication and Collaboration

### Daily Teleconference 'Hub Call'

The four directors of midwifery (DoMs) and Head of Operations (or nominated representatives) communicate via a succinct teleconference, termed the 'hub call,' each weekday morning. This allows for clinical updates to be shared across the four units and any issues of concern to be managed and supported.

### Maternity Services Working Group for Midwifery

The Maternity Services Working Group for Midwifery meets monthly to discuss the necessary support to enhance and continuously improve evidence-based midwifery care in Ireland South Women & Infants Directorate. This group is chaired by Bridie O'Sullivan, SSWHG Chief Director of Nursing and Midwifery and its membership includes the DoMs from each maternity site.

### Consultant Forum

Consultant obstetricians/gynaecologists and consultant neonatologists across the Ireland South Women & Infants Directorate attend this forum every four weeks (or as otherwise advised) in person or by videoconference. The purpose of the forum is to communicate updates to all consultants in the region and is chaired by the Clinical Director.

### Neonatology Network

The Neonatology Network facilitates important collaboration between neonatologists in the tertiary centre in CUMH and paediatricians in the maternity units who do not have the services of consultant neonatologists on site. When necessary, referral from STGH and UHK to UHW (rather than to CUMH) can be considered depending on the level of care required.

### National Women and Infants Health Programme

The National Women and Infants Health Programme was established in January 2017, to oversee the management, organisation and delivery of maternity, gynaecology and neonatal services in Ireland, across the 19 maternity units/hospitals. Ireland South Women & Infants Directorate management meet with NWIHP on a quarterly basis to ensure the consistent delivery of high-quality care and provide updates on the development of our maternity network.

### UltraNews Staff Newsletter

A quarterly newsletter is distributed to all staff in the Ireland South Women & Infants Directorate covering interesting news stories from all four maternity hospitals/units, as well as the latest offerings under education and research, both fundamental elements of an academic healthcare system. This newsletter curates content from staff and is published in both digital and printed formats.

Since its launch in 2018, the UltraNews newsletter has been successful in building a sense of community by bringing to life the benefits of being part of a women and infants directorate.

### SSWHG Maternity Directorate Steering Group

The purpose of this Steering Group is to provide:

- Control and direction to the project to establish the 'Maternity Directorate' (now Ireland South Women & Infants Directorate) in the SSWHG.
- A conduit for the resolution of risks and issues escalated by project team members delivering on the body of work; and
- The leadership, direction, approval and critical analysis of all aspects pertaining to the establishment of the directorate.

The scope of the Steering Group is not to oversee or intervene in the day-to-day operational management and delivery of maternity/neonatology/gynaecology services on any site within the SSWHG. Operational management will continue to be driven through governance mechanisms in place at site and group level. The project Steering Group's sole focus is overseeing delivery of the Directorate as a functioning entity.

# Our Maternity Units



## Cork University Maternity Hospital

**Professor John R. Higgins**, Clinical Director  
**Katie Bourke**, Director of Midwifery  
**Miriam Lyons**, General Manager/Head of Operations

Cork University Maternity Hospital (CUMH) opened in 2007 and involved the amalgamation of maternity services from Erinville Hospital, St. Finbarr's Maternity Hospital, Bon Secours Maternity Unit and gynaecology services from Cork University Hospital. In 2020, CUMH delivered 7,040 babies.

CUMH maternity services comprise:

- 10 bedded delivery suite.
- 3 room induction suite.
- 87 bedded postnatal ward.
- 24 bedded antenatal ward.
- 31 bedded gynaecology ward (23 gynaecology and 8 dedicated pregnancy loss beds).
- Stand-alone outpatients department for antenatal, gynaecology, eurogynaecology, colposcopy and midwifery-led scanning.
- Maternity services outreach clinics in St Mary's Health Campus, and primary care centres in Mallow, Mitchelstown, Carrigaline and Carrigtwohill providing supportive care as outlined in the 2016-2026 Maternity Strategy.

The Neonatal Intensive Care Unit at CUMH has 25 special care cots, 21 high dependency cots and 6 intensive care unit cots. CUMH accept babies from STGH, UHW and UHK for specialised treatments such as ventilation and therapeutic hypothermia. CUMH also accept babies requiring therapeutic hypothermia from University Hospital Limerick, and from other areas when an emergency neonatal unit bed is required.

Clinical midwife specialist posts exist in bereavement and loss, ultrasonography and diabetes. Additional roles include lactation, haemovigilance, clinical skills, smoking cessation, and a perinatal mental health team. Three staff commenced on the advanced practice route, two in nursing and one in midwifery. The DOMINO (Domiciliary Care Inside and Outside of Hospital) model of care has been in place since 2014. DOMINO facilitates low risk women towards a natural birth in line with the supported care model in the 2016-2026 Maternity Strategy.

Maternity services at CUMH support the education of undergraduate nursing and midwifery students from University College Cork (UCC). Medical students from UCC also gain clinical experience as part of their placement and this leads to an interdisciplinary teaching environment.

Facilities in the Department of Obstetrics and Gynaecology at CUMH allow students to participate in lectures with study space and video conferencing facilities to link with their colleagues at other sites.

New and qualified midwives and nurses are supported by clinical skills facilitators from the Practice Development Team, alongside highly qualified staff in each clinical area. All staff are supported with ongoing education and training via the Centre of Midwifery Education to facilitate ongoing development of clinical competences and promote evidence-based care.

## CUMH: Managing COVID-19

2020 was a year like no other. Due to the presence of COVID-19 in the community in 2020, Cork University Maternity Hospital (CUMH), as the tertiary maternity hospital in Ireland South Women & Infants Directorate, took the lead in establishing the best approach to keep both staff and patients safe during this unprecedented time.

- COVID-19 Advisory Committee:** Early in the COVID-19 crisis, a COVID-19 Advisory Committee was established in CUMH with multidisciplinary membership. The committee serves as a platform to discuss and propose solutions and help implement the response to COVID-19 in CUMH and the wider Directorate. Education is a key focus, with all units holding coronavirus education sessions and personal protective equipment (PPE) training and simulation drills.
- Booking appointments by telephone:** CUMH made many changes since early March 2020 to keep everyone safe. One of the simplest changes relates to the very first step of a person's contact with CUMH during their pregnancy - their booking appointment. These are now done over the telephone which means that expectant mothers do not need to try and come into the hospital and find childcare to do so. It's proving very successful so far.
- Outreach clinics seeing more patients:** CUMH operated a number of outreach clinics for expectant mothers before the COVID-19 outbreak, and these clinics are now seeing more patients. Extra efforts are being put into keeping women attending these appointments safe, including reducing the numbers of people in waiting rooms. People are asked to stay in their cars and wait until they are called to come in for their appointment.
- Symptom screening outside CUMH:** In March 2020, a marquee was erected outside the entrance to CUMH to allow for the screening of patients, visitors and staff at the hospital. On arrival at the hospital, patients/visitors and staff were met with a series of signs about symptoms of COVID-19 and were asked to turn right if they did not have symptoms. Temperatures were checked and masks given if needed. These visible measures helped to provide reassurance, which was important for patients, visitors and staff.
- Virtual visiting for babies in the CUMH NICU:** CUMH introduced a secure video messaging platform in the Neonatal Intensive Care Unit in partnership with the INFANT Research Centre at University College Cork. This new initiative allows families to remotely check-in on premature babies amid COVID-19 visiting restrictions and has received great PR in national and international media, including RTÉ news.
- COVID-19 and CME education:** In response to the COVID-19 pandemic, a suite of multidisciplinary education programmes was provided in the Centre of Midwifery Education (CME), CUMH. The roll out of the COVID-19 education programmes ensure all staff in CUMH have an up-to-date, COVID-19 skill set focussed on the detection, prevention of transmission and management of the disease. Sessions are repeated frequently to ensure that education is available to as many staff as possible. Records show that the number attending has vastly increased since the pandemic began.
- A different approach to meetings:** Many briefings and meetings now take place online and along the long bright corridors of CUMH where social distancing and large numbers of staff can be accommodated.



- **Social distancing:** CUMH facilitated social distancing requirements in a number of ways:
  - Essential staff only attending handovers and observing social distancing.
  - Remote working where possible.
  - Environment markers to indicate social distancing in areas such as Le Chéile, corridors and stairs.
  - Reduced numbers allowed in meeting rooms.
  - Patient waiting areas arranged to facilitate social distancing.
  - Staff breaks were staggered and more areas were allocated to allow for social distancing at break times.
- **Adaptation of roles due to COVID-19:** CUMH's multi-professional teams responded by being flexible, adaptable and committed to the continued delivery of the high-quality care for women and babies during these times of uncertainty and apprehension. Staff have been redeployed or seen their service delivery method change in a matter of days and have responded with courage, determination and teamwork in supporting each other and the service through this global pandemic. Examples are as follows:
  - **CNS Ultrasonographer:** In accordance with HSE guidelines, the number of women undertaking scans in the department at any one time has reduced. Women attend unaccompanied for their ultrasound scan and the scan time has also been reduced. There is greater demand on the ultrasonographer's service, not only with the time allocation for scanning, but also to ensure that the women feel supported emotionally at what can be a very vulnerable time. All ultrasound clinics are still operating, facilitating comprehensive obstetric and gynaecological care.
  - Where possible antenatal booking visits are conducted by phone throughout the week.
  - Gynaecological clinics also became virtual.
- **Online Parent Education:** Early in the crisis, CUMH published a number of short educational antenatal

videos on the website for online viewing in Summer 2020. These had been created by our sister maternity hospital, UHK and were supplemented by antenatal and postnatal videos featuring CUMH midwives and physiotherapists, and were published in Autumn 2020. All pregnant women attending the hospital were informed of these educational online resources.

The online resources present a valuable opportunity to build a woman's confidence in her ability to give birth and provide pregnant women and their partners with the knowledge and skills that may assist them during labour, birth and early parenting during the restrictions of COVID-19.

- With training and IT support, online interactive classes commenced in 2020 facilitated by two midwives. These continue to be a great success in CUMH.
- **Clinical guidance on COVID-19 and maternity practice:** The Institute of Obstetricians and Gynaecologists (IOG), the Royal College of Physicians of Ireland (RCPI), the National Women and Infants Health Programme (NWIHP) and the HSE issued guidance on COVID-19 and maternity services in early April 2020. Professor Keelin O'Donoghue, Consultant Obstetrician and Gynaecologist in CUMH is lead author for the IOG/RCPI and HSE/NWIHP on this new clinical guidance on COVID-19 in pregnancy. Professor O'Donoghue worked with Joye McKernan (NPEC, UCC, Cork) to lead a national group of contributors including midwifery, chaplaincy and medical colleagues from CUMH and CUH, as well as contributors from the Rotunda Hospital and the Coombe Women & Infants University Hospital.
- **Funding for technology to reduce hospital visits for pregnant women during COVID-19:** Research led by Dr Fergus McCarthy, Consultant Obstetrician and Senior Lecturer, Department of Obstetrics & Gynaecology and colleagues at the INFANT Research Centre were awarded €118,877 in SFI



funding in June 2020. The research is for a pilot project that aims to reduce the number of hospital check-up visits for blood-pressure monitoring for pregnant women during the COVID-19 pandemic.

- **CUMH website updates:** The CUMH website is updated regularly with patient information in relation to COVID-19 including service changes and useful resources, videos and downloads for expectant mothers.
- **COVID-19 and pregnancy – microsite launched:** In June 2020, Ireland South launched a microsite for patients that outlines key information about COVID-19 and pregnancy. The microsite <https://coronavirus.irelandsouthwid.ie> builds on content in a printed leaflet that was handed out to patients in CUMH. It's also mobile friendly, has a sensitive tone and reflects the new brand.
- **Twitter Account Launched:** In early March, Ireland South launched a Twitter account @IrelandSouthWID to keep the public informed about service changes and provide reassurance in a timely manner.
- **YouTube account launched:** A new YouTube account was launched to house new videos being created. In addition to patient FAQs, videos include Professor John R. Higgins, Clinical Director speaking about visitor restrictions in CUMH, Susan O'Driscoll, Lactation Consultant covering breastfeeding support and Cathy O'Sullivan, Director CME covering online resources during COVID-19 on the CUMH website.

## COVID-19: Challenges

- **Bereavement:** The isolation that can be associated with pregnancy loss is heightened in the crisis. Simple compassionate acts such as giving a 'hug' when a woman is experiencing pregnancy loss being denied due to COVID-19 restrictions and women's grief is being delayed with likely repercussions going forward.
- **Wearing masks:** Wearing masks can make it more difficult to reassure pregnant women coming in for appointments. As a result, the right eye contact and the right words play an important part to help women get to the next stage.
- **Visiting restrictions:** Visiting restrictions had an immeasurable effect on our patients but the decision to restrict access to CUMH was taken in an effort to keep our mothers and babies safe. Where there were grounds for compassionate exemptions to these restrictions visiting was facilitated.

## CUMH: Key Achievements 2020

- **CUMH flu vaccine uptake**  
In 2020, the team of vaccinators and senior management in CUMH encouraged all maternity staff to make a concerted effort to get the flu

vaccine. Sinéad Creedon joined as the Infection Prevention & Control Clinical Nurse Specialist for CUMH and led the peer vaccination campaign 'Shot on the Spot' with Ms. Fiona Kirby (Midwifery Practice Development Coordinator), on the CUMH influenza peer vaccination campaign. CUMH achieved an 86% uptake of the vaccine in 2020 (compared with 38% in 2019). CUMH was awarded 2nd place for the Best Improver in Uptake of Flu Vaccination.

### • Gynaecology achievements

- The team at CUMH went to extraordinary efforts during 2019 and 2020 to reduce the gynaecology outpatient waiting list number. As a result, the list reached an all-time low in early March 2020 of 922 patients waiting for a first-time clinic appointment. This was down from a high of almost 4,700 just 3 years previous. The CUMH Gynaecology Waiting List Initiative won the 'Improving the Patient Experience' Health Service Excellence Award 2020.
- Gynaecology services were severely impacted during the COVID-19 pandemic. All non-urgent gynaecology clinics and theatre sessions were cancelled for 4 months during the year. During this time due to public/private partnership, urgent and cancer-related surgeries were performed in the Bon Secours Hospital, Cork by our staff completing 400 cases over the period.
- Funding: CUMH received funding during 2020 through the National Women & Infants Health Programme to develop services for women in the region:
  - Expansion of ambulatory gynaecology services at CUMH from 2 days per week to 5 days per week through funding additional staffing and upgrade of facilities at CUMH.
  - Set up of a new Regional Fertility Hub in Cork to serve Ireland South.
  - Set up a National Mesh Complications Service - one of two dedicated centres in Ireland (the other located at the National Maternity Hospital, Dublin).

### • Apple: Babysteps Appeal for CUMH Neonatal Sanctum

Apple in Cork signed up to do an internal fundraiser to support the Neonatal Family Sanctum appeal for mothers, babies and families at CUMH. The Neonatal Sanctum Appeal aims to build a multifaceted family sanctum in the courtyard of CUMH to benefit mothers, babies, and their families going through stressful times due to ill or premature babies.

### • Capital/equipment upgrades

- All beds in CUMH (over 140) were replaced to help continue providing safe and comfortable beds for patients throughout the hospital.
- Four Philips Avalon fetal monitors.
- Eight Isolette 8000 plus incubators for Neonatal.
- Twelve Norso Medical ECG machines.
- A Chronos UV system. For safe and efficient, high-level disinfection for external, endovaginal, and endorectal ultrasound probes.

- Twelve new breastfeeding chairs for Neonatal are being introduced on a phased basis to replacing the existing chairs, maximising comfort for new mums.
- One argon laser for use in theatre.
- Upgrades to IT systems including laptops and laptop carts in classrooms A and B on 5th floor of CUMH to facilitate online training and development.
- Four Hyundai vehicles for use in community outreach. The first branded vehicle, a Hyundai Tucson was revealed to staff on 29 April 2020.

## CUMH: Service developments 2020

- **Specialist Perinatal Mental Health Service, CUMH**  
Since referral pathways from the maternity booking clinics and obstetric clinics were developed in 2020, the Specialist Perinatal Mental Health Service (SPMHS) has seen a significant growth in monthly referral statistics. Referrals are also received from GPs and community mental health teams. Presently the team consists of two Clinical Nurse Specialists, one Mental Health Midwife, Senior Mental Health Social Worker, one NCHD and administrative support and consultant psychiatrist, Deirdre Muller-Neff, as Clinical Lead.

- **DOMINO scheme in CUMH**

The DOMINO (Domiciliary Care Inside and Outside of hospital) scheme had 246 women who gave birth within the service, 73% had a spontaneous vaginal birth and 15% an operative vaginal birth. The caesarean section rate was 12%. 370 postnatal visits to mothers and babies were provided, although home visits were suspended for a time due to COVID-19 restrictions.

- **First Smoking Cessation Midwife in CUMH**

Majella Phelan started as the first Smoking Cessation Midwife in CUMH in August 2020 to support pregnant women who currently smoke. Majella is planning to train all staff in the Making Every Contact Count brief intervention programme, to ensure support for pregnant women at every encounter with healthcare professionals. She will be available to women attending CUMH to provide support and will be setting up her own clinic where she will be able to encourage and support women in their attempt to quit. In the last quarter of 2020, Majella had 29 women enter the standard treatment programme and 76% of those remained quit at 12 weeks.

- **Termination of Pregnancy Services**

The Termination of Pregnancy Service commenced in CUMH on 1 January 2019 in line with Health (Regulation of Termination of Pregnancy) Act 2018. A pathway of care was developed between key groups - nursing/midwifery, social work, consultants, ultrasound and general practitioners. Non-directional counselling has also been made available to women under the service.

In line with the pathway of care developed, the service facilitated review of women from primary care providers for ultrasound; and/or medical review; and/or inpatient care for medical termination of pregnancy.

- **CUMH DoM retires after 41 years**

Olive Long, who worked as Director of Midwifery in CUMH retired in early 2020, after 41 years of dedicated, loyal professional service. Staff at CUMH offered their deepest gratitude to Olive for her magnificent contribution to maternity services in Cork and the wider region. From student nurse, through to Director of Midwifery, Olive always maintained the highest possible professional standards. She will be missed by the team at CUMH.

- **Welcome Katie Bourke, as new DoM, CUMH**

Katie Bourke was appointed Director of Midwifery in Cork University Maternity Hospital in 2020. With an MSc in Nursing & Midwifery, Katie has been in the role of Assistant Director of Midwifery since 2018 and in the Acting Director of Midwifery role since December 2019. CUMH are delighted to welcome her to the Director of Midwifery role.

- **MN-CMS upgrade**

In 2020 there was a successful upgrade of the Maternity and Neonate Summary Pages to Version 6.10. The Train Domain was also upgraded to reflect the many changes that have occurred in the Live Domain since December 2016.

- **MN-CMS Documentation Checklists launched**

The MN-CMS Department and Practice Development Team collaborated to create a suite of MN-CMS Documentation Checklists for nurses and midwives to aid documentation in sections of the Electronic Health Record that they are not overtly familiar with. They have become an essential tool to help new staff and those returning from a period of leave, gain confidence with the system. The next phase of the MN-CMS rollout is the gynaecology check list.

## Education, CUMH

### Undergraduate

- A total of 201 UCC final-year medical students received education and clinical training at CUMH and the maternity units of Ireland South Women & Infants Directorate in 2020, along with 206 fourth-year medical students over seven rotations during the academic year.
- The Practice Development Team also provided education and clinical placement for 81 BSc midwifery students, 60 nursing students and 7 public health nursing students (PHN) from the general and integrated programmes. Clinical assessments of midwifery students are completed in partnership with UCC.

### Professional development

- At CUMH, nurse/midwife prescribers are supported by the Practice Development Coordinator. In 2020

one successful candidate undertook the Midwife Prescribing programme in collaboration with UCC and one candidate commenced the programme in collaboration with UCD.

- One nurse completed the BSCCP Nurse Colposcopy training.
- One nurse received the Certificate in Pain Management.
- Seven nursing colleagues graduating from their PG Diploma in Neonatal Nursing course in January with another 4 nurses commencing this course in September run from CUMH in collaboration with UCC.
- One neonatology nurse completed her MSc in Nursing focusing on the Impact of the Early Onset Sepsis Calculator on admissions to the Neonatal Unit in June. Another neonatology nurse commenced her MSc focusing on discharge planning in September.
- One physiotherapist completed a Diploma in Continence for Physiotherapists through Bradford University.

## CUMH: Key challenges 2020

### • COVID-19:

- **Disruption to clinical services:** During the early months of the COVID-19 pandemic there was severe disruption to services at CUMH. In line with public health guidance, non-urgent gynaecology clinics had to be cancelled between March and June 2020, leading to delays in seeing and treating patients and an increase in the waiting list. The safety of all of our patients, staff and visitors remained the number one priority for CUMH and during 2020 changes had to be made to ensure we provided the best care in the safest way possible. A number of non-urgent services were decanted off site where possible, e.g., gynaecology theatre lists were run at the Bons Secours Hospital, Cork and outreach centres

were used for routine clinics to reduce overall footfall in the CUMH building, in line with social distancing requirements.

### - **Providing a safe, socially distant space:**

COVID-19 social distancing guidelines compounded the existing space challenges in CUMH, in particular in the outpatients department. Ways of working had to be altered and additional protocols put in place at short notice to minimise the risk of COVID-19 transmission at CUMH. Adapting to and working around the pandemic remained a challenge for the multidisciplinary team throughout the year.

- **Visiting restrictions:** In the interest of patient and public safety, additional visiting restrictions were put in place in CUMH, and in the other 3 units in Ireland South Women & Infants Directorate. This has been very difficult for patients and we are very grateful for their cooperation and understanding.

- **Waiting list management:** The team at CUMH worked tirelessly from August to December 2020 to eliminate the gynaecology outpatient waiting list backlog built up since March 2020 due to COVID-19 and resulting clinic cancellations. At the start of March 2020, the waiting list was at an all-time low of 922 but had climbed to 1,700 by August 2020. Additional gynaecology clinics were scheduled at CUMH and with a lot of hard work thanks to the dedication of the multidisciplinary staff at CUMH, the waiting list was reduced to 1,033 by the end of the 2020.

### • **Recruitment and retention:**

Like many maternity hospitals in Ireland, midwifery recruitment is an ongoing key challenge for CUMH. COVID-19 related absenteeism and sick leave compounded the staffing challenges adding to the pressures already faced by staff in CUMH.





## South Tipperary General Hospital

**Dr Vijoyashree Hiremath**, Clinical Lead, Consultant Obstetrician and Gynaecologist  
**Sinéad Heaney**, Director of Midwifery

South Tipperary General Hospital (STGH) provides acute hospital services for the population of County Tipperary. In 2020, STGH maternity services delivered 782 babies and provided gynaecology and colposcopy clinics.

STGH maternity services comprise:

- 2 bedded delivery suite and obstetric theatre.
- 4 bedded assessment unit (1st stage).
- 10 bedded gynaecology ward.
- 5 bedded Special Care Baby Unit (SCBU).
- 20 bedded combined antenatal and postnatal ward
- An outpatients area for antenatal, gynaecology, and midwifery-led scanning and clinics.
- Self-contained colposcopy area.
- The ultrasonography unit for booking, anatomy and reassurance scans with consultation room for use by social work, bereavement and perinatal mental health.
- Maternity services outreach clinics in Tipperary town and Thurles providing supportive care as outlined in the 2016-2026 Maternity Strategy.

STGH has had full accreditation with the WHO/ UNICEF Baby Friendly Health Initiative since 2015, the first in Ireland South Women & Infants Directorate to achieve this award, which recognises practices that protect, promote and support breastfeeding.

Clinical midwife specialist posts continue to exist in bereavement and loss, ultrasonography, lactation, clinical skills facilitation and perinatal mental health.

Maternity services at STGH support the education of undergraduate medical students from University College Cork (UCC), undergraduate nursing students from UCC and postgraduate midwifery students from University of Limerick (UL).

Facilities allow students to participate in lectures with study space and video conferencing facilities to link with their colleagues at other sites.

### STGH: Managing COVID-19

In 2020, COVID-19 impacted on maternity services across the four hospitals/units in the Directorate including visiting restrictions, services offered and methods of delivering patient-centred care. Public health guidance alongside collaboration and information sharing across the Directorate shaped how our hospitals/units managed COVID-19 as safely as possible.

- **Adaptation of roles due to COVID-19:** STGH's multi-professional teams responded by being flexible, adaptable and committed to the continued delivery of the high-quality care for women and babies during these times of uncertainty and apprehension. Staff have been redeployed or seen their service delivery method changed and have responded with courage, determination and teamwork in supporting each other and the service through this global pandemic. Examples are as follows:
  - **CMS Ultrasonographer:** In accordance with HSE guidelines, the number of women undertaking scans in the department at any one time has reduced. Women attend unaccompanied for their ultrasound scan and the scan time has also been reduced. There is greater demand on the ultrasonographer's service, not only with the time allocation for scanning, but also to ensure that the women feel supported emotionally at what can be a very vulnerable time. All ultrasound clinics are still operating, facilitating comprehensive antenatal care.

- All specialist roles availed of the virtual appointment system with a lot of care by the bereavement and Perinatal Mental Health Midwife carrying out duties via phone.
- **Staff updates:** To keep staff up to date with COVID-19 related information, the daily huddle ensured all STGH maternity staff got the latest COVID-19 information.
- **Service changes:** While it has been largely business as usual in STGH maternity services, some service changes have been made. The Newborn Hearing Screening Programme was suspended for a short time but was amended in Aug/Sept 2020.
- **Senior Executive Management** scheduled daily outbreak meetings via telecon for all Heads of Department, IPC, Occupational Health and Public Health around updates within the hospital to discuss the impacts of COVID-19 amongst staff and patients. The frequency of these meetings declined over the months and was reduced to once a week with departmental updates.
- **Meetings:** Many briefings and meetings now take place online or in large meeting rooms where social distancing and large numbers of staff can be accommodated.
- **COVID-19 and staff education:** In response to the COVID-19 pandemic, a suite of multidisciplinary education programmes is being offered, including coronavirus education sessions and personal protective equipment (PPE) training. These educational programmes have been undertaken in small groups and delivered, with social distancing in mind by the STGH IPC team.
- **Online Parent Education:** STGH worked to convert the facilitation of antenatal education into an online experience. This was primarily done by delivering live online antenatal classes. All pregnant women attending the hospital were informed of the antenatal education online resources. This worked really well, and a multi-disciplinary approach was encouraged by physio, partaking in some of the online classes too.
 

The live classes present a valuable opportunity to build a woman's confidence in her ability to give birth and provide pregnant women and their partners with the knowledge and skills that may assist them during labour, birth and early parenting during the restrictions of COVID-19.
- **Social distancing:** STGH facilitated social distancing requirements in a number of ways:
  - Essential staff only attending handovers and observing social distancing.
  - Remote working where possible.
  - Environment markers to indicate social distancing in areas such as the canteen, corridors and stairs.
- Reduced numbers allowed in meeting rooms.
- Patient waiting areas arranged to facilitate social distancing.
- Visual prompts to sterilise hands and wear masks on each corridor.
- Audio prompts prior to entering the hospital to wear masks and adhere to social distancing.
- Tempered glass erected on each workstation.
- **Virtual visiting for babies in the STGH SCBU:** Like other maternity hospitals in Ireland South Women & Infants Directorate, STGH introduced a secure video messaging platform in the Special Care Baby Unit (SCBU) in partnership with the INFANT Research Centre at UCC. Called vCreate, this new initiative allows families to remotely check-in on premature babies amid COVID-19 visiting restrictions.
- **STGH flu vaccine uptake:** Vaccinators and senior management in STGH Maternity Services encouraged all maternity staff to make a concerted effort this year to get the flu vaccine. Mary O'Donnell, CMM3 led the flu vaccination campaign in STGH Maternity Services again this year, supported by Siobhán Kavanagh, CMM2 who is retired and returns each year as a peer vaccinator for the fight the flu campaign.
- **Outreach clinics:** In a bid to minimise contact with the acute setting and reduce the risks when travelling, the demands on STGH's outreach clinics in Thurles and Tipperary town grew. Therefore, extra efforts are being put into keeping women attending these appointments safe, including reducing the numbers of people in waiting rooms. People were asked to stay in their cars and wait until they were called to come in for their appointment. This system worked extremely well and we, the staff, thank all the women for being so patient with us during this time.
- **Booking appointments by telephone:** Booking visits were carried out over the telephone so that expectant mothers did not need to try and come into the hospital and find childcare etc. This worked well initially, however throughout the year we adjusted our approach and combined both telephone and in person booking visits to align with whichever suited the women at the time.
- **Twitter account:** STGH Maternity Services launched their own Twitter account in March 2020 called @MaternitySTGH to keep the public informed.
- **Community support:** Community spirit has been remarkable. STGH has been inundated with donations of food and gifts from our community, for which we are very grateful.

## COVID-19: Challenges

- **Bereavement:** The isolation that can be associated with pregnancy loss is heightened in the crisis. Simple compassionate acts such as giving a 'hug' when a woman is experiencing pregnancy loss being denied due to COVID-19 restrictions and women's grief is being delayed with likely repercussions going forward.
- **Wearing masks:** Wearing masks can make it more difficult to reassure pregnant women coming in for appointments. As a result, the right eye contact and the right words play an important part to help women get to the next stage.
- **Visiting restrictions:** Visiting restrictions in 2020 have been very strict with the result that some women felt isolated even though they were surrounded by others. All available support was given once these women were identified. However, a number of women commented that it made for a more restful stay in hospital with no additional visitors etc. Breastfeeding mothers were more comfortable and there was a noticeable change in women engaging with each other.

Staff also found it difficult to inform some partners in relation to visiting restrictions, particularly first-time partners. Staff noted looks of sadness on their faces when they could not stay any longer, however they were so understanding, and the staff will be forever grateful for that approach during a difficult time for everyone with the consistent worry of contracting COVID-19 and the potential of bringing it home to their extended families.

## STGH: Key achievements 2020

- **Dr Vijoyashree Hiremath confirmed as STGH Clinical Lead, Obstetrics & Gynaecology:** Dr Vijoyashree Hiremath, Consultant Obstetrician & Gynaecologist formally took on the role as Clinical Lead for Obstetrics & Gynaecology in STGH as part of the Ireland South Women & Infants Directorate alongside being part of the Executive Management Team in the Tipperary hospital. As STGH Clinical Lead, Dr Hiremath is responsible for leading the multidisciplinary maternity team in STGH in conjunction with Sinéad Heaney, Director of Midwifery, to provide safe patient-centred care to all the women who attend STGH.
- **Gynaecology:** STGH continued to operate a smooth-running service for gynaecology for both outpatients and inpatients in 2020. The consultants have worked very hard at ensuring that gynaecology waiting lists are negligible and kept at a manageable level throughout 2020.
- **Communications campaign with GPs:** STGH Maternity Services ran a campaign in early 2020 to reach out to GPs in the community to promote the extensive maternity services on offer. It is

well known that better communications between hospitals and primary care lead to better care for patients in general. Site visits and informative posters for patient displays proved very effective in educating GPs on extensive and specialist services in Clonmel and their care pathways. The poster displayed names and contact details of a wide range of specialists including our bereavement support midwife, perinatal mental health midwife, senior medical social worker, and lactation consultant. In addition, details of the ultrasonography unit, community midwifery services and antenatal classes are clearly outlined. This communication effort has been useful and successful for all concerned.

- **Midwife, consultant and HSCP recruitment:** Additional midwives and healthcare assistants were recruited in 2020 as a result of an ongoing recruitment initiative. In addition, the recruitment of a new obstetrics and gynaecology consultant post was approved in 2019 which will bring the total number of consultants in the unit to four, once filled.
  - **Impressive maternal smoking cessation quit rates:** Supporting pregnant women to quit and stay quit in STGH is run by Southeast Community Healthcare and supported by the Sláintecare Integration Fund. The aim is to help everyone involved in the journey of the pregnant woman to stop smoking, by providing an effective intervention in order to tackle maternal smoking. This project is demonstrating exciting results with quit rates consistently above 80% at 4 weeks, way above that of any comparable group.
  - **Sláintecare QUIT Programme/Making Every Contact Count (MECC):** The Sláintecare QUIT team expanded their remit to include colposcopy and the option for referral to the QUIT programme is now included on the colposcopy data sheet (history form). STGH have also updated the patient information leaflet to include information or support with stopping smoking and the option for referral. We hope to continue this initiative into 2021 when we hope to increase our number of referrals and have greater numbers of successful quitters by this time next year.
  - **Termination of Pregnancy Service:** STGH Ultrasound Department facilitates early pregnancy dating scans for women to return to their General Practitioner to consider options. Women accessing medical termination of pregnancy in the community at less than 9 weeks gestation may require interaction with the Obstetrics & Gynaecology services on the gynaecology ward for follow on care.
- In circumstances of a pregnancy beyond 12 weeks gestation where there is a diagnosis of Fatal Fetal Abnormality or where a risk to the life of the mother has been identified, a STGH Consultant Obstetrician /Gynaecologist may facilitate a termination of pregnancy.

The gynaecology ward has processes in place, both legally, and clinically when providing care to women in any of the above circumstances.

- **Cervical screening for staff:** It has always been possible for staff to have their routine screening test (smear) taken in the colposcopy clinic in STGH if they wished. However, with the introduction of HPV cervical screening in March 2020, this initiative was formally rolled out to raise awareness about cervical screening amongst all our staff members. With this initiative, staff can have their routine screening test while on duty or can opt to have it done in STGH on their day off. Since September, 24 staff members have attended/have an appointment scheduled and we hope to increase this for 2021, using our motto: 'The best prevention is early detection.'
- **Capital/equipment upgrades**
  - The New Ultrasonography unit was opened in 2020 after a long wait to include a designated area for consultations. This was badly needed to progress services in STGH and was developed thanks to monies being released by Ireland South Women & Infants Directorate. The consultation area can be utilised by several disciplines such as social work, bereavement and perinatal mental health.
  - The replacement of all ultrasonography scanners in areas like outpatients, the outlying clinic, EPAU and labour ward was well received by all the clinicians.

## Education, STGH

### Undergraduate/Postgraduate

- BSc midwifery students from the University of Limerick and general nursing students from Waterford Institute of Technology continued to successfully complete clinical placements in STGH in 2020 even though they were requested to stop placements for a number of months.

### Professional development

- Three midwives undertook an MSc in Midwifery and one midwife embarked on an MSc in Neonatal Care in UCC.
- One midwife completed a Midwife Prescriber's Course in the RSCI.
- PROMPT (PRactical Obstetric Multi-Professional Training) is an evidence based multi-professional training package for obstetric emergencies. While the first ever PROMPT 3 training study day took place at STGH on 1 February 2019 we were not well placed to hold a study day in 2020 due to structural and social distancing constraints within the hospital. The benefits to staff include responding to emergencies better and improving outcomes for mothers and babies. Noreen Ryan Preston, Clinical Skills Facilitator ran these courses with support from Mary O'Donnell, CMM3 and Catriona Coughlan S/M. However, during 2020 to encourage further understanding, Noreen also ran short education sessions on the labour ward amongst staff whenever possible.

## STGH: Key challenges 2020

### • Recruitment and retention

Recruitment is an ongoing challenge with midwifery posts vacant in 2020. This is being addressed by a workforce planning group and action plans including innovative collaborative measures between maternity units in the Directorate.

However, due to COVID-19 and the Pregnant Healthcare Worker guidelines, this put additional constraints on each unit. Thankfully, pregnant healthcare workers could work from home. At STGH, a number of the staff contributed by completing and updating some of the guidelines and policies.

### • Development of a new unit

Securing funding for the development of a modular unit to modernise facilities and enhance choice for women in STGH remains a challenge. However, a Development Capital Plan with architect drawings has been sent for capital funding and is awaiting agreement.

### • Setting up community outreach clinics

Development of additional community outreach clinics are needed to enable women to access care in the community as per the National Maternity Strategy. Engagement has begun with primary care staff to utilise Carrick-on-Suir Primary Care Centre in 2021 to expand our outlying clinics.

### • MN-CMS rollout:

STGH continue to urgently await the rollout of the MN-CMS project to introduce the electronic healthcare record and await confirmation of a definite timeline from the national project office.

### • IT challenges

Upgrades to network infrastructure as well as IT systems upgrades are needed to facilitate a more efficient working environment. Ongoing upgrades continue throughout 2020 with the introduction of more Viewpoint Access Stations in the areas needed.





## University Hospital Kerry

**Dr Paul Hughes**, Clinical Lead, Consultant Obstetrician and Gynaecologist  
**Sandra O'Connor**, Director of Midwifery

University Hospital Kerry (UHK) opened in 1984. The hospital provides acute general hospital services to the population of County Kerry. In 2020, UHK delivered 1,155 babies and provided gynaecology and colposcopy clinics.

UHK maternity services comprise:

- 4 bedded delivery suite.
- 22 bedded postnatal.
- 6 bedded gynaecology ward.
- 8 bedded antenatal ward / 3 bed admission space/ 4 delivery rooms.
- 10 cots Special Care Baby Unit (SCBU).
- Stand-alone outpatients department for antenatal, gynaecology, urodynamics, sexual health/sexually transmitted infections and midwifery-led scanning.

2020 brought the arrival of additional clinical nurse/midwives specialist positions covering diabetes, bereavement and loss, and ultrasonography. New midwives and nurses were also welcomed to the service.

Three new outreach community-based clinics were set up in 2020. Antenatal outpatients supported and assisted pathway clinics including, the Newborn Hearing Screening outpatient clinic, the Infant Feeding Postnatal outpatients clinic, and the Early Transfer Home Service, with a vision for additional community locations for outreach clinics planned for 2021.

UHK maternity services support the education of undergraduate nursing students from the Institute of Technology, Tralee (ITT) (now named the Munster Technological University). Medical students from UCC also gain clinical experience as part of their placement and this lends to an interdisciplinary teaching environment.

Facilities at UHK allow students to participate in lectures with study space and video conferencing facilities to link with their colleagues at other sites.

### UHK: Managing COVID-19

University Hospital Kerry (UHK) Maternity Services acted swiftly and proactively in response to the COVID-19 pandemic under the guidance of the Director of Midwifery, Sandra O'Connor; Clinical Lead for Maternity Services, Dr Paul Hughes (Consultant Obstetrician and Gynaecologist) and the UHK hospital management team.

COVID-19 affected a number of aspects of maternity services including visiting hours, services offered and methods of delivering women-centred care. Examples include:

- **Visitor restrictions:** In the interest of patient and public safety, strict visitor restrictions were put in place in UHK, in line with other units in Ireland South Women & Infants Directorate. We have been very mindful of how difficult this is for women and their families and we are very grateful for their cooperation.
- **Service changes:** While it has been largely business as usual in UHK Maternity Services, some service changes have been made. Staff changed contracts to work extra shifts/hours to support their colleagues and provide care to mothers, babies, and their families.
- **Virtual gynaecology clinics:** In response to the COVID-19 pandemic, gynaecology clinics were delivered via virtual clinics. Initial consultation was by phone, with the availability of video consultation subsequently.

• **Emergency Department (ED) Direct Gynaecology Ward Pathway:**

The ED Direct Gynaecology Ward Pathway was developed and implemented in response to the COVID-19 pandemic. This service means that non COVID-19 Obs\Gynae women are triaged by ED staff and if deemed appropriate for the Gynaecology ED direct pathway, the patient will be reviewed by the appropriate team in a designated side-room on the gynaecology ward. This pathway has been key in the enhancement in the quality of care offered to these women.

- **Outreach Clinics established:** In a bid to minimise contact with the acute setting and reduce the risks when travelling, there was a need to set up maternity services outreach clinics and virtual booking clinics. UHK Maternity Services worked tirelessly with the supportive staff of Centre Point Community Building and Institute of Technology Tralee (North Campus) to get this up and running. Due to effective teamwork, good communication, and a united focus on providing woman-centred care, community outreach clinics were realised. Women using the service have given positive feedback regarding the outreach clinics, describing them as a relaxing and comfortable environment.

Outreach clinics set up included:

- Maternity Services Ante-natal Outreach Clinics (Tralee).
- Early Transfer Home Service.
- Virtual Antenatal Education.
- Maternity Services Virtual Bookings Clinics.
- Virtual Diabetic Clinics.
- Virtual Gynaecological Clinics.
- Newborn Hearing Screening Programme has been relocated to a Maternity Service Outreach Clinic.
- Postnatal Infant feeding outpatient clinics.

Extra efforts are being put into keeping women attending these appointments safe, including reducing the numbers of people in waiting rooms.

- **Online Parent Education:** Maternity Services at UHK responded early and admirably to convert the facilitation of antenatal education into an online experience. This was done by producing a number of short educational videos for online, on-demand viewing and by delivering live online antenatal classes. All pregnant women attending the hospital were informed of the antenatal education online resources.

The videos can be viewed on <http://uhk.ie/maternity/> and have also been made available on the Cork University Maternity Hospital (CUMH) website. In addition, they are linked from the HSE on <https://mychild.ie/> website and have been publicised on Twitter by both @IrelandSouthWID and @Hospital\_Kerry.

The online resources present a valuable opportunity to build a woman's confidence in her ability to give birth and provide pregnant women and their partners with the knowledge and skills

that may assist them during labour, birth, and early parenting during the restrictions of COVID-19.

- Maternity Services UHK also developed a Virtual Infant Feeding Education class. Infant feeding resource video education is available on <http://uhk.ie/maternity/>
- **2020 Virtual Parent Craft Education:** Virtual Parent Craft education classes were established and offered at 32 weeks gestation via Webex in 2020. During the year, Virtual Parent Craft classes had a total of 168 expectant parents in attendance. The vision for the Parent Craft Education Services in 2021 is to expand classes to include hypnobirthing classes, mid-pregnancy education classes and twin pregnancy classes.
- **Virtual visiting for babies in the UHK NICU:** Like other maternity hospitals in Ireland South Women & Infants Directorate, UHK introduced a secure video messaging platform in the Neonatal Intensive Care Unit (NICU) in partnership with the INFANT Research Centre at UCC. Called vCreate, this new initiative allows families to remotely check-in on premature babies amid COVID-19 visiting restrictions.
- **COVID-19 and staff education:** In response to the COVID-19 pandemic, a suite of multidisciplinary education programmes was offered including coronavirus education sessions and personal protective equipment (PPE) training.
- **Social distancing:** UHK facilitated social distancing requirements in a number of ways:
  - Essential staff only attending handovers and observing social distancing.
  - Remote working where possible.
  - Environment markers to indicate social distancing in areas such as the canteen, corridors and stairs.
  - Reduced numbers allowed in meeting rooms with dial-in options.
  - Patient waiting areas arranged to facilitate social distancing.
  - Office partitions.
  - Additional signage.



- **Meetings:** Many briefings and meetings now take place online or in large meeting rooms where social distancing and large numbers of staff can be accommodated.
- **Community support:** Community spirit has been remarkable. UHK has been inundated with donations of food and gifts from our community, for which we are very grateful.
- **UHK flu vaccine uptake:** The facilitation and administration of the flu vaccine was structured differently in UHK due to COVID-19. This year, UHK Maternity Services have their own trained peer-to-peer vaccinators. The team of vaccinators and senior management in UHK Maternity Services encouraged all maternity staff in UHK to make a concerted effort this year. Flu vaccine uptake in 2019/2020 was 34% and increased to 61.7% in 2020/2021.
- **Adaptation of roles in UHK due to COVID-19:** UHK's multi-professional teams responded by being flexible, adaptable, and committed to the continued delivery of high-quality care for women and babies during these times of uncertainty and apprehension. Staff have been redeployed or seen their service delivery method change in a matter of days and have responded with courage, determination and teamwork in supporting each other and the service through this global pandemic. Examples are as follows:
  - **CNS Ultrasonographer (Deirdre Colgan):** In accordance with HSE guidelines, the number of women undertaking scans in the department at any one time has been reduced. Women attend unaccompanied for their ultrasound scan and the scan time has also been reduced. There is greater demand on the ultrasonographer's service, not only with the time allocation for scanning, but also to ensure that the women feel supported emotionally at what can be a very vulnerable time. All ultrasound clinics are still operating, facilitating comprehensive antenatal care.
  - **Infant Feeding Coordinator & Lactation Consultant (Máiréad O'Sullivan):** The lactation support role in UHK maternity services has expanded to provide assistance to mothers in the postnatal and neonatal unit. Initially when restrictions were implemented, antenatal breastfeeding preparation classes were deferred. To facilitate education on breastfeeding, videos were created for women to access remotely. Following discharge, phone calls are offered to further support the mothers in their home environment.

## UHK: Key achievements 2020

- **Dr Paul Hughes confirmed as UHK Clinical Lead, Obstetrics & Gynaecology:** Dr Paul Hughes, Consultant Obstetrician & Gynaecologist formally took on the role as Clinical Lead for Obstetrics & Gynaecology in UHK as a part of the Ireland South Women & Infants Directorate alongside being Clinical Lecturer in the Department of Obstetrics & Gynaecology in UCC. As UHK Clinical Lead, Dr Hughes acts as a key liaison with the other three units in the group via the weekly EMC meetings to communicate local UHK issues and concerns to the group as well as disseminating information from the group to all the multidisciplinary members of the team in UHK.
- **Early Transfer Home Scheme:** UHK successfully set up an Early Transfer Home Scheme in September 2020 for healthy mothers and babies. This enables mothers to return to the comfort of their home, knowing that they have the support of a midwife who will call in and provide them with one-to-one care and support for the first few days. This scheme will be rolling out to all units in due course.
- **Breastfeeding in UHK:** UHK successfully set up a postnatal infant feeding clinic, enabling families to attend infant feeding clinics in the community setting.
- **UHK Foundation Programme in Sexual Health Promotion (FPSHP):** HSE Health Promotion and Improvement (HP&I), Health and Wellbeing Division HSE South and Cork/Kerry Community Health and University Hospital Kerry (UHK) worked together in 2020 to deliver the Foundation Programme in Sexual Health Promotion (FPSHP). The FPSHP is a 10-day capacity building training programme and takes a holistic, life-course approach to sexual health.
- **Maternal and Newborn Clinical Management System (MN-CMS):** In 2020, mPage upgrade, neonatal upgrade and Antenatal shared care messaging via Healthlink were all successfully rolled out. The NICU upgrade streamlined the NICU users' workspace and moved the NICU workflow to mPages. The mPages upgrade allowed for code fixes, enhancements and alignment with latest functionality, stability and support model. These two pieces of work were completed in 2020. Electronic messaging for antenatal shared care between MN-CMS and GPs, replacing the Antenatal Visit Cards went live in 2020.
- **Kerry Born Campaign:** Over the course of a month, the 'Kerry Born' initiative saw various promotional components throughout the county including print media, billboards, adshels, and video clips on UHK official social media, amongst other media. The aim of the campaign was to promote awareness of the services offered by the Maternity Department at UHK such as:

**Antenatal care**

- Community Outreach Antenatal (low risk) Clinics.
- Community Outreach Antenatal Education.
- Antenatal Shared Care messaging via Healthlink.
- MN-CMS Electronic Healthcare record for Obstetrics Labour/Birth.
- Home from Home Birthing Suite with water immersion for pain relief during first stage of labour.
- One to One continuous Midwifery care during Labour.
- MN-CMS Electronic Healthcare record for Obstetrics.
- 24/7 epidural availability.

**Postnatal**

- Infant Feeding Coordinator on site.
- Infant Feeding Outreach Postnatal Clinic.
- Early Transfer Home Service (commencing September 2020).
- MN-CMS Electronic Healthcare record for Obstetrics.

- **Additional achievements in UHK Maternity Services in the last 12 months**

- Clinical Nurse Specialist Infant Feeding Coordinator.
- Three Clinical Midwife/Nurse Specialist Sonographers.
- Four Neonatal nurses.
- Quality Manager.
- cAMP.
- MN-CMS Healthcare record in Gynaecology care.

- **New neonatal nurses:**

UHK Neonatal Unit welcomed four neonatal nurses to the team in February 2020.

- **Midwife recruitment**

New midwifery posts were approved for UHK by Ireland South Women & Infants Directorate and SSWHG in 2020.

- Clinical Nurse Specialist Infant Feeding Coordinator.
- Three Clinical Midwife/Nurse Specialist Sonographers.

- **Programme implementation**

Various programmes such as The National Health Communication Programme, Breastfeeding Support Programme and Flu Vaccine Programmes implementation were ongoing in 2020.

- **Audits carried out in 2020**

- Care Bundles-catheter.
- Care Bundles-Peripheral IVC.
- Adherence to Neonatal Sepsis Guidelines.
- CPE Screening.
- Hygiene.
- IMEWS Escalation.
- IMIS.
- Maternity Metrics.
- MSS.
- NPEC.
- Sepsis 6.
- Surgical Site.
- VON Data.
- Antenatal Obs GTT.

- Anti D Prophylaxis.
- Breast Feeding.
- Episiotomy.
- Hysteroscopy.
- Neonatal Infant feeding.
- Bereavement Referral Audit.
- Bereavement Register Audit.
- Bereavement Care pathway - 1st Trimester.
- Bereavement Care pathway - 2nd Trimester.
- Bereavement Care pathway - Ectopic.
- Bereavement Care pathway - Still birth.
- Security tag audit.
- Fire audit.
- Audit of National.
- Audit of Local guidelines.
- Postnatal Analgesia Audit.
- Cervical Check audit of waiting times, attendance, productivity, compliance with National Standards.
- Mattress Audit.
- Gynaecology Acute Service Metrics.
- EPAU - Early Pregnancy.
- Anatomy scan.

- **Termination of Pregnancy Service:**

UHK Ultrasound Department facilitates early pregnancy dating scans for women to return to their General Practitioner to consider options.

Women accessing medical termination of pregnancy in the community at less than 9 weeks gestation may require interaction with the Obstetrics & Gynaecology services on the gynaecology (Kells) ward for follow on care.

In circumstances of a pregnancy beyond 12 weeks gestation where there is a diagnosis of Fatal Fetal Abnormality or where a risk to the life of the mother has been identified, a UHK Consultant Obstetrician /Gynaecologist may facilitate a termination of pregnancy.

The gynaecology (Kells) ward has processes in place, both legally, and clinically when providing care to women in any of the above circumstances.

- **Capital/equipment upgrades and investments:**

- **New Maternity Development**

Funding has been approved for New Maternity development at UHK and the design phase is under way. The project is currently in design stage.

- **Women's Health Services:** UHK Maternity Services is delighted to report that funding has been approved for New Women's Health Service in the community setting with funding for additional associated posts (ANP/AMP, CNM3/CMM3, Staff Nurse, General Practitioner, HCA and Clerical Support).

- **National Maternity Experience Survey**

A National Maternity Experience Survey was completed to obtain service users' experiences of the Maternity Services across all sites. Following the collation of the results a quality improvement plan has been developed to ensure the continued improvement of Maternity Services across all sites.

UHK Maternity Services scored an overall 85% with women reporting that they were satisfied with their care in the National Maternity Experience Survey.

## Education, UHK

### Undergraduate

#### UHK Maternity Services Nursing & Midwifery Students:

- Between 25 and 30 UCC medical students receive clinical training in UHK in any given year, with a rotation of four students received over 7 rotations from September to April during the academic year.
- In 2020, 63 general and mental health undergraduate nursing students from the Institute of Technology Tralee (ITT) undertook clinical placements in UHK maternity services. In addition, there were 2 Public Health Students placements in UHK maternity services.
- Secured plan for Maternity Students UCC and for Clinic Practice Coordinator.
- UHK Maternity Services has developed a secure plan for the future commencement of UCC Midwifery students' placements. To facilitate this service being offered at UHK, a Clinical Practice Coordinator will be appointed.

### Professional development

- Basic Life Support.
- Bereavement Care following Pregnancy Loss & Perinatal Death Education Workshop.
- Breastfeeding 6 Hour UHK.
- Breastfeeding 20 Hour programme.
- Breastfeeding HCAs.
- Breastfeeding (3 hours) Neonates.
- Diabetes: Managing Diabetes & Endocrine disorders in Pregnancy: A Multi-Disciplinary Approach.
- Maternity HCA's Orientation.
- Neonatal Resuscitation Programme.
- Orientation HCA Maternity.
- Orientation (10 Day) Neonates.
- PROMPT: Practical Obstetric Multi Professional Training.
- Resilience workshop.
- Nasopharyngeal sample Swabbing Maternity services UHK.
- NRP.
- STABLE Programme.

### Other:

- T pro training – to facilitate virtual Maternity Clinics & Dictation.
- Mpage upgrade & NICU virtual training.
- Antenatal shared care messaging via Healthlink.
- MSc in Perinatal Mental Health Year 1.
- MSc in Advance Midwifery Practice Year 1.
- Lactation Consultant training x 3.
- Modules in Research, Perinatal Mental Health and Neonatal foundation course.
- CMM3/CNM2 – Leadership courses.
- CMM2 – LEO, Peta Taffe.

## UHK Maternity Services: Key challenges 2020

### • Recruitment and retention

Recruitment and retention remains an ongoing challenge in 2020 and is being addressed by a workforce planning group that have put an action plan in place to address current recruitment and retention issues. There are local, national and international recruitments drives ongoing.

### • Expansion of facilities

Maternity facilities in UHK need to be expanded to cater for choice for women. Work is ongoing for the development of a new maternity unit that will also offer women's health multi-professional facilities. Funding has been granted for a New Maternity Development on the site of the UHK campus.

### • Setting up community outreach clinics

UHK maternity services continue to develop additional community outreach clinics in locations throughout Kerry, such as Tralee and Listowel, to enable women to access care in the community, in line with the 2016-2026 Maternity Strategy. Maternity Services UHK have future plans to roll out further to Killarney and Dingle.

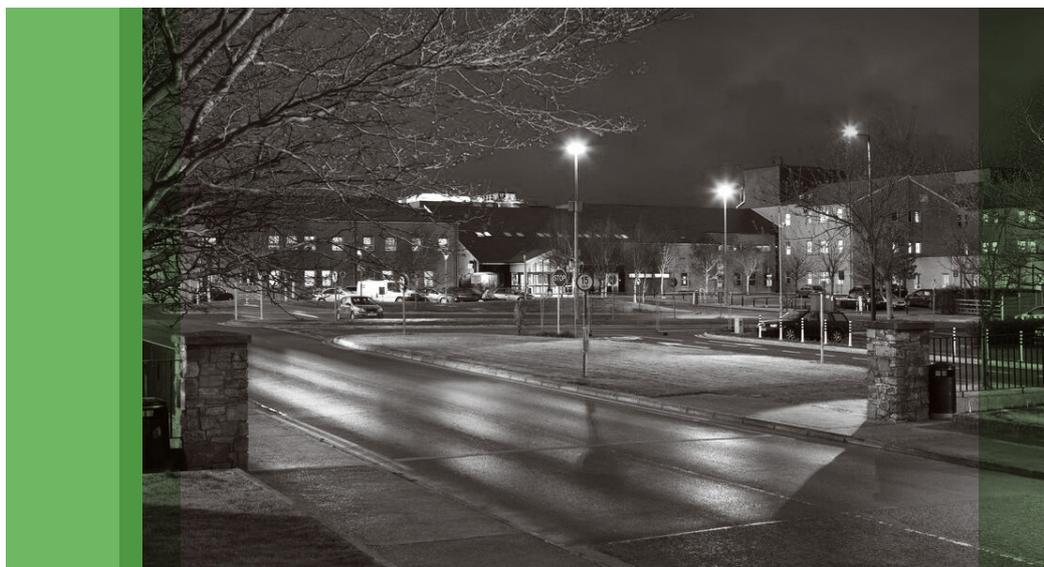
### • Gynaecology waiting lists

Gynaecology outpatient and inpatient waiting list management is an ongoing challenge, alongside increased demands for the gynaecology service. The proposed development of a Women's Health Service in the community setting is predicted to be a beneficial influence on the gynaecology waiting lists.

### • MN-CMS training and rollout

Staff turnover means that optimising the training and expertise of new healthcare staff in the efficient use of the MN-CMS (Obstetric & Gynaecological) system is a particular challenge.





## University Hospital Waterford

**Dr Eddie O'Donnell**, Clinical Lead, Consultant Obstetrician and Gynaecologist

**Paula Curtin**, Director of Midwifery

University Hospital Waterford (UHW) has been delivering babies as a maternity unit since 1995 and delivered 1,635 babies in 2020.

UHW maternity unit comprises:

- 4 bedded delivery suite with a 3 bedded 1 stage room.
- Obstetric theatre on delivery suite with adjacent recovery room.
- 24 bedded postnatal ward.
- 29 bedded antenatal and gynaecology ward and a specifically nominated bereavement room.
- Early Pregnancy Treatment Unit that is located adjacent to the Antenatal & Gynaecology Ward.
- Neonatal Intensive Care Unit (NICU) and Special Care Baby Unit (SCBU)-18 cots in total.
- Stand-alone Outpatients Department for antenatal care and gynaecology service to include including urodynamics service and specialist midwifery clinics.
- The Midwifery-led scanning department and Integrated Hospital and Community Midwifery Service (IHCMS) room is also located in the OPD.
- The colposcopy service is in a separate, purposely equipped outpatients department in UHW.
- The Sexual Assault Treatment Unit (SATU) is in a discrete location in UHW but with full support and access to maternity and gynaecology services as required.
- Maternity services outreach clinics in Dungarvan, Co. Waterford, City GP Clinic & Community Centre provide supportive care in a local setting as outlined in the 2016-2026 Maternity Strategy. These clinics are staffed by the Integrated IHCMS team and midwifery staff from OPD Services.

### Specialist roles

There is a Clinical Midwife Specialist (CMS) in Bereavement and Loss for the services. This role has proven to be of great value to families and staff alike.

UHW Maternity Services has a long history of midwifery led ultrasonography services. There are 3 CMS in place providing the full programme of scanning for all attendees.

The Advanced Midwife Practitioner (AMP) role in UHW has been in place since 2011. This senior role brings many benefits to the service in terms of education, staff development and clinical supervision of midwifery-led services as well as to many women who attend the AMP with a specific pathway of care.

The Clinical Midwife Manager 2 for Perinatal Mental Health offers a robust programme of support for women attending service under the Specialist Perinatal Mental Health Services Model of Care for Ireland.

The Clinical Midwife Manager 2 for Ambulatory Gynaecology coordinates the Termination of Pregnancy services in a timely and sensitive manner. This role will be evolving over 2021 to include support for day hysteroscopy.

### UHW: Managing COVID-19

COVID-19 affected a number of aspects of maternity services including visiting hours, services offered and methods of delivering women-centred care.

#### • Visitor restrictions:

In the interest of patient and public safety, strict visitor restrictions were put in place in UHW, in line

with other units in Ireland South Women & Infants Directorate. We have been very mindful of how difficult this is for patients and are very grateful for their cooperation. This was a changing picture during 2020 and the service adapted as best as possible, taking consideration of the needs of women and their families.

• **Service changes:**

While it has been largely business as usual in Waterford maternity services, some service changes have been made. The Newborn Hearing Screening Programme was suspended for a short time and was soon back up and running with backlogs addressed and cleared.

Home birth service continued with adaptation of existing guidelines to include COVID-19 risk assessment. The Integrated Hospital and Community Midwifery Service (IHCMS) is moving towards increased antenatal visits in the community to support women to be seen nearer home and to decrease footfall into the acute services.

• **Adaptation of roles due to COVID-19:**

UHW's multi-professional teams responded by being flexible, adaptable, and committed to the continued delivery of the high-quality care for women and babies during these times of uncertainty and apprehension. Staff have seen their service delivery method change and have responded with courage, determination and teamwork in supporting each other and the service through this global pandemic. Examples are as follows:

- **CMS Ultrasonographer:** In accordance with HSE guidelines, numbers of women undertaking scans in the department at any one time has reduced. Women attend unaccompanied for their ultrasound scan and the scan time has also been reduced. There is greater demand on the

ultrasonographer's service, not only with the time allocation for scanning, but also to ensure that the women feel supported emotionally at what can be a very vulnerable time. All ultrasound clinics are still operating, facilitating comprehensive antenatal care. The Midwifery and Medical teams are mindful of the anxiety this could create and have worked hard to ensure support for the attendees.

- **Gynaecology reviews** were undertaken virtually to continue care for patients.
- **Diabetes in pregnancy education** was undertaken virtually.

There are plans to increase virtual appointments for 2021 including booking appointments.

- **Staff updates:** To keep staff up to date with COVID-19 related information, UHW created a short newsletter called 'Corona Condensed' which proved a popular resource.
- **UltraNews** kept staff abreast of information from other Maternity Services in Ireland South Women and Infants Directorate
- The short, socially distanced 10-minute daily huddle also included up to date COVID-19 Information for attendees both around the Maternity and Neonatal Services and the wider hospital. Opportunity was also taken to do bite-sized Infection Prevention & Control information (IP&C) sessions in line with up-to-date guidance.
- **Meetings:** As regards our ways of working in UHW, the daily huddle has been moved to a larger space to allow for social distancing. Unnecessary gatherings are avoided and in line with IP&C advice the use of the resource room was adapted to allow for small meetings of key personnel to ensure multidisciplinary meetings could occur safely.



- **Online Parentcraft Education:** UHW worked to convert the facilitation of antenatal education into an online experience. This was primarily done by delivering live online antenatal classes. All pregnant women attending the hospital are informed of the antenatal education online resources.

The live classes present a valuable opportunity to build a woman's confidence in her ability to give birth and provide pregnant women and their partners with the knowledge and skills that may assist them during labour, birth and early parenting during the restrictions of COVID-19.

- **Virtual visiting for babies in the UHW NICU:** Like other maternity hospitals in Ireland South, UHW introduced a secure video messaging platform in the Neonatal Intensive Care Unit in partnership with the INFANT Research Centre at University College Cork. Called vCreate, this new initiative allows families to remotely check-in on premature babies amid COVID-19 visiting restrictions.
- **Outreach clinics:** In a bid to minimise contact with the acute setting and reduce the risks when travelling, the demands on Waterford's outreach clinics grew. Extra efforts are being put into keeping women attending these appointments safe, including reducing the numbers of people in waiting rooms. In Dungarvan, Co. Waterford the clinic time was extended to allow for increased control of appointment times and surveillance. A new clinic was commenced in a Community Centre in Waterford and a GP practice in order to decrease footfall.
- **Community support:** Community spirit has been remarkable. UHW has been inundated with donations of food and gifts from our community, for which we are very grateful.

## COVID-19: Challenges

- The challenges around the pandemic were strongly felt by the service users and staff alike. Visiting restrictions were difficult but staff did their utmost to support women and facilitate early discharge and follow-up whenever possible.
- Staff could no longer enjoy group chats and breaks due to social distancing requirements. In addition, staffing resources were tight when contact tracing deemed individuals as close contacts.
- The service managers remain committed to staff support and overall try to mitigate the effects of the pandemic on everyone.

## UHW: Key achievements 2020

- **Dr Eddie O'Donnell, confirmed as UHW Clinical Lead, Obstetrics & Gynaecology:** Dr Eddie O'Donnell, Consultant Obstetrician & Gynaecologist formally took on the role as Clinical Lead for Obstetrics & Gynaecology in

UHW as a part of the Ireland South Women & Infants Directorate alongside being Obstetrics and Gynaecology Senior Lecturer in Clinical Education, UCC. As UHW Clinical Lead, Dr O'Donnell acts as a key liaison with the other three units in the group via the weekly EMC meetings to communicate local UHW issues and concerns to the group as well as disseminating information from the group to all the multidisciplinary members of the team in UHW.

- **New Consultant Obstetrician & Gynaecologist:** UHW was delighted to welcome Dr Mairéad Butler as a new consultant Obstetrician & Gynaecologist in December 2020. Dr Butler is from Waterford. She studied medicine in UCC and received her specialist training in Australia. She is now working in the hospital she was originally born in!
- **Termination of Pregnancy Service:** University Hospital Waterford has facilitated medical termination of pregnancy since the change in legislation in Ireland Health (Regulation of Termination of Pregnancy) Act 2018. The service began on 1 January 2019.

A Monday to Friday ultrasonography (dating) service is available to women, and those under 9 weeks gestation return to their GP for continuing care. Over 9 weeks is facilitated in UHW as a day case procedure on the Gynaecology Ward. If required women may return to the service if any complications arise in the post termination period.

The service is supported by Clinical Lead (obstetrics and gynaecology) and Clinical Midwife Manager 2 Ambulatory Gynaecology. This CMM2 is also a trained Ultrasonographer which allows for a smooth pathway of care. The service has been well evaluated and accessed by local and regional GPs seeking pathway of care for women.

## New roles

- CMM2 Ambulatory Gynaecology: Ms Elaine Roche.
- Rachel Cashin commenced ultrasound training and joined the Early Pregnancy Midwifery Scanning Team.
- Margaret Coe CMM2 commenced in OPD.
- Brid Galvin commenced at CMM2 Shift Leader in Delivery Suite.
- **HIHI Munster Finalist:** In June 2020, Colette Cunningham, Senior Neonatal Intensive Care Nurse in UHW became a Munster finalist in the Health Innovation Hub of Ireland (HIHI) 'Spark Ignite' business competition. Her idea covered a mobile phone cleaner, useful in the reduction of infection transmission risk, especially relevant in these current times. Neonatal infants are particularly prone to all kinds of infection due to their immature immune systems.

- **Impressive maternal smoking cessation quit rates:** Supporting pregnant women to quit and stay quit in UHW is run by Southeast Community Healthcare

and supported by the Sláintecare Integration Fund. The aim is to help everyone involved in the journey of the pregnant woman to stop smoking, by providing an effective intervention in order to tackle maternal smoking. This project is demonstrating exciting results with quit rates consistently above 80% at 4 weeks, way above that of any comparable group.

- **Pilot Early Transfer Home Scheme:** This pilot was undertaken in late 2020 within a defined radius and was supported by staff from IHCMS and postnatal ward. This is hoped to be developed further into 2021.

## Education, UHW

### Undergraduate

- UCC medical students received clinical training in UHW in 2020, with a rotation of 4 students received over 7 rotations from September to April during the academic year.
- UHW provided clinical placements to BSc Nursing students from Waterford Institute of Technology (WIT) and BSc Midwifery students from University of Limerick (UL) as well as elective placement to the Integrated Hospital and Community Midwifery Service (IHCMS) team from Cork and Dublin.
- Placement site for Public Health Nurse students from UCC (2 at any one time).

### Professional development

Education and training were challenged by COVID-19 restrictions in 2020. The move towards online education was necessary to allow staff to develop and for the service to continue its strong practice of multidisciplinary training and development.

- UHW continued with **PROMPT 3 obstetric emergency training** in 2020. Two online and 1 face to face (prior to COVID-19 restrictions). This multidisciplinary training has received positive evaluation from the multidisciplinary team.
- **TOP Education programme:** This programme took place on 16 January 2020 and gave an overview of termination services nationally. It was informative and contemporary and very well evaluated by attendees.
- **Water Birth Seminar:** The Regional Centre for Nursing and Midwifery Education, HSE South East, hosted Dianne Garland, International Midwifery Expert to facilitate a Water Labour & Water Birth Seminar on 6 February 2020. The event provided midwives with the opportunity to revisit basic midwifery skills and to reflect on and learn from practice and each other, together with the need to encourage women to question their care to bring about choice within maternity services.

- **Diabetes in Pregnancy:** This day was held on 5 March and provided updated diabetes education for attendees.
- **PhD Scholarship:** Colette Cunningham, Senior Neonatal Intensive Care Nurse in UHW continued with a full-time employment-based PhD Scholarship from the Irish Research Council in conjunction with the RCSI. Her PhD research is titled '*An eHealth educational intervention to improve kangaroo knowledge and support the self-efficacy of neonatal nurses*'.
- Anne Fanning completed an MSc in Ultrasound, UCD.
- Anne Reilly, Midwife Delivery Suite continued with level 9 studies in Diabetes Care, UCD.
- Laura Cullen, Gynaecology Nurse continued an MSc in Wound Management and Tissue Viability, RCSI.
- Mary Frisby, CMM2 completed a Masters in Cognitive Behaviour Therapy and Motivational Interviewing for Practice, WIT.

These education programmes are chosen in line with service need and staff interest and skills. Many thanks to the Regional Centre for Nurse and Midwifery Education for their ongoing support of UHW Maternity Services.

## UHW: Key challenges 2020

- **Recruitment and retention:** Staffing recruitment and retention remained a major focus throughout 2020. Recruitment is an ongoing challenging and protracted procedure. Fulfilling the roles of Clinical Midwife Specialist (CMS) in Diabetes and Lactation are of high priority.
- **Investment in infrastructure:** Due to the ongoing need for investment in infrastructure, UHW worked hard to source funding for new equipment including ultrasound equipment upgrades and refurbishment works such as birthing pools. Facilities development is also a focus including the setting up of additional community outreach clinics.
- **Gynaecology waiting lists:** The strategy to deal with outpatient waiting lists for gynaecology services is multidimensional and ongoing.
- **Service delivery:** Delivering maternity and gynaecology services as close to normal despite extraordinary challenges of the COVID-19 pandemic remained a challenge for all. The staff worked tirelessly to care for service users.

# 2020 Highlights

- New senior posts for Ireland South
- Cork Quads turn 18 and visit CUMH
- Hand expressing starter pack at UHW
- UHK go live with MN-CMS for gynaecology services
- CUMH DOM retires after 41 years
- CUMH Gynaecology Waiting List Initiative shortlisted and wins HSE Patient Experience Award
- Improving GP knowledge of STGH maternity services
- First Smoking Cessation Midwife in CUMH
- Midwifery management day
- International Day of the Nurse in CUMH
- 5 May 2020: International Day of the Midwife
- Special Care Baby Unit, UHK welcomes four Neonatal Nurses to Kerry
- National Breastfeeding Week across Ireland South Women & Infants Directorate
- Early Transfer Home Service at UHK
- CUMH Ideas Forum celebrates 2nd birthday
- Ireland South on the road
- Colposcopy quality initiatives in STGH
- CUMH Facemask Competition
- Welcoming New Doctors to CUMH in 2020
- Apple: Babysteps Appeal for CUMH Neonatal Sanctum
- Domestic Violence and Pregnancy: CUMH conference with national and international experts
- COVID-19 and pregnancy – microsite launched
- New brand tagline for Ireland South Women & Infants Directorate

## EDUCATION

- Water birth seminar in Waterford
- NPEC Study Day 2020
- 25 years of Nursing and Midwifery UCC: 1994-2019
- UCC DNPd and MSc Midwifery Graduations
- Congratulations Professor Keelin O'Donoghue
- Success with Aspire Fellowship from NDTP in CUMH
- Congratulations to UCC Higher Diploma in Midwifery
- COVID-19 and CME education
- RAMI Intern Prize awarded to Bryan Traynor, CUMH Intern
- Ireland South Women & Infants Directorate Grand Rounds virtual meetings
- Educational Videos for Parents and Expectant Parents in CUMH
- UCC's BSc Midwifery students celebrate the completion of their programme

## RESEARCH

- Clinical guidance on COVID-19 and maternity practice
- Funding for technology to reduce hospital visits for pregnant women during COVID-19
- Impact of COVID-19: INFANT CATePILLaR study
- HRB Funding awarded for study 'Practice Enhancement for Exclusive Breastfeeding (PEEB)'

## New senior posts for Ireland South

The year 2020 saw significant developments in the necessary management and administrative structures to prepare the way for the full establishment of the Directorate and the transfer of budgetary and clinical governance.

In April 2020, three key development posts for the Ireland South Women & Infants Directorate were filled.

- General Manager/Head of Operations: **Miriam Lyons**
- Finance Manager: **Stephen O'Connor**
- Quality and Safety Manager: **Claire Everard**

In addition, Katie Bourke was appointed Director of Midwifery in Cork University Maternity Hospital, replacing Olive Long following her retirement.

Seven Clinical Lead posts were also formally expedited by SSWHG due to the COVID-19 emergency and were appointed on an acting basis for a period of six months initially, they were since extended. The roles are:

- Clinical Lead UHW: **Dr Eddie O'Donnell**
- Clinical Lead STGH: **Dr Vijoyashree Hiremath**
- Clinical Lead UHK: **Dr Paul Hughes**
- Clinical Lead Neonatology: **Dr Brendan Murphy**
- Clinical Lead Quality & Patient Safety: **Dr Mairead O'Riordan**
- Clinical Lead Gynaecology: **Ms Orfhlaith O'Sullivan**
- Clinical Lead Policies, Procedures and Guidelines: **Dr Karen McNamara**

There is also one Business Manager budgeted for each of the maternity units in STGH, UHW and UHK, advertised in 2020 and to be appointed as soon as possible.

See further detail below on these new roles and their remit.



**Miriam Lyons, General Manager/  
Head of Operations, Ireland  
South Women & Infants  
Directorate**

Miriam has worked in Cork University Maternity Hospital (CUMH) since 2007 and previously worked on the amalgamation of maternity services from Erinville Hospital, St. Finbarr's Maternity Hospital, Bon Secours Maternity Unit, and gynaecology services from Cork University Hospital to create Cork University Maternity Hospital. Miriam also worked as a Staff

Officer in Erinville Hospital and became Business Manager in CUMH in 2013. Thereafter she worked as Business Manager for CUH Paediatrics when it was amalgamated with the maternity services in CUMH in 2014.

In addition to providing senior management support to the Group Clinical Director, Miriam provides day-to-day operational management of Ireland South Women & Infants Directorate. She contributes to the strategic development of our Directorate and promotes and participates in the implementation of change as required. Her role also includes managerial and administrative responsibilities ranging from central functions such as personnel, finance, IT, through the many line functional areas within our Directorate. Miriam is focussed on working collaboratively with each of our maternity units/hospitals in CUMH, STGH, UHK and UHW.



**Stephen O'Connor, Finance  
Manager, Ireland South Women  
& Infants Directorate**

Stephen joined as Finance Manager in March 2020 having spent nearly 15 years in the private sector. His career began with nearly ten years within the hedge fund industry. Prior to his new role, he spent five years in positions within the med-device and pharmaceutical industries.

As Finance Manager, Stephen ensures the highest standards of financial reporting and support in

compliance with best practice in financial processes, procedures, and controls.

His day-to-day role includes overseeing the preparation of monthly management account reporting, including analysing and monitoring performance against allocated budgets and investigating any major variances as they arise. Stephen provides forecast updates where needed and prepares the finance section of the Annual Service Plan incorporating the budgets for the hospitals and services within the Ireland South Women & Infants Directorate.

Stephen also oversees ongoing development of the reporting system and aids in the implementation of any new systems. He ensures appropriate financial governance and internal financial controls are in place and always ensures compliance with all relevant legislation.



**Claire Everard, Quality and Patient Safety Manager, Ireland South Women & Infants Directorate**

Claire has worked at Cork University Maternity Hospital (CUMH) since the day it opened and she has had many different roles in that time, first as a Staff Midwife, having previously worked in Erinville Hospital in the Labour Ward. After completing a Masters in 2009, Claire worked as a research midwife before becoming a clinical midwife manager.

She later became the Evidence Based Clinical Care Coordinator and in 2017, Claire completed a

Higher Diploma in Quality and Risk Management in Healthcare in UCD. In 2018, while continuing to work in the Quality & Patient Safety Department, she became Acting Practice Development Coordinator, Assistant Director of Midwifery grade.

This is the first time there has been a role like Claire's in the Ireland South Women & Infants Directorate and it has been created to ensure that patient safety is at the heart of everything we do in maternity services. Her aim is to ensure that women and infants receive a service of the highest quality that is delivered safely by the best staff in Ireland.



**Katie Bourke, Director of Midwifery, Cork University Maternity Hospital, Ireland South Women & Infants Directorate**

Katie qualified as a nurse in St James's Hospital, Dublin and gained experience in an acute hospital in the UK before completing her midwifery training in the Coombe Women & Infants University Hospital. She later moved to Erinville Hospital where she worked within the Unified Maternity Services and then moved into Cork University Maternity Hospital (CUMH) when it was established in 2007.

In CUMH, Katie has held the role of Clinical Midwifery Skills Facilitator, Midwifery Practice Development Coordinator and became Assistant Director of Midwifery in 2018. Katie completed an MSc in Nursing & Midwifery in 2012 and worked as national midwifery theatre lead for the Maternal Newborn Clinical

Management System (MN-CMS) in 2014.

Katie became Acting Director of Midwifery, CUMH in December 2019 before she took on the role as Director of Midwifery, CUMH.

In her role as Director of Midwifery, Katie has a strong focus on early postnatal transfer home service. This service will provide support for women who are discharged home in collaboration with the public health nurse, with the best interests of mum and baby, and continuity of care in mind. She will work with the team in CUMH and the other Directors of Midwifery in Ireland South Women & Infants Directorate to implement this service together across the Directorate. Other areas of focus include MaternityONESouth and progressing the roles of Advanced Midwife/Nurse Practitioner to further professionalise midwifery in CUMH.



**Dr Eddie O'Donnell, Clinical Lead, Obstetrics & Gynaecology, University Hospital Waterford, Ireland South Women & Infants Directorate**

Eddie began work as a consultant in Birmingham in 1999, where he completed most of his SHO and Registrar Training. He came to work at University Hospital Waterford in 2001. In addition to his role as Clinical Lead Obstetrics & Gynaecology, Eddie sits on the Hospital Executive Management Team and is a member of Hospital Serious Incident Management (SIM) team and also Chair of the Obstetric Clinical Governance Committee. Eddie is also a Senior Lecturer in Obstetrics and

Gynaecology for Royal College of Surgeons (RCSI) and UCC.

Eddie has a number of areas of key focus including filling two new consultant posts and integrating them into the system. He also aims to set up a fetal assessment unit to reduce reliance on inpatient beds, and to establish outpatient hysteroscopy in University Hospital Waterford (UHW).



**Dr Vijoyashree Hiremath, Clinical Lead Obstetrics & Gynaecology, South Tipperary General Hospital, Ireland South Women & Infants Directorate**

After completing her MBBS and MD (Obstetrics and Gynaecology) in India, Vijoyashree moved to Ireland in 1995. She worked in Limerick, Galway and Dublin as part of the HST. In 2006, she completed her CSCST and was appointed as Consultant in South Tipperary General Hospital (STGH) in March 2007. Since then, Vijoyashree has worked as a lead clinician in STGH in Clonmel and has been part of the executive management team in the hospital before being appointed as the Clinical Lead for Obstetrics and Gynaecology services in South Tipperary General Hospital (STGH) as a part of the Ireland South Women & Infants Directorate.

Vijoyashree leads the perinatal governance group in South Tipperary General Hospital (STGH), and she is involved in the guideline committee, Sepsis group, Drugs and Therapeutics committee, Surgical and Perioperative Directorate.

Vijoyashree is the lead colposcopist in STGH and oversees the safe and quality assured services that it provides. She is also a BST trainer for the Obstetrics and Gynaecology programme and CPSP programme run by RCPI. She is also a GP trainer for the South East GP scheme and a supervising consultant for the final year medical students from UCC, in charge of undergraduate teaching.

In her role as Clinical Lead Obstetrics & Gynaecology, Vijoyashree is focussing on a number of key areas including continuing quality improvements in maternity care with increased patient choice and developing outpatient hysteroscopy services and one stop services for menopause, fertility and menstrual disorders.



**Dr Paul Hughes, Clinical Lead, Obstetrics & Gynaecology, University Hospital Kerry, Ireland South Women & Infants Directorate**

Paul is Clinical Lead for Obstetrics & Gynaecology in University Hospital Kerry (UHK) alongside being Clinical Lecturer in the Department of Obstetrics & Gynaecology in UCC.

Paul has been Chair of the Medical Board in UHK, as well as the Consultant representative on the Blood Transfusion and Theatre Governance committees. He has been a member of the Institute of Obstetrics & Gynaecology Executive Council for eight years and for the last two years has also been Chair

of the Hospital Inspection committee. Paul was Treasurer of the Continence Foundation of Ireland for 10 years and was a member of the Clinical Review Team investigation into maternity services in Portlinculla Hospital.

Paul views his key role as UHK Clinical Lead as a liaison with the other three units in Ireland South Women & Infants Directorate group via the EMC meetings so he can communicate local UHK issues and concerns to the group as well as disseminating information from the group to all the multidisciplinary members of the team in UHK.



**Dr Brendan Murphy, Clinical Lead, Neonatology, Ireland South Women & Infants Directorate**

Brendan has been Consultant Neonatologist in Cork since April 2002. He was Clinical Lead, Neonatology in Unified Maternity & Neonatology Services from 2002-2007 as we worked towards the building and commissioning of CUMH. Subsequently, Brendan was Clinical Lead, Neonatology in CUMH after it opened for 2007 and 2008.

In addition to his Consultant Neonatologist responsibilities, as Clinical Lead, Neonatology, Brendan represents all the members of the healthcare team within the Neonatology Service across the Directorate. His aim is to promote collaboration across the four hospitals/units in the Directorate to foster this unified single team across our academic healthcare network.

Brendan believes that the people within our diverse healthcare team are our most valuable asset. By supporting our team members, harnessing their enthusiasm and expertise along with digitally sharing our guidelines and training across our network and ultimately having a single electronic health record across our four hospitals, we can promote better delivery of healthcare for all mothers, newborns and their families across our region.



**Dr Mairead O'Riordan, Clinical Lead, Quality & Patient Safety, Ireland South Women & Infants Directorate**

Mairead is a UCC graduate, and she completed her undergraduate clinical placement in Erinville Hospital. That experience (combined with an attachment in Zimbabwe) inspired her to do Obstetrics and Gynaecology. She did her initial postgraduate training in Dublin and returned to Erinville Hospital as an SPR and worked with the team to integrate Erinville, St Finbarr's and Cork University Hospital into a Unified Service. Mairead also worked with the team that designed CUMH. She completed her training in Dublin and New Zealand, returning in 2009 as a Consultant/Senior Lecturer in Obstetrics and Gynaecology in CUMH/UCC.

In Mairead's new role, she will work across the four maternity hospitals/units in the Directorate, providing the framework and supports needed to ensure a comprehensive quality and safety programme. Her immediate

focus is to engage with the hospitals/units and services across the Directorate, to work collaboratively with them co-developing quality improvement plans when needed and provide standardisation of care across our services.



**Ms Orfhlaith O'Sullivan, Clinical Lead, Gynaecology, Ireland South Women & Infants Directorate**

Orfhlaith first came to Cork as a Urology Registrar, however she made the decision to switch to Obstetrics & Gynaecology in 2006, due in part to an interest in the procedures that she saw on the Urogynaecology theatre list and the collegial spirit she witnessed daily. The switch involved Orfhlaith becoming a first year SFO in Obstetrics & Gynaecology in Galway. She returned to Cork in 2010 as a first year SPR, returning in July 2014 to be the first ever EUGA/EBCOG Fellow in Urogynaecology in CUMH. Once Orfhlaith finished her SPR training scheme, she remained in Cork as a Consultant in January 2017.

As Clinical Lead, Orfhlaith oversees gynaecology services across Ireland South Women & Infants Directorate, and she seeks to identify areas where improvements can be made to ensure patient safety and to enhance both the patient and staff experience. Orfhlaith's initial focus is on providing safe services during the COVID-19 pandemic and management of the gynaecology waiting list, ensuring that the hard work done in reducing the outpatient

gynaecology waiting list at CUMH is appreciated and maintained for the benefit and safety of our patients.



**Dr Karen McNamara, Clinical Lead, Policies, Procedures & Guidelines, Ireland South Women & Infants Directorate**

Karen joined Cork University Maternity Hospital (CUMH) in 2008 where she spent 2009 working as a first year SHO. She studied for an MSc in Obstetrics & Gynaecology while she worked as a Junior Registrar. In 2014, Karen returned as Senior Registrar and studied for her PhD. She later worked as an SPR and has been a consultant since 2019.

As lead of the PPG Committee, Karen's responsibility is to continuously improve the quality of healthcare within and across the four sites in Ireland South Women & Infants Directorate. Karen is keen to streamline and expedite the creation of Policies, Procedures and Guidelines across the Directorate, avoiding duplication and centralising efforts. In the longer term, she aims to achieve JCI (Joint Commission International) for all four of the hospitals/units in the Directorate.



## Cork Quads turn 18 and visit CUMH

The Murphy quadruplets from Riverstick, Cork came to Cork University Maternity Hospital (CUMH) on their 18th birthday on 22 January 2020, to meet with the doctors and midwives who delivered them. Kellie, Katie, Shauna and Amy Murphy visited, with their parents Patrick and Brenda Murphy. Several of the original team of 45 expert staff, led by Professor John R. Higgins, Consultant Obstetrician and Gynaecologist,

were on hand to celebrate this milestone birthday with them. They had not met the girls since they were very small. The girls were presented with a giant birthday cake and balloons to mark the occasion.

Returning to meet the staff was a moving experience for parents Brenda and Patrick Murphy, who were full of praise for their expertise and support at the time.



## Hand expressing starter pack at UHW

Marie Claire Skehan and Eveleen Dunphy, Lactation Consultants in-training at UHW NICU are passionate about breastfeeding and improving the care of vulnerable neonates in their area. They sometimes found a delay in receiving colostrum in the early hours of life for preterm babies and Marie Claire and Eveleen started to look at ways to make it easy as possible for new mums to get colostrum to them.

simple way of giving a mum all the information and equipment that she needs to get the process of hand expressing started. Having a preterm baby is often a stressful and vulnerable time for new mums and anything that helps alleviate stress is beneficial.

Marie Claire and Eveleen received full support from their managers and all nursing and clerical staff in the unit to get the starter pack on the storeroom shelf in time for National Breastfeeding Week.

A Hand Expressing Starter Pack was developed as a



## UHK go live with MN-CMS for gynaecology services

In late 2019, University Hospital Kerry (UHK) went live with Maternal and Newborn Clinical Management System (MN-CMS) for gynaecology services.

It is now possible to document gynaecology care within the existing MN-CMS electronic record, which has been in use in UHK since March 2017. This extends the benefits already realised in the UHK maternal and newborn services in terms of patient safety, care delivery, and improved patient experience.

UHK is also the first 'University Affiliated Acute General Hospital' in Ireland to use MN-CMS for maternal, newborn and gynaecology services. Clinical leadership from Dr Mary McCaffrey, Dr Niamh Feely, Mairead Griffin, Mairin McElligott and Omana Paul ensured that the local team were well prepared for the go live and they continue to work with all users to support and optimise the use of the system.



## CUMH DOM retires after 41 years

Olive Long, who worked as Director of Midwifery in CUMH retired in early 2020, after 41 years of dedicated, loyal, and professional service. Staff at CUMH offered their deepest gratitude to Olive for her magnificent contribution to maternity services in Cork and the wider region. From student nurse, through to Director of Midwifery Olive has always maintained the highest possible professional standards. She will be missed by the team at CUMH.



## CUMH Gynaecology Waiting List Initiative shortlisted and wins HSE Patient Experience Award

The CUMH Gynaecology Waiting List Initiative won the 'Improving the Patient Experience' Health Service Excellence Award 2020. This award recognises the outstanding achievement by the team at CUMH in reducing the outpatient gynaecology waiting list from 4,700 in 2017 to 1,000 by the end of 2019.

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## Improving GP knowledge of STGH maternity services

The midwifery team at South Tipperary General Hospital (STGH) firmly believe communication with the GPs who refer women to the hospital is essential, leading to better care for patients in general. To improve understanding of the wealth of services offered to maternity patients at STGH, a poster for GP surgeries was developed. The poster highlighted the STGH new dedicated and refurbished early pregnancy assessment unit, and names and contact details for a wide range of specialists including the bereavement support midwife, perinatal mental health midwife,

senior medical social worker, and lactation consultant. Details of the STGH ultrasonography unit, community midwifery services and antenatal classes were also included.

To complement the posters, Janice O'Donoghue, Perinatal Mental Health Midwife visited GP surgeries in Tipperary to talk in detail about maternity services and the care pathways from STGH to CUMH as part of the Ireland South Women & Infants Directorate.



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## First Smoking Cessation Midwife in CUMH

Majella Phelan started as the first Smoking Cessation Midwife in Cork University Maternity Hospital (CUMH) to support pregnant women who currently smoke. Majella is planning to train all staff in the Making Every Contact Count brief intervention programme, to ensure support for pregnant women at every encounter with healthcare professionals. She will be available to women attending CUMH to provide support and will be setting up her own clinic where she will be able to encourage and support women in their attempt to quit.



## Midwifery management day

Senior midwives in the Ireland South Women & Infants Directorate got together for a Directorate wide update at the Marymount auditorium in Cork on 7 February 2020. Presentations were given by Directors of Midwifery, Paula Curtain from UHW, Sinéad Heaney from STGH, Sandra O'Connor from UHK and Acting Director of Midwifery, Katie Bourke from CUMH. It was a welcome opportunity to come together and discuss achievements in 2019 and goals for 2020 as one team.

The theme for 2020 was recruitment and retention: strategies, challenges, solutions. Following

presentations, the midwives got into groups to brainstorm ideas which included a Prep for Nursing/ Midwifery Day for transition year students, similar to the Prep for Med day that currently exists for doctors. Visiting schools was another key idea to showcase the profession and answer questions. Other ideas included communicating and celebrating the diverse role of the midwife and the role of the midwife within the family unit itself. Retention ideas included free wellbeing initiatives and an Ireland South fun run on 5 May, International Day of the Midwife.



## International Day of the Nurse in CUMH

On 12 May, the International Day of the Nurse was celebrated in CUMH.



## 5 May 2020: International Day of the Midwife

To shine a light on midwives and reassure patients, CUMH launched a video on Twitter on International Day of the Midwife featuring two midwives from each of our maternity hospitals/units in Cork, Kerry, Waterford and Tipperary, answering frequently asked questions during the COVID-19 pandemic.

Across the Directorate the special day was celebrated in many ways. For a photo shoot in CUMH, midwives were asked to write on a card what being a midwife means to them. These were then compiled into a photo montage along with photos of colleagues from the other units and shared with staff via YouTube. The cards themselves were hung on display for patients and staff to view.

A video montage was also created featuring CUMH midwives talking about what being a midwife means to them. This was shared via YouTube and Twitter, to celebrate the profession.

In STGH, the day was celebrated with small tokens given to both staff and patients. Every newborn baby in UHK received a certificate signed by their midwife, depicting the special day on which they were born.

In a survey carried out in early 2020, promoting the midwifery profession in national and local press was one of the top actions voted. As a result, we organised a feature in the Irish Examiner featuring midwives from across our maternity units in Ireland South.

## Special Care Baby Unit, UHK welcomes four Neonatal Nurses to Kerry



In February 2020, University Hospital Kerry Special Baby Care Unit welcomed four neonatal nurses to the team. Aiswarya Augustine, Reyma Joseph, Sony Mariam Jibi, and Sandya Surendran, originally from India have many years' experience of working in Level 3 (tertiary) Neonatal units in Dubai and Saudi Arabia.

After arriving, Aiswarya, Remya, Sony and Sandya successfully undertook the RCSI overseas aptitude assessment, which allowed them to register with the Nursing and Midwifery Board Ireland (NMBI). A competency-based orientation programme was developed to assist Aiswarya, Remya, Sony and Sandya adapt to working within the SBCU in UHK. This incorporated a two-week classroom educational programme with educational workshops being facilitated by the multidisciplinary team in UHK.



## National Breastfeeding Week across Ireland South Women & Infants Directorate

Each year during National Breastfeeding Week, all units in Ireland South Women & Infants Directorate raise awareness of the health and wellbeing outcomes of breastfeeding and the importance of supporting mothers to breastfeed for as long as they wish.

A variety of activities and promotions took place in each maternity hospital and online during the week. A video was developed for social media, showcasing staff from each of our four maternity units/hospitals holding breastfeeding messages for expectant mothers. The video was shared on Twitter and YouTube and was well received by the public and staff alike.

## Early Transfer Home Service at UHK

In September 2020, the Early Transfer Home Scheme (ETHS) at University Hospital Kerry (UHK) commenced. The scheme is the first phase in the development of community services within the Maternity Department with the newly formed Community Team consisting of Joann Malik, AMP candidate and Eimear Galvin, Community Midwife. The service was commenced for any well mother with a healthy, full term baby living within 10 miles of the hospital who would like to return home early and receive postnatal care up to day five.



## CUMH Ideas Forum celebrates 2nd birthday

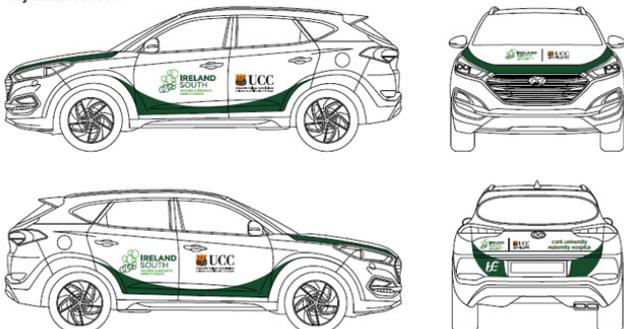
The CUMH Ideas Forum, a staff ideas initiative to effect meaningful change, celebrated its 2nd birthday in early 2020. This forum enables staff to come together to implement their ideas to enhance the patient and staff experience.

The birthday celebration invited staff to not only celebrate the successes

achieved to date, but also outlined the new Lightbulb Club that is being set up to keep change going. The evening was hosted by Úna Cahill, Assistant Director of Midwifery and was very interactive, enabling lots of audience members to speak and share their experience of the challenges involved in bringing about meaningful change in the HSE.



Hyundai Tucson



## Ireland South on the road

Ireland South Women & Infants Directorate is taking the brand on the road. Cork University Maternity Hospital revealed the first branded car, a Hyundai Tucson, on 29 April to staff. The car features the Ireland South brand on the bonnet and sides of the car, with the back of the car featuring the HSE logo and the hospital name. There are now four cars for CUMH, one Hyundai Tucson and three Hyundai i30 Fastbacks.

## Colposcopy quality initiatives in STGH

Two quality colposcopy initiatives were implemented in South Tipperary General Hospital (STGH) towards the end of 2020.

- Sláintecare QUIT Programme/Making Every Contact Count (MECC):** The Sláintecare QUIT team expanded their remit to include colposcopy. Two staff from the Colposcopy Clinic in South Tipperary General Hospital (STGH) underwent the MECC online training and the option for referral to the QUIT programme has now been included on the colposcopy data sheet (history form). STGH have also updated the patient information leaflet to include information or support with stopping smoking and the option for referral. By winter

2020, 26 people had been referred to the QUIT programme, 19 engaged in the service and 5 people successfully quit smoking.

- Cervical screening for staff:** It has always been possible for staff to have their routine screening test (smear) taken in the colposcopy clinic in STGH. However, with the introduction of HPV cervical screening in March 2020, this initiative was formally rolled out to raise awareness about cervical screening amongst all STGH staff members. With this initiative, staff can have their routine screening test while on duty or can opt to have it done in STGH on their day off.



## CUMH Facemask Competition

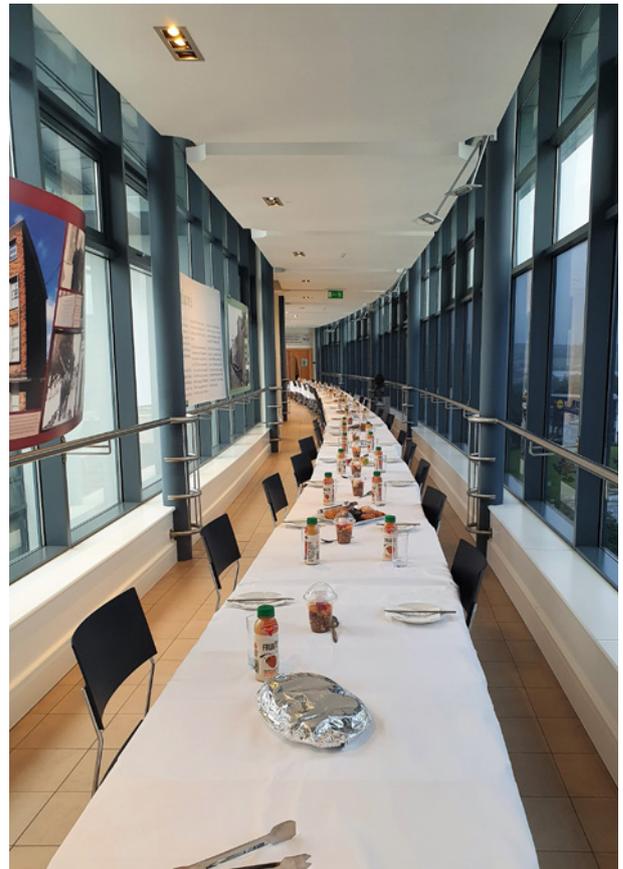
CUMH ran a facemask design competition in May 2020, to acknowledge and celebrate the ingenuity of people in the community at home making masks for family and friends. This story appeared in local press and a poster of staff wearing the mask entries was put up on the ground floor of the hospital.





## Welcoming New Doctors to CUMH in 2020

The tradition of a welcome breakfast on the 5th floor corridor of CUMH returned in July 2020 to mark the new non-consultant hospital doctors (NCHDs) joining the hospital. However, this time around, it was arranged with social distancing in mind due to COVID-19. As a result, there were two sittings for breakfast and the fine spread was well spaced out on a long table that stretched along the long glass corridors on the top floor.



A composite image featuring two promotional materials. The top part is a Zoom meeting title card for 'Inclusion &amp; Diversity Week 2020' on Wednesday, September 2, at 12AM. It features the logos for 'Ospideal Maitheachais na hOllscoile Corcaigh' (Cork University Maternity Hospital) and 'CUH Charity'. The title is 'The Power of Giving' by Rosemary McSweeney and Rachel Cox, in conversation with Dr Emer Ahern, Breda Doyle, Dr Des Murphy, Dr Liam Healy, Prof. John Higgins &amp; Michael Nason. The bottom part is a flyer for the 'Baby Steps Appeal for CUMH NeoNatal' during Inclusion &amp; Diversity Week 2020. It includes a QR code, the event logo, and text explaining the cause: 'Unfortunately some babies do not make it into the world, others are lost due to complications at birth or underlying conditions. There are plans to establish a Sanctum within a courtyard area at the hospital so that parents and families have some comfort and solace at such a tragic time.' It also describes the event: 'Simply sign up once, then walk or run for 30 minutes a day all through September. Choose to track the time daily, weekly or at the end of the month.'

## Apple: Babysteps Appeal for CUMH Neonatal Sanctum

Apple in Cork signed up to do an internal fundraiser in support of the Neonatal Family Sanctum appeal for mothers, babies and families at CUMH. Hundreds of Apple employees raised funds by running, walking or cycling for 30 minutes each day for 30 days in September 2020. The Neonatal Sanctum Appeal aims to build a multifaceted family sanctum in the courtyard of CUMH to benefit mothers, babies and their families going through stressful times due to ill or premature babies. It will feature a private parent's room as well as the sanctum itself, a dedicated space within the central garden of CUMH for parents to take a baby in palliative care. These private places allow for parents to take some time out, away from, yet close to, the busy clinical critical care environment.



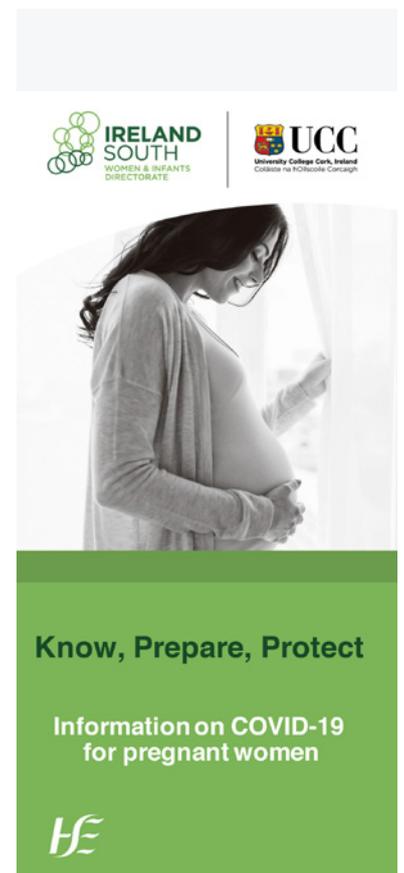
## Domestic Violence and Pregnancy: CUMH conference with national and international experts

The Cork University Maternity Hospital (CUMH) Domestic Violence Biennial Conference took place in the main auditorium of Cork University Hospital (CUH) on 27 February 2020. The conference featured national and international experts in the field of domestic violence, with a particular focus on domestic abuse during pregnancy.

Guest speakers included Sarah Benson, CEO, Women’s Aid, Margo Noonan, Advanced Nurse Practitioner attached to the Sexual Assault Treatment Unit (SATU) at the South Infirmar Victoria University Hospital and Professor Jane O’Callaghan, Director of Child Wellbeing and Protection, University of Stirling, Scotland.

The objective of the conference was to heighten the awareness of domestic violence amongst staff such as public health nurses, social workers, voluntary organisations working in the sector, medical, nursing and health and social care professionals based in CUH and CUMH.

The conference is one example of the importance CUMH place on staff training and awareness in the area of domestic violence. CUMH also undertakes key departmental and staff briefings such as those that tie in with the national campaign, 16 Days of Action in December each year.

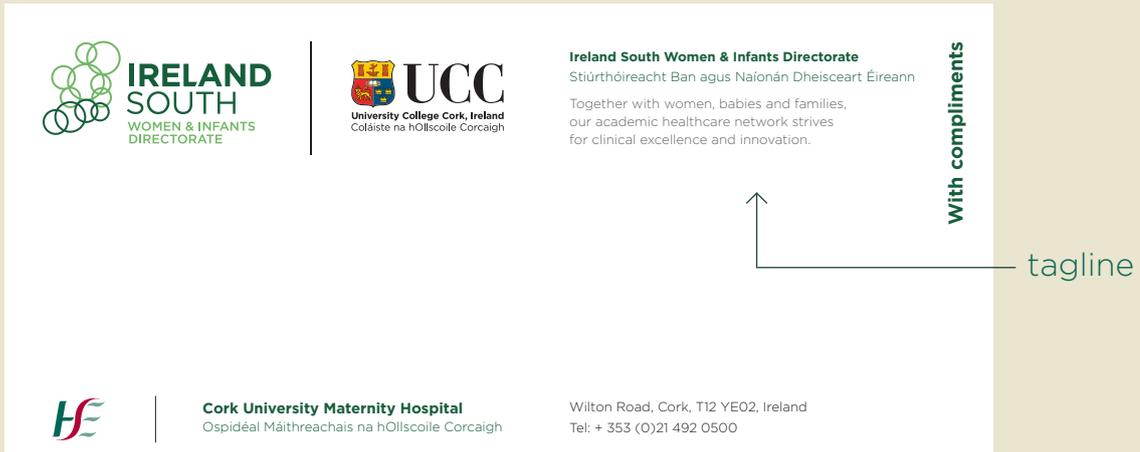


## COVID-19 and pregnancy – microsite launched

In June 2020, Ireland South launched a microsite for patients that outlines key information about COVID-19 and pregnancy. The microsite builds on content in a printed leaflet that has been handed out to patients in CUMH. It’s also mobile friendly, has a sensitive tone and reflects the new brand.



Masthead of Letterhead



Comp slip



Tagline

## New brand tagline for Ireland South Women & Infants Directorate

The tagline for the new brand, Ireland South Women & Infants Directorate was launched early 2020.

The tagline reflects how the network of hospitals collaborate and support one another in providing excellent care with women, babies and their families at the centre. We strive towards an academic health centre model (with UCC as our academic partner), underpinned by clinical excellence, education and research and innovation.

**New templates distributed:** Printed letterheads and complimentary slips and templates for documents, presentations and posters have been rolled out in CUMH.

**Twitter Account Launched:** In early March, CUMH launched a Twitter account @IrelandSouthWID to

keep the public informed of about service changes and provide reassurance in a timely manner. Mindful that expectant mothers are really feeling the effects that this global emergency is having on their pregnancy journey, a video was created featuring midwives answering some of the most frequently asked questions as to what people can expect before, during and after birth.

**YouTube account launched:** A new YouTube account was also launched to house new videos being created. In addition to patient FAQs, videos include Professor John R. Higgins, Clinical Director speaking about visitor restrictions in CUMH, Susan O'Driscoll, Lactation Consultant covering breastfeeding support and Cathy O'Sullivan, Director CME covering online resources during COVID-19 on the CUMH website.



### Water birth seminar in Waterford

The Regional Centre for Nursing and Midwifery Education, HSE South East, hosted Dianne Garland, International Midwifery Expert to facilitate a Water Labour & Water Birth Seminar for south east midwives on 6 February 2020 in University Hospital Waterford (UHW). The event provided midwives with the opportunity to revisit basic midwifery skills. Dianne highlighted the importance of the multidisciplinary team, reflecting and learning from practice and each other, together with the need to encourage women to question their care to bring about choice in maternity services.



### NPEC Study Day 2020

The National Perinatal Epidemiology Centre (NPEC) hosted its annual Study Day in The Kingsley Hotel, Cork on 17 January 2020. The theme of the day was *Investigations into Perinatal Mortality: Considerations and Lessons Learned*.

The event was well attended by delegates from across the country. The programme offered a diverse range of perspectives on the topic of Perinatal Mortality. This included talks from doctors and midwives, as well as a focus on the patients’, parents’, hospital staff’s and coroner’s experience of Perinatal Mortality in Ireland. A panel discussion followed: questions from the delegates were put to the speakers and several pertinent issues were raised. The day included a poster display,

highlighting recent research conducted by the NPEC.

The NPEC was also delighted to showcase “Photovoice” research. The Photovoice Exhibition displayed photos taken by women experiencing complicated pregnancies. The project, developed by the National Perinatal Epidemiology Centre (Dr Sarah Meaney, Dr Sara Leitao and Dr Ria O’Sullivan, UCC), offers an insight into the world of pregnancies with a diagnosis of intrauterine growth restrictions.

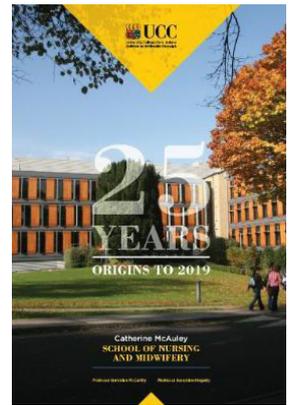
Feedback for the day was entirely positive. The NPEC thanked the speakers for their thought-provoking sessions and the delegates for joining and engaging with the sessions.



## 25 years of Nursing and Midwifery UCC: 1994-2019

The 25-year anniversary of the School of Nursing and Midwifery was celebrated in January 2020 in the Jennings Gallery with an exhibition of images and artefacts from the School's past. The exhibition opening night also served as a launch event for the book 'Catherine McAuley School of Nursing and Midwifery, University College Cork: 25 years - Origins to 2019.' The book was written by Professor Geraldine McCarthy and Professor Josephine Hegarty, with the help of staff at the School of Nursing and Midwifery UCC.

Emeritus Professor Geraldine McCarthy, Founder and first professor of nursing in UCC, gave a speech on the night which brought attendees on a whistle-stop tour of 25 years of nursing and midwifery in UCC.



## UCC DNPHD and MSc Midwifery Graduations

Congratulations to the four midwives who graduated with their MSc Midwifery on 21 February 2020: Alex Campbell, Aisling Murphy, Lisa Collins, and Clare Ryan. On the same day, Dr Mathias Monis graduated with a Doctorate in Nursing (DN) and Dr Maeve O'Connell graduated with a PhD. Congratulations to you all on your well-deserved success.

## Congratulations Professor Keelin O'Donoghue



During 2020 Keelin O'Donoghue was promoted to Professor at UCC – a well-deserved acknowledgement of her hard work in maternity services, education and research. Professor O'Donoghue is a medical graduate of University College Dublin and a Fellow of the Royal College of Obstetrics and Gynaecologists (RCOG), London and the Royal College of Physicians in Ireland (RCPI).

Keelin established and leads the pregnancy loss and fetal medicine clinical services at CUMH and is part of the perinatal medicine team. Keelin's research interests include prenatal diagnosis, fetal anomaly, miscarriage, stillbirth, perinatal palliative care, multiple pregnancy, and qualitative research in clinical obstetrics. She heads the multi-disciplinary Pregnancy Loss Research Group at CUMH/UCC/ INFANT, supervising a large group of postgraduate students with collaborative clinical research in this area. Keelin's research has resulted in over 130 peer-reviewed original papers and more than 300 published conference proceedings. In 2017, she took up the role of National Implementation Lead for the National Standards for Bereavement Care following Pregnancy Loss and Perinatal Death, working within the HSE's NWIHP. This work has led to significant improvements in bereavement care across the country.

For most of us at CUMH – while aware of her academic capacity, we will know her best for her caring approach to patients, none more so than those with poor outcomes, especially those experiencing pregnancy loss. Congratulations to Keelin on her elevation to a well-deserved professorship.

## Success with Aspire Fellowship from NDTP in CUMH

Congratulations to Dr Cathy Burke and Dr Matt Hewitt for their success in securing the 2021 Aspire Fellowship from the National Doctors Training and Planning Unit (NDTP) for post CSCST Fellowship funding.

This significant honour is worth almost €200,000 and will give world class certified subspecialist training to a trainee who has finished the RCPI/IOG scheme for 18 months. A very small number of these fellowships are awarded per year across all medical specialities and only to the very best fellowship programmes. It is fantastic that Obstetrics and Gynaecology has been acknowledged in such a fashion. The successful applicant was named as Dr Alison DeMaio who will start her fellowship in CUMH in July 2021.



## Congratulations to UCC Higher Diploma in Midwifery

Congratulations to our CUMH midwives who successfully completed the Higher Diploma in Midwifery and had their parchment conferring on 23 January 2020 in UCC.

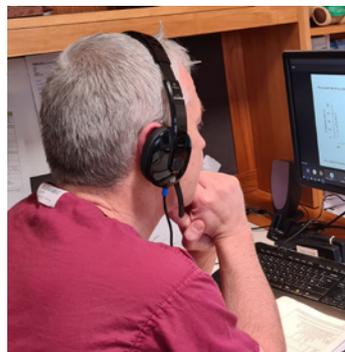


## COVID-19 and CME education

In response to the COVID-19 pandemic, a suite of multidisciplinary education programmes was provided in the Centre of Midwifery Education (CME) CUMH. The roll out of the COVID-19 education programmes ensures that all staff in CUMH have an up to date, COVID-19 skill set focussed on the detection, prevention of transmission, and management of the disease. Sessions are repeated frequently to ensure that education is available to as many staff as possible. Records show that the numbers attending vastly increased since the pandemic began.

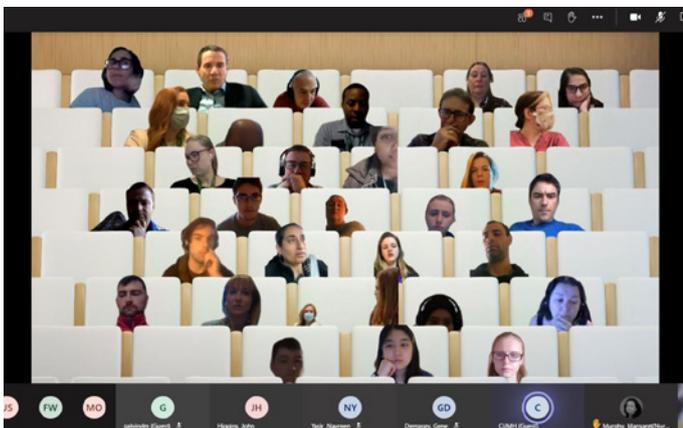
## RAMI Intern Prize awarded to Bryan Traynor, CUMH Intern

Congratulations to Bryan Traynor, intern at CUMH who received a RAMI Intern Prize for the best oral presentation for his final year project 'Non-Invasive Prenatal Testing In Pregnancy In An Irish Cohort.' Bryan's supervisor was Dr Fergus McCarthy, Consultant Obstetrician and Gynaecologist CUMH. Bryan was presented with his prize at the Royal Academy of Medicine in Ireland (RAMI) Study Day on Saturday 1 February 2020 in the Pillar Centre for Transformative Healthcare, Mater Misericordiae University Hospital, Dublin. Interns from across all Irish Intern Training Networks participate annually in this event, showcasing research undertaken during their training year.



## Ireland South Women & Infants Directorate Grand Rounds virtual meetings

Ireland South Women & Infants Directorate Grand Rounds usually takes place in Cork University Hospital Auditorium in front of a live audience and is broadcast via videoconference to University Hospital Kerry (UHK), University Hospital Waterford (UHW) and South Tipperary General Hospital (STGH). Due to COVID-19 related restrictions in 2020, changes were made to the delivery of this meeting and it was brought online. Feedback was positive as the online meeting allowed more flexibility for staff to attend remotely.



The virtual educational meeting took place each week on Friday mornings from 07.30–08.15, during term time and the format remained the same with a short presentation on a topic (20 minutes), followed by critical appraisal of a journal/research article (10 minutes), discussion on a key visual for learning purposes (5 minutes), and a Q & A (10 minutes). At the end of each presentation, the convener Professor John Higgins chaired a questions and answers session to promote audience participation.

## Educational Videos for Parents and Expectant Parents in CUMH

Early in the crisis, CUMH published a number of short educational antenatal videos on the website for online viewing in Summer 2020. These had been created by our sister maternity hospital, UHK and were supplemented by antenatal and postnatal videos featuring CUMH midwives and physiotherapists published in Autumn 2020. All pregnant women attending the hospital were informed of these educational online resources.

The educational videos present a valuable opportunity to build a woman's confidence in her ability to give birth and provide pregnant women and their partners with the knowledge and skills that may assist them during labour, birth, and early parenting during the restrictions of COVID-19.

Visit <https://irelandsouthwid.cumh.hse.ie> to view the full series of 26 educational videos filmed in CUMH.



## UCC's BSc Midwifery students celebrate the completion of their programme

The BSc Midwifery Year 4 interns marked the completion of their programmes symbolically on 18 September 2020 by submitting their year 4 competency booklets, marking the completion of their programme, and receiving a copy of a book which catalogues the 25-year history of the School of Nursing and Midwifery, UCC. We wish to extend our congratulations to all BSc (Hons) Midwifery (2016-2020) students.



## RESEARCH

### Clinical guidance on COVID-19 and maternity practice

The Institute of Obstetricians and Gynaecologists (IOG), the Royal College of Physicians of Ireland (RCPI), the National Women and Infants Health Programme (NWIHP) and the HSE issued guidance on COVID-19 and maternity services in early April 2020. Professor Keelin O'Donoghue, Consultant Obstetrician and Gynaecologist in CUMH is lead author for the IOG/RCPI and HSE/NWIHP on this new clinical guidance on COVID-19 in pregnancy. Professor O'Donoghue worked with Joye McKernan (NPEC, UCC, Cork) to lead a national group of contributors including midwifery, chaplaincy and medical colleagues from CUMH and CUH, as well as contributors from the Rotunda Hospital and the Coombe Women and Infants University Hospital.



### Funding for technology to reduce hospital visits for pregnant women during COVID-19

Research led by Dr Fergus McCarthy, Consultant Obstetrician and Senior Lecturer, Department of Obstetrics & Gynaecology and colleagues at the INFANT Research Centre have been awarded €118,877 in SFI funding in June 2020. The research is for a pilot project that aims to reduce the number of hospital check-up visits for blood-pressure monitoring for pregnant women during the COVID-19 pandemic.



### Impact of COVID-19: INFANT CATePILLaR study

The INFANT Research Centre has started a new study at CUMH led by Professor Eugene Dempsey to learn more about the impact of COVID-19 restrictions on mother and baby's health and wellbeing. Parents of full-term newborns who have delivered or are about to deliver at CUMH during the COVID-19 pandemic will be approached to participate in a longitudinal study of parental and infant health in the COVID-19 era. Restrictions were placed on antenatal and postnatal hospital visits, inpatient hospital visiting, and community follow up care.

Very little research has been done on the effects that COVID-19 and the necessary restrictions may have on the wellbeing of parents and infants. Both the positive and negative impacts COVID-19 restrictions have had on pregnancy, childbirth and subsequent follow up care of infants during COVID-19 are being explored in the CATePILLaR study. The multidisciplinary team includes experts in neonatology, obstetrics, midwifery, nutrition, paediatrics and psychology.



Above left: Academic Lead, Dr Patricia Leahy-Warren, Senior Lecturer, UCC. Above right: Clinical Lead, Ms Sandra O'Connor, Director of Midwifery, UHK

## HRB Funding awarded for study 'Practice Enhancement for Exclusive Breastfeeding (PEEB)'

The School of Nursing & Midwifery Research Group Maternity, Families and Primary Care has been awarded a 2020 HRB Applied Partnership Award (€240,000). The Applied Partnership Awards are designed to bring knowledge users (clinicians) and academic researchers together to develop research projects that address a specific need within the Irish health or social care system. The project addresses a specific need within the Irish healthcare and social care system/service.

The initiative is Practice Enhancement for Exclusive Breastfeeding (PEEB) across the pregnant woman's perinatal journey from first confirmation of pregnancy with GP practice, through the maternity services for antenatal, intranatal and postnatal care and seamless transition to the community, and will include public health nursing, GPs and practice nurse services, maternity services and breastfeeding mothers.

**Lead Researcher:** Academic Lead is Dr Patricia Leahy-Warren (Senior Lecturer, UCC) and Clinical Lead is Ms Sandra O'Connor (Director of Midwifery, UHK).

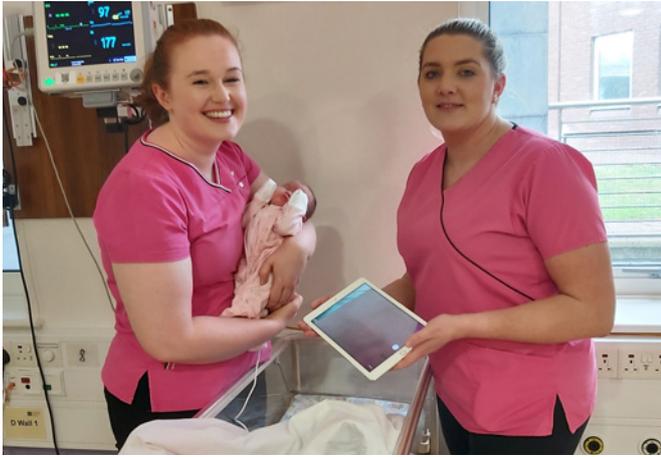
**Team:** From UCC: Dr H Mulcahy; Dr E. Lehane; Dr R. O'Connell; Dr M. Murphy; Ms R. Bradley; Professor C. Bradley; UHK: Ms O. Paul; Dr P Hughes; Dr A. Khan. From HSE: Professor B. O'Sullivan; Ms A. Walsh, Dr E Heffernan; Dr C. Buckley; GP Practice: Dr E. Johnson; Public Health Nursing: Ms H. Sweeney; PPI; Ms M. O'Leary; International Expert: Professor V. Schmied.

[www.ucc.ie/en/nursingmidwifery/research/maternityfamiliesandprimarycare/](http://www.ucc.ie/en/nursingmidwifery/research/maternityfamiliesandprimarycare/)

The aim of this partnership project is to enhance the implementation of evidence-based practice for exclusive breastfeeding throughout the pregnant woman's journey until 3 months postpartum. A multi-pronged approach will be taken to achieve a service where women who choose to exclusively breastfeed feel supported. Such an approach will involve an identification of current practice, training of professionals, facilitation of the transition to enhanced practices and the modification of healthcare environments in line with evidence. Research findings will have a direct impact on the decision-making and will have a significant impact on the health and well-being of women and, their infants and families.



# Neonatology Report



Throughout 2020, Ireland South Women & Infants Directorate continued to provide an extensive Neonatology/Newborn service against the backdrop of the COVID-19 pandemic with all the resultant challenges relating to staff shortages due to illness/self-isolation and how to best continue providing the best possible family-centred care. Throughout the COVID-19 pandemic, notwithstanding the physical constraints related to infrastructure and restrictions within busy acute general hospital setting, across all four neonatal units in the Directorate from the outset we endeavoured to adopt a similar parent-friendly approach to visiting that aimed to include parents as “partners in care” rather than as visitors, while still being cognisant of the importance of protecting all babies and healthcare staff from COVID-19. Additionally, we continued to individualise care around critically ill infants and any infants receiving palliative care to provide as holistic and family-centred care as possible permitting both parents together, and/or key supporting family members, if only for even a brief visit, to support parents/ families at such a key time for them.

Dr Brendan Murphy was appointed as Clinical Lead-Neonatology for Ireland South Women & Infants Directorate in June 2020. This was one of seven Clinical Lead posts that were formally expedited by SSWHG due to the COVID-19 emergency. Each of the remaining three Maternity Centres in the Directorate have Consultant Paediatricians nominated as Clinical Leads for Newborn Care: Dr Robert Kernan in University Hospital Waterford, Dr Daniel Onyekwere in University Hospital Kerry, and Dr John Walsh in South Tipperary General Hospital. Dr Murphy, along with each of the Clinical Leads in Newborn Care rotating through on a quarterly basis, represents the Neonatology healthcare team on the weekly Directorate Executive Management Committee meetings. Additionally, monthly meetings have been established, involving Clinical Lead-Neonatology

and Clinical Leads in Newborn Care across the Directorate, to promote collaboration across the four hospitals to foster this unified single team across the academic healthcare network. Our aim is to expand these monthly meetings to include senior neonatal nursing staff to further promote communication and collaboration across the Directorate.

## CUMH

The CUMH NICU is the tertiary centre within the Directorate accepting babies from South Tipperary General Hospital (STGH), University Hospital Waterford (UHW) and University Hospital Kerry (UHK) for specialised treatments such as ventilation, therapeutic hypothermia and neonatal neurocritical care. CUMH also accept babies requiring neonatal neurocritical care and therapeutic hypothermia from University Maternity Hospital Limerick, and from other areas when required.

### Neonatology Revised OPD Model of Care 2020

Against the background of COVID-19 aiming to achieve the safest environment for patients and healthcare providers, in July 2020 CUMH adapted our OPD Model of Care to reduce footfall within the hospital and optimise social distancing while continuing to provide high quality follow up for infants. The OPD service moved from individual Consultant designated clinics to a team-based approach structured around three differing groups of infants, with the aim of clinics being built around infant and family needs rather than around any one individual designated Consultant Neonatologist.

#### Tuesday

09.00-13.00 **Newborn Clinic**

14.00-17.00 **Newborn Clinic**

Newborn Clinic is for any infant > 35 weeks gestation being offered follow-up following discharge from Postnatal Floors.

#### Wednesday

09.00-13.00 **Neonatology Clinic**

14.00-17.00 **Neonatology Clinic**

Neonatology Clinic is for any later preterm infant (>32 weeks gestation, >1.5kg) being offered follow up following discharge from NNU.

#### Thursday

09.00-13.00 **Neonatal Neurodevelopmental Follow Up (NNFU) Clinic**

14.00-17.00 **Neonatal Neurodevelopmental Follow Up (NNFU) Clinic**

The NNFU clinic is for all VLBW Infants (birthweight < 1.5kg) and/or infants < 32 weeks gestation requiring neurodevelopmental surveillance for up to 2 years corrected gestational age. Infants with moderate and severe neonatal encephalopathy and any other infants requiring multidisciplinary neurodevelopment surveillance and support, are also followed up in the NNFU clinic. In addition to the medical team, NNFU clinics on Thursdays is supported by the wider HSCP team (PT/OT/SLT/Dietetics) to support mothers and infants in one single coordinated visit to all required members of the healthcare team. This approach seeks to enhance real time communication across the wider healthcare team to deliver an improved coordinated approach to the support offered to these infants and their families, with the service working in a coordinated manner around the needs of the infants and their families.

CUMH NICU admitted 1,442 infants in 2020 including 84 very low birth weight (VLBW) infants. The neonatal intensive care unit at CUMH has 25 special care cots, 21 high dependency cots and 6 intensive care unit cots. As a Neonatal Neurocritical Intensive Care Unit, CUMH NICU is the only centre for therapeutic hypothermia outside Dublin.

### **Hypoxic Ischaemic Encephalopathy (HIE)**

During 2020, a total of 23 babies were diagnosed with hypoxic ischaemic encephalopathy (HIE), 17 inborn and 6 transferred in for further evaluation and neurocritical care. There were 6 infants with severe HIE and 12 infants with moderate HIE born in CUMH, all of whom were treated with therapeutic hypothermia. 5 infants were transferred in to CUMH for further evaluation and neurocritical care; 4 of these infants had moderate HIE and received therapeutic hypothermia; the remaining infant had mild HIE. No infant with mild HIE received therapeutic hypothermia in 2020.

### **CUMH Neonatal Nursing Update**

Education and training within the unit continued throughout 2020. A successful Neonatal Study day incorporating developmental care day took place in January in-house followed by Neonatal Resuscitation Training in conjunction with the ASSERT Centre using a High Fidelity "Smart" mannequin in February. Just prior to the onset of lockdown in March 2020 a successful training programme to improve practice in positioning NIV machines to assist in reducing nasal skin breakdowns was completed for all nursing staff within the unit.

From March, with the onset of the COVID-19 pandemic, online education became the prominent way to facilitate courses throughout the rest of the year. Our nursing colleagues adapted to the rapidly changing environment during lockdown,

responding to changes to visiting policy within the unit in response to COVID-19, and continuing to place parents and families at the very centre of their practice. CUMH was the first unit in Ireland to lead on virtual visiting for NICU babies. In April 2020, CUMH introduced a secure video messaging platform in the NICU, in partnership with the INFANT Research Centre at University College Cork. This initiative allowed families to remotely check-in on premature babies amid COVID-19 visiting restrictions and was warmly welcomed by families and the neonatal healthcare team to reduce the impact of lockdown on our parents and families.

We proudly recognised 7 nursing colleagues graduating from their PG Diploma in Neonatal Nursing course in January with another 4 Nurses commencing this course in September run from CUMH in collaboration with UCC. One Nurse completed her MSc in Nursing focusing on the Impact of the Early Onset Sepsis Calculator on admissions to the Neonatal Unit June and another commenced her MSc focusing on discharge planning in September.

In 2020, the Directorate and CUMH were proud to see Professor Eugene Dempsey appointed as the Horgan Chair of Neonatology within the Department of Paediatrics & Child Health UCC, the first Endowed Chair of Neonatology in Ireland. This position is funded jointly by the combination of a generous philanthropic donation, UCC and the HSE SSWHG. Professor Dempsey has made outstanding contributions to our understanding of the care of preterm infants, particularly in the management of hypotension and poor cardiac function. He is an active and excellent clinician and an internationally renowned researcher.

## **University Hospital Waterford**

UHW is the Level 2 centre within the Directorate. It catered for 1,635 births in 2020. In line with the National Neonatal Model of Care, UHW offers inpatient care for neonates  $\geq$  28 weeks gestation, including referrals from Regional Level 1 centres in Wexford General Hospital, St Luke's Hospital Kilkenny and South Tipperary General Hospital. The Neonatal Unit at UHW has 10 NICU and 8 SCBU beds, with 3 isolation rooms and a 1 negative pressure room. The technical skill set available in UHW includes the ability to care for neonates who need ventilator support including nitric oxide inhalation, chest drains, long line insertion with TPN support and the induction of cooling pre-transfer in the setting of HIE. Our team also actively transfers out to Level 3 Neonatology centres and The Children's Heart Centre as clinically indicated, whilst facilitating retro-transfers for step down care of babies who no longer need tertiary centre input. The care of our infants is supported with access to a paediatric dietician, a

physiotherapist, a lactation consultant and a Liaison Perinatal Mental Health CNS. Our department is also supported with collaboration of on-site specialist services, including paediatric radiology for cranial ultrasound screening, paediatric ophthalmology for ROP screening and paediatric orthopaedics through the Regional DDH clinic.

**Dr Robert Kernan,**  
**Clinical Lead in Newborn Care, UHW**

### University Hospital Kerry

The Neonatal service in UHK is a Level 1 neonatal service which includes a 10 bedded special care baby unit with facilities to care for, stabilise and ventilate up to 2 critically ill babies. There are 2 HDU cots in the unit, run by a highly motivated baby and family friendly neonatal nursing team.

There has been a huge improvement in nursing and medical personnel recruitment with the retention of 5 new neonatal nurses and 4 permanent paediatric consultants in the last 1-2 years. The team at UHK engages in robust clinical educational activities with weekly neonatal resuscitation simulation as well as taking part in weekly maternity and quarterly Perinatal Morbidity and Mortality meetings. UHK also supports the ongoing education of UCC medical students and nurses.

Positive feedback from parents reflects our patient-centred healthcare service. We are proud to be part of the SSWHG network providing essential services to the community.

**Dr Daniel Onyekwere,**  
**Lead in Newborn Care, UHK**



### South Tipperary General Hospital

2020 was a challenging year for our Neonatal services in trying to maintain staffing and services for infants. To a great extent, infants were largely unaffected by COVID-19 infection. Although staffing was maintained throughout, staffing of our Special Care Baby Unit (SCBU) was a challenge in March and April as a number of nurses and doctors tested positive for Covid 19 and were unable to work for 2 weeks.

Birth numbers decreased in 2020 with fewer admissions to SCBU subsequently. Less preterm deliveries were noted as with many other units.

Mothers have been allowed to visit their infants in SCBU but with some restricted time on the visits. Fathers were not allowed to visit infants in SCBU unless in extreme circumstances such as end of life care. This remains the case to date.

Neonatal follow-up clinics were postponed from mid-March with telephone clinics held in April and May. Face to face clinics recommenced in late May in a separate building on the hospital campus particularly for the neonatal follow up of infants with higher risk of developmental dysplasia of the hip (DDH), many of whom had their screening 6 week hip ultrasounds cancelled due to cancellation of non-urgent radiology services. All such infants were seen and examined by a Consultant Paediatrician at a dedicated clinic instead of the 6 week hip ultrasound and had their normal 6 month hip x-rays completed subsequently as per South East DDH guidelines.

2020 has shown that all services for infants and children must be maintained despite considerable restrictions on adult services, and that in future such restrictions should include a specific section for infants and children.

**Dr John Walsh,**  
**Clinical Lead in Newborn Care, STGH**



**Table 1.0: Number of admissions to the Neonatal Unit by year**

Year	(N)
2020	1442

**Table 1.1: Infants admitted to NNU by gestational age groups**

Gestation (weeks)	(N=1442)
< 32	106
32 - 36	337
37 or greater	999

**Table 1.2: Infants admitted to NNU by birthweight**

Birthweight (grams)	(N=1442)
≤1500g	86
1501 - 2500	243
≥ 2501	1113

**Table 1.3: Reason for admission to NNU**

Category	
Prematurity	259
Respiratory	359
Gastrointestinal	425
Infection related	112
Neurological	152
Low birth weight	8
Congenital abnormality	50
Cardiac	47
Others	30

## CUMH VON Very Low Birthweight Infants (VLBW)

**Table 2.0: Born to the Neonatal Unit**

Year	(N)
2020	84

**Table 2.1: Number of CUMH VON VBLW**

Year	(N)
2020	84
2019	71
2018	86
2017	79
2016	91

**Table 2.2: Gestational age of CUMH VON VLBW infants admitted to NNU**

	(N=84)
23 - 23 + 6	4
24 - 26 + 6	28
27 - 29 + 6	21
30 - 31 + 6	24
>32	7

**Table 2.3: Birthweight of CUMH VON VLBW infants admitted**

	(N=84)
<501	2
501 - 750	17
751 - 1000	22
1001 - 1250	18
1251 - 1500	25

**Table 2.4: Additional clinical demographics of CUMH VON VLBW infants**

Measure	2020 N=84 (%)
Inborn	77 (91.7)
Male	46 (54.8)
Prenatal Care	82 (97.6)
Chorioamnionitis	11 (13.1)
Maternal Hypertension	18 (21.4)
Antenatal Steroids	78 (92.9)
C-Section	61 (72.6)
Antenatal Magnesium Sulphate	70 (83.3)
Multiple Gestation	28 (33.3)
Congenital Malformation	6 (7.1)
Small for Gestational Age	16 (19.0)

**Table 2.5: Summary of respiratory support for CUMH VON VLBW infants**

Intervention	2020 N=84 (%)
Intubation in delivery suite	40 (47.6)
Surfactant (in delivery suite)	37 (44.0)
Surfactant (at any time)	57 (67.9)
Mechanical Ventilation	48 (57.1)
High Frequency Ventilation	13 (15.5)
CPAP (at any time)	69 (82.1)
Initial CPAP and subsequent intubation	12 (14.3)
Nitric Oxide	7 (8.3)

**Table 2.6: Major morbidities amongst CUMH VON VLBW infants admitted to NNU**

	2020 N=83 (%)
Mortality	9/81 (11.1)
Admission temperature < 36°C	9/83 (10.8)
Pneumothorax	3/83 (3.6)
Oxygen at 28 days	40/65 (61.5)
Oxygen at 36 weeks CGA	25/53 (47.2)
Postnatal steroid therapy	14/83 (16.9)
Home oxygen	4/50 (8.0)
Ibuprofen for PDA	12/83 (14.5)
PDA ligation	1/83 (1.2)
NEC	2/83 (2.4)
NEC surgery	1/83 (1.2)
Coagulase negative Staph. in blood culture	8/78 (10.3)
Fungal infection	0/78 (0.0)
Grade 3 or 4 IVH	9/79 (11.4)
Cystic PVL	2/79 (2.5)
Neurosurgery	2/83 (2.4)
Retinopathy of prematurity (any stage)	17/68 (25.0)
Retinopathy Surgery	2/83 (2.4)

**Table 2.7: Total cases with encephalopathy**

	(N)	CUMH
Total encephalopathy	31	
Total cooled	23	17 inborn 6 outborn
Inborn HIE	18 (16 cooled)	6 severe
		10 moderate
		2 mild
Outborn HIE	5 (4 cooled)	4 moderate
		1 mild (not cooled)
Encephalopathy (other causes)	8 (2 out born)	3 cooled: 1 inborn 2 outborn



# Obstetrics Report

## Maternal and Delivery Characteristics

**Table 3.0: Frequency (N) of maternities and births 2014-2020**

	Ireland South	CUMH	STGH	UHK	UHW
<b>Mothers delivered 2020</b>	<b>10,398</b>	<b>6,876</b>	<b>771</b>	<b>1,141</b>	<b>1,610</b>
Mothers delivered 2019	10,773	7,023	875	1,177	1,698
Mothers delivered 2018	11,359	7,401	960	1,230	1,768
Mothers delivered 2017	11,354	7,224	979	1,349	1,802
Mothers delivered 2016	11,745	7,442	1,017	1,389	1,897
Mothers delivered 2015	12,343	7,903	1,054	1,389	1,997
Mothers delivered 2014	12,473	7,878	1,434	1,087	2,074
<b>Babies born &gt;500g 2020</b>	<b>10,612</b>	<b>7,040</b>	<b>782</b>	<b>1,155</b>	<b>1,635</b>
Babies born >500g 2019	11,010	7,204	885	1,193	1,728
Babies born >500g 2018	11,601	7,577	969	1,254	1,801
Babies born >500g 2017	11,577	7,386	982	1,368	1,841
Babies born >500g 2016	12,011	7,629	1,032	1,410	1,940
Babies born >500g 2015	12,620	8,113	1,062	1,406	2,039
Babies born >500g 2014	12,746	8,071	1,454	1,102	2,119

**Table 3.1: Distribution of maternal and delivery characteristics**

	Ireland South Frequency N (%) (N=10,398)	CUMH Frequency N (%) (N=6,876)	STGH Frequency N (%) (N=771)	UHK Frequency N (%) (N=1,141)	UHW Frequency N (%) (N=1,610)
Nulliparous	4,165 (40.0)	2,900 (42.2)	284 (36.8)	410 (35.9)	571 (35.5)
Multiparous	6,233 (60.0)	3,976 (57.8)	487 (63.2)	731 (64.1)	1,039 (64.5)



**Table 3.2: Distribution of maternal and delivery characteristics - Vaginal delivery**

	Ireland South Frequency N (%) (N=10,398)	CUMH Frequency N (%) (N=6,876)	STGH Frequency N (%) (N=771)	UHK Frequency N (%) (N=1,141)	UHW Frequency N (%) (N=1,610)
Vaginal Delivery (Total)	6,622 (63.6)	4,366 (63.50)	442 (57.3)	660 (57.8)	1,154 (71.68)

**Table 3.3: Distribution of maternal and delivery characteristics - Instrumental delivery**

	Ireland South Frequency N (%) (N=10,398)	CUMH Frequency N (%) (N=6,876)	STGH Frequency N (%) (N=771)	UHK Frequency N (%) (N=1,141)	UHW Frequency N (%) (N=1,610)
Instrumental Delivery (Total)	1,631 (15.6)	1070 (15.5)	93 (12.0)	195 (17.0)	273 (16.96)
Instrumental Delivery nulliparas (% of total nulliparas births)	1,201 (28.8)	814 (28.1)	62 (21.8)	129 (31.46)	196 (34.3)
Instrumental Delivery multiparas (% of total multiparass births)	430 (7)	256 (6.4)	31 (6.3)	66 (9.0)	77 (7.4)

**Table 3.4: Induction of labour characteristics**

	Ireland South Frequency N (%) (N=10,398)	CUMH Frequency N (%) (N=6,876)	STGH Frequency N (%) (N=771)	UHK Frequency N (%) (N=1,141)	UHW Frequency N (%) (N=1,610)
Inductions of labour (Total)	3,810 (36.6)	2,718 (39.5)	204 (26.4)	308 (26.9)	580 (36.0)
Inductions nulliparas (% of total nulliparas births)	1,828 (43.8)	1,322 (45.5)	100 (35.2)	148 (36.1)	258 (45.1)
Inductions multiparas (% of total multiparas births)	1,982 (31.7)	1,396 (35.1)	104 (21.3)	160 (21.8)	322 (30.9)

**Table 3.5: Incidence of caesarean delivery per total mothers delivered, 2020**

	Ireland South Frequency N (%) (N=10,398)	CUMH Frequency N (%) (N=6,876)	STGH Frequency N (%) (N=771)	UHK Frequency N (%) (N=1,141)	UHW Frequency N (%) (N=1,610)
Caesarean delivery	3,766 (36.2)	2,510 (36.5)	329 (42.6)	481 (42.1)	456 (28.3)
C-sections nulliparas (% of total nulliparas births)	1,596 (38.3)	1,121 (38.6)	130 (45.7)	185 (45.1)	160 (28.0)
C-sections multiparas (% of total multiparas births)	2,180 (34.9)	1,389 (34.9)	199 (40.8)	296 (40.4)	296 (28.4)

**Table 3.6: Distribution of labour epidurals**

	Ireland South Frequency N (%) (N=10,398)	CUMH Frequency N (%) (N=6,876)	STGH Frequency N (%) (N=771)	UHK Frequency N (%) (N=1,141)	UHW Frequency N (%) (N=1,610)
Labour Epidurals	4,177 (40.1)	2,761 (40.1)	259 (33.5)	356 (31.2)	801 (49.7)

**Table 3.7: Distribution of obstetric blood transfusions**

	Ireland South Rate per 1000 (N) (N=10,398)	CUMH Rate per 1000 (N) (N=6,876)	STGH Rate per 1000 (N) (N=771)	UHK Rate per 1000 (N) (N=1,141)	UHW Rate per 1000 (N) (N=1,610)
Obstetric Blood Transfusions	324 (31.1)	207 (30.1)	23 (29.8)	23 (20.1)	71 (44.1)

**Table 3.8: Inutero transfers admitted**

	Ireland South (N=10,398)	CUMH (N=6,876)	STGH (N=771)	UHK (N=1,141)	UHW (N=1,610)
Inutero transfers admitted	31	23	0.0	0.0	8

**Table 3.9: Inutero transfers sent out**

	Ireland South Rate per 1000 (N) (N=10,398)	CUMH Rate per 1000 (N) (N=6,876)	STGH Rate per 1000 (N) (N=771)	UHK Rate per 1000 (N) (N=1,141)	UHW Rate per 1000 (N) (N=1,610)
Inutero transfers sent out	19	0.0	6	9	4

**Table 4: Total clinical incidents as reported to NIMS**

	Ireland South	CUMH	STGH	UHK	UHW
Clinical Incidents	3,543	2,734	139	290	380

## Maternal Mortality

Maternal mortality is a devastating outcome for a family left without their mother/daughter/partner. Maternal deaths have a significant effect on the staff also. There was one case of maternal mortality in Ireland South Women & Infants Directorate. This case is currently under review with the coroner.

### Definition and classification of maternal death

A maternal death is the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and the site of the pregnancy\*, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes.

Maternal deaths are subdivided into two groups, direct and indirect obstetric deaths.

\*This includes delivery, ectopic pregnancy, miscarriage or termination.

Complications of pregnancy or childbirth can lead to death beyond the 6 weeks' postpartum period and are classified as a late maternal death.

### Classification of maternal deaths

- **Direct obstetric deaths:** direct obstetric deaths are those resulting from obstetric complications of the pregnancy state (pregnancy, labour and the puerperium), from interventions, omissions, incorrect treatment, or from a chain of events resulting from any of the above.
- **Indirect obstetric deaths:** indirect obstetric deaths are those resulting from previous existing disease or disease that developed during pregnancy and which was not due to direct obstetric causes, but which was aggravated by physiologic effects of pregnancy.
- **Coincidental maternal deaths:** deaths from unrelated causes which happen to occur in pregnancy or the puerperium
- **Late maternal deaths:** the death of a woman from direct or indirect obstetric causes, more than 42 days, but less than 1 year after termination of pregnancy.

### Reference:

International Classification of Diseases, 10th Revision, Geneva, World Health Organization, 2004

## Perinatal Mortality

**Table 5.0: Perinatal deaths\***

Perinatal deaths	Ireland South (N=10,612)	CUMH (N=7,040)	STGH (N=782)	UHK (N=1,155)	UHW (N=1,635)
Stillbirths	42	32	3	2	5
Early neonatal deaths	19	15	1	0	3
Late neonatal deaths	5	4	0	0	1

**Stillbirth:** Baby delivered without signs of life from 24 weeks gestation or with a birthweight  $\geq 500g$ .<sup>2</sup>

**Early neonatal death:** Death of a live born baby occurring within 7 completed days of birth.

**Late neonatal death:** Death of a live born baby occurring after the 7th day and within 28 completed days of birth.

\*As used by the National Perinatal Epidemiology Centre

<sup>2</sup>Stillbirths Registration Act, 1994.

**Table 5.1: Perinatal mortality rates**

	Ireland South (N=10,612)	CUMH (N=7,040)	STGH (N=782)	UHK (N=1,155)	UHW (N=1,635)
Overall perinatal mortality rate per 1000 births	5.7	6.7	5.1	1.7	4.8
Perinatal mortality rate corrected for congenital anomalies	3.6	3.8	5.1	0.9	4.2
Stillbirth rate per 1000 births	4.0	4.5	3.8	1.7	3.1
Stillbirth rate corrected for congenital anomalies	2.5	2.6	3.8	0.9	3.1
Early neonatal death rate per 1000 births	1.9	2.1	1.3	0.0	1.8
Early neonatal death rate corrected for congenital anomalies	1.1	1.1	1.3	0	1.2

All infants weighing 500g and/or over 24 weeks' gestation are reported.  
All mothers who booked and delivered are included.

## Perinatal Pathology

Overall autopsy rate for Stillbirths and Early Neonatal Deaths is 64%

## Case Reviews

**Table 5.2: CUMH case reviews – Stillbirths**

Gestation (Wks.)	BW (g)	Mode of delivery	Conclusion
26+1	960	SVD	Infection
24+1	800	SVD	Congenital Anomaly
38+6	2280	SVD	Placental cause
24+2	360	SVD	Congenital Anomaly
31+5	1820	SVD	Antepartum Haemorrhage
30+5	870	SVD	Congenital Anomaly
33+4	2310	C-Section	Specific Fetal
36+0	2130	SVD	Congenital Anomaly
38+3	3260	SVD	Congenital Anomaly
35+4	320	C-Section	Specific Fetal
40+1	3600	SVD	Placental cause
22+2	520	SVD	Infection
36+0	4780	C-Section	Maternal Disorder
37+5	1860	SVD	Congenital Anomaly
23+2	690	SVD	Congenital Anomaly
36+1	2640	SVD	Specific Fetal
26+6	800	SVD	Congenital Anomaly
38+0	3380	C-Section	Placental cause

Table 5.2 continued on following page

25+4	500	SVD	Specific Fetal
25+4	440	SVD	Specific Fetal
31+6	1360	SVD	Congenital Anomaly
37+3	107	C-Section	Specific Fetal
38+6	3250	SVD	Placental cause
26+3	450	SVD	Congenital Anomaly
40+1	2650	SVD	Congenital Anomaly
25+1	610	SVD	Placental cause
40+0	3550	SVD	Antepartum Haemorrhage
32+0	1092	EI C/S	Congenital Anomaly
25+2	450	SVD	Congenital Anomaly
28+6	1200	SVD (Breech)	Congenital Anomaly
25+2	Unknown	SVD	Placental cause
34+0	2700	SVD	Placental cause

**Table 5.3: CUMH case reviews - Early neonatal deaths**

GA	BW (g)	Age (days)	Cause of Death	Place
24+3	760	1	Pulmonary Haemorrhage	Cork University Maternity Hospital
41	4070	0	Hypoxic Ischemic Encephalopathy	Cork University Maternity Hospital
33+1	2470	1	Hypoxic Ischemic Encephalopathy	Cork University Maternity Hospital
32+2	1300	0	Multiple congenital abnormalities	Cork University Maternity Hospital
39+6	3340	1	Congenital Heart Disease	Our Lady's Children's Hospital
35+5	2040	1	Congenital Anomaly-Alveolo-Capillary Dysplasia	Cork University Maternity Hospital
38+4	2560	0	Major Multiple Congenital Abnormalities	Cork University Maternity Hospital
23+6	610	0	Chorioamnionitis	Cork University Maternity Hospital
39+1	3400	4	Abruption Placenta	Cork University Maternity Hospital
40+2	3700	0	Awaiting Coroner	Cork University Maternity Hospital
25+5	820	1	PROM	Cork University Maternity Hospital
34+3	1100	0	Pulmonary Hypoplasia	Cork University Maternity Hospital
38+5	3380	0	Severe HIE	Cork University Maternity Hospital
27+0	800	2	Prematurity	Cork University Maternity Hospital
33+0	2050	0	Achongrogenesis / A secondary to TRIP II variant mutation	Cork University Maternity Hospital

**Table 5.4: CUMH case reviews - Late neonatal deaths**

BW (g)	Age (days)	Cause of Death	Place
780	26	Chorioamnionitis precipitating Preterm Delivery	Cork University Maternity Hospital
2600	9	Congenital Metastatic Neuroblastoma	Children's Health Ireland (CHI) Crumlin
1090	26	Congenital Anomaly - respiratory system	Children's Health Ireland (CHI) Crumlin
1840	6	Trisomy 18	UHK

**Table 5.5: STGH case reviews - Stillbirths**

Gestation (Wks.)	BW (g)	Mode of delivery	Conclusion
37+0	2600	C-Section	Awaiting PM report
35+3	2108	SVD	Spontaneous massive fetomaternal haemorrhage
36+5	2500	SVD (Breech)	Chronic Chorioamnionitis

**Table 5.6: STGH case reviews - Early neonatal deaths**

GA	BW (g)	Age (days)	Cause of Death	Place
37+6	3450	2	Hypoplastic left heart	Our Lady's Children's Hospital

**Table 5.7: UHK case reviews - Stillbirths**

Gestation (Wks.)	BW (g)	Mode of delivery	Conclusion
26+0	1140	SVD	Congenital Anomaly
37+4	2320	SVD	Awaiting PM report

**Table 5.8: UHK case reviews - Late neonatal deaths**

BW (g)	Age (days)	Cause of Death	Place
1840	8	Trisomy 18	UHK

**Table 5.9: UHW case reviews - Stillbirths**

Gestation (Wks.)	BW (g)	Mode of delivery	Conclusion
36 +4	2485	SVD	Abruption
36+4	4090	C Section	Unexplained (Diabetic mother)
Uncertain approx. 38 weeks	2860	Forceps	Unclassified
39+1	3650	SVD	Feto-maternal haemorrhage
39	2895	SVD	Unclassified

**Table 5.10: UHW case reviews – Early neonatal deaths**

GA	BW (g)	Age (days)	Cause of Death	Place
39+1	-	-	Polycystic Kidneys	UHW
27+5	-	-	Prematurity	UHW
23+3	620	-	Prematurity	UHW

**Table 5.11: UHW case reviews – Late neonatal deaths**

BW (g)	Age (days)	Cause of Death	Place
2660	19	Patou	Children's Health Ireland (CHI) Crumlin

**Table 6: Severe maternal morbidity**

Organ Dysfunction SMM	Ireland South Frequency N (%) (N=10,398)	CUMH Frequency N (%) (N=6,876)	STGH Frequency N (%) (N=771)	UHK Frequency N (%) (N=1,141)	UHW Frequency N (%) (N=1,610)
Major obstetric haemorrhage (MOH) Estimated blood loss $\geq$ 2500mls Transfused with $\geq$ 5 units of blood	38	24	2	7	5
Uterine rupture	1	1	0	0	0
Peripartum hysterectomy (PH)	3	2	0	1	0
Eclampsia	0	0	0	0	0
Renal or liver dysfunction	7	6	0	0	1
Pulmonary oedema	1	1	0	0	0
Acute respiratory dysfunction	3	3	0	0	0
Pulmonary embolism	9	7	1	0	1
Cardiac arrest	2	1	0	0	1
Coma	2	2	0	0	0
Cerebro-vascular event	1	1	0	0	0
Status epilepticus	7	6	1	0	0
Anaesthetic problem	0	0	0	0	0
Other severe morbidity	23	11	0	12	0
<b>SMM based on management criteria</b>					
Interventional radiology (IR)	1	1	0	0	0
ICU/CCU admission	23	7	6	7	HIDU x 2 ICU x 1

# Gynaecology Report

During 2020, Ireland South Women & Infants Directorate continued to provide extensive gynaecology services to the women of our region. However, the COVID-19 pandemic had a severe impact on the provision of services across the Directorate. Non-urgent clinics and theatre services had to be cancelled for a number of months during 2020 leading to waiting lists climbing once more. At the start of March, the gynaecology waiting list at CUMH was at an all-time low, but due to disruption of services caused by COVID-19, it started to climb again. From August onwards, the scheduling of additional clinics and tireless work by the team at CUMH ensured the waiting list was reduced again.

Outside of waiting lists, COVID-19 presented many challenges to gynaecological services across Ireland South. The multidisciplinary teams across our four hospitals/units worked innovatively and collaboratively to deliver gynaecology services in the safest way possible. Ways of working had to be altered and protocols put in place to reduce the risk of transmitting COVID-19 in our hospitals/units. The necessary safety precautions sometimes presented their own challenges. Maintaining social distances compounded existing issues around available space, particularly in outpatient departments.

General and specialist gynaecology care is provided throughout Ireland South Women &

Infants Directorate. Gynaecology clinics are run at the four main hospital sites as well as at outreach clinics in different areas. More specialised areas such as urogynaecology, colposcopy, oncology and ambulatory services, which include outpatient hysteroscopy and cystoscopy, are also provided.

## **CervicalCheck controversy**

The CervicalCheck controversy continued to impact staff morale in colposcopy clinics across the Directorate in 2020, as it did throughout the colposcopy service nationally. Clinics were also affected by the COVID-19 pandemic but overall managed to continue seeing patients within the programme standard informed guidelines. The 2018 screening crisis has impacted on recruitment and retention of staff in the area of cervical screening. Work is underway to address succession planning in this important area. The clinics are working with gynaecological colleagues in each of the units to ensure that women with symptoms are seen in general gynaecology clinics in order to ensure that colposcopy clinics have capacity to see the 40% increase in screen positive women that are due to be referred due to screening changing to HPV primary screening.

The range of general and specialist services and clinics offered at the four main hospital sites are outlined in this report.



# CUMH gynaecology services

Outpatient gynaecology services in Cork City are provided at CUMH and South Infirmary Victoria University Hospital (SIVUH) and across a number of outreach clinics in Primary Care Centres (PCCs) including Mitchelstown PCC, Mallow PCC and Carrigaline PCC. The Mallow, Mitchelstown and Carrigaline gynaecology clinics are operated in partnership with local GP surgeries and are proving to be an effective way of providing gynaecology services in the community. Bantry General Hospital and South Tipperary General Hospital also play host to CUMH staff to provide gynaecology services.

In addition to general gynaecology services, specialised care is also provided. These include: endometriosis, fertility, oncology, post-menopausal bleeding and urogynaecology.

Currently, weekly fertility clinics are run at CUMH. Funding was received in 2020 to set up a Regional Fertility Hub and plans are advancing to launch this new regional service in Cork in 2021. This was following the long awaited and welcome commitment by government in 2019 to publicly fund a model of care for infertility in Ireland.

During 2020, the CUMH dedicated ambulatory gynaecology suite was expanded to ensure the service runs 5 days a week to meet demand levels. This expansion was enabled by funding provided by the National Women & Infants Health Programme (NWIHP).

At CUMH there is a specialised Urogynaecology suite providing urodynamics, perineal clinic, pessary management, intravesical treatments, ambulatory cystoscopy and continence advice. In 2020, with the aim of setting up a National Mesh Complications Service, (one of two dedicated centres in Ireland, the other located at the National Maternity Hospital, Dublin) funding was received from the National Women and Infants Health Programme (NWIHP).

The colposcopy service is run from the St Finbarr's Hospital campus, providing smears and a colposcopy service for women who have abnormal cervical smears. These services form part of the national CervicalCheck screening programme.

Chartered physiotherapists in CUMH specialise in the area of women's health and offer individualised assessment and treatment for a number of complex gynae conditions. Where appropriate, patients are also referred on to pelvic health physiotherapy services in the community.

Traditionally, most gynaecology surgeries were done in CUMH, SIVUH and CUH. Some minor procedures

are also performed in Bantry General Hospital. However, with changes to the service agreement, additional gynaecology surgeries took place in the Bon Secours Hospital Cork in 2020.

The team at CUMH went to extraordinary efforts during 2019 and 2020 to reduce the gynaecology outpatient waiting list number. As a result, the list reached an all-time low in early March 2020 of 922 patients waiting for a first-time clinic appointment. This was down from a high of almost 4,700 just 3 years previous.

March 2020 saw the arrival of COVID-19 which severely impacted the gynaecology services. All non-urgent gynaecology clinics and theatre sessions were cancelled for 4 months during the year. During this time due to public/private partnership urgent and cancer-related surgeries were performed in the Bon Secours Hospital Cork by CUMH staff.

In July 2020 CUMH routine gynaecology theatre lists gradually resumed once the first wave of COVID-19 subsided. At this time clinics gradually recommenced. Necessary reviews were done in a controlled manner to ensure patient and staff safety within COVID-19 NPHET advice. The team worked tirelessly from August to December 2020 putting on additional clinics to reduce the waiting list backlog built up since March due to COVID-19.

CUMH was fortunate to avail of critical theatre time at the Bon Secours Hospital, Cork under the HSE agreement with the private hospitals and completed 327 gynaecology cases there from March to June 2020. An additional 86 CUMH gynaecology cases were completed at the Bon Secours Hospital in July 2020 through an initiative funded by the National Treatment Purchase Fund (NTPF).

At the end of 2020, the waiting lists in CUMH stood at:  
- Outpatients: 1,033  
- Inpatient/ day cases: 843

## CUMH: Key achievements in gynaecology in 2020

- **Providing safe and effective care to gynaecology patients during COVID-19**

The team at CUMH provided safe and effective care to gynaecology patients during the COVID-19 global pandemic. Ways of working had to be altered and additional protocols put in place at short notice to minimise the risk of COVID-19 transmission at CUMH.

- **Operating on 400 gynaecology patients at the Bons Secours Hospital, Cork**

CUMH was fortunate to avail of critical theatre time at the Bons Secours Hospital, Cork under the HSE agreement with the private hospitals, completed 327 gynaecology cases there from March to June 2020. An additional 86 CUMH gynaecology cases were completed at the Bons Secours Hospital in July 2020 through an initiative funded by the National Treatment Purchase Fund (NTPF).

- **Reducing the gynaecology outpatient waiting list backlog by the end of 2020**

The team at CUMH worked tirelessly from August to December 2020 to eliminate the outpatient waiting list backlog built up since March 2020 due to COVID-19 and resulting clinic cancellations. The waiting list was at an all-time low of 922 at the start of March 2020 but climbed to 1,700 by August 2020. Additional clinics were scheduled at CUMH and the waiting list was reduced back down to 1,033 by the end of 2020. Achieving such a remarkable reduction in the gynaecology waiting list in such a short time required a lot of hard work and dedication of multidisciplinary staff. It also wouldn't have been possible without the support of the South/South West Hospital Group leadership team, the National Women & Infants Health Programme and the National Treatment Purchase Fund (NTPF).

- **Securing additional funding to expand gynaecology and fertility services in Ireland South**

CUMH received funding during 2020 through the National Women & Infants Health Programme to develop services for women in the region:

- Expansion of ambulatory gynaecology service at CUMH from 2 days per week to 5 days per week through funding additional staffing and upgrade of facilities at CUMH.
- Set up of a new Regional Fertility Hub in Cork to serve Ireland South.
- Set up a National Mesh Complications Service one of two dedicated centres in Ireland (the other located at the National Maternity Hospital, Dublin).

- **Launching a new tracking and monitoring system for postmenopausal bleeding (PMB) patients**

A new system was implemented at CUMH in October 2020 to track and monitor PMB patient appointments from GP referral to discharge. This was done using a central database to record the information which is reviewed at the monthly MDT meeting where Key Performance Indicators (KPI's) are critically assessed e.g. is patient seen within 4 weeks of referral date. The system has subsequently been rolled out to the other 3 units in the Directorate and all databases are reviewed by the Directorate Executive Management Committee (EMC) every quarter.

## CUMH: Key challenges in gynaecology in 2020

- **The impact of COVID-19**

CUMH gynaecology services were severely impacted by COVID-19 from March 2020. All non-urgent gynaecology clinics and theatre sessions were cancelled at CUMH for several months during 2020 leading to delays in seeing and treating patients. Keeping gynaecology services going for urgent cases in as safe a manner as possible during this time was a key challenge. Ways of working had to be altered and additional protocols put in place at short notice to minimise the risk of COVID-19 transmission at CUMH. When routine gynaecology services did gradually resume from July 2020, and with COVID-19 still in the community, providing services in a safe, socially distant manner was a continuing challenge for staff at CUMH throughout the remainder of 2020.

- **Infrastructure limitations**

Social distancing requirements in 2020 highlighted the lack of space available at the CUMH building for the safe provision of gynaecology services. Many areas had to be converted and repurposed at very short notice with limited resources. Added to this, given the funding secured by CUMH in 2020 to further expand services, additional space off site had to be considered given the lack of expansion space available on the campus.

- **Continued funding support to provide a sustainable service**

To ensure that progress to date with the CUMH outpatient gynaecology waiting list is sustainable, the resulting inpatient waiting list and surgeries that will arise need to be proactively managed. CUMH need a commitment that reoccurring funding will be provided to keep it's second gynaecology theatre open 5 days per week as promised.

- **Filling vacant staff posts in a timely manner**

The ability to fill vacant staff posts in a timely manner continued to be a key challenge for the CUMH gynaecology services in 2020.



## CUMH gynaecology services: Outpatient and inpatient attendance

As highlighted overleaf, CUMH gynaecology services were severely impacted by COVID-19 from March 2020. All non-urgent gynaecology clinics and theatre sessions were cancelled at CUMH for several months during 2020. As a result, overall attendance numbers, particularly for outpatient services were lower than 2019 as reflected in Table 7.0 opposite.

While the inpatient and day case procedures numbers were also severely impacted by COVID-19 during 2020, the availability of critical theatre time at the Bons Secours Hospital, Cork for CUMH gynaecology consultants to operate was critical for the service, completing over 400 cases in a four month period at the Bons Secours Hospital, Cork during 2020.

<b>Table 7.0: CUMH gynaecology service - outpatient attendances 2020</b>	
<b>Sub-specialty/clinic:</b>	
General gynaecology	5359
Oncology	1578
Post-menopausal bleeding (PMB)	1324
Colposcopy (consultant led clinics)	3502
Colposcopy (nurse led clinics)	1468
Colposcopy (smears) clinic	1752
Gynae ultrasound scanning	2959
Urogynaecology (consultant led clinics)	1149
Urogynaecology (nurse led clinics)	1185
Physiotherapy for gynaecology patients	1065
Infertility	824
Gynae pre-operative assessment	770
Ambulatory gynaecology	519
Endometriosis	127
Adolescent gynaecology	92
<b>Total</b>	<b>23,673</b>

<b>Table 7.1: CUMH gynaecology service - inpatient and day case procedures 2020</b>	
Total inpatient and day case procedures	1,488



# UHK gynaecology services

General and specialist gynaecology care from minor to major inpatient procedures are provided in UHK in the gynaecology (Kells) ward. Care is provided under the umbrella of a Women's Health Service consisting of a colposcopy clinic, hysteroscopy outpatient services, ambulatory gynaecology services, sexual health/STI clinics and urodynamics clinics. Care provided is in line with the best evidenced based practice and is carried out with a multidisciplinary approach.

The gynaecology ward takes care of pregnant women up to 19+6/40 in agreement with the patient's consultant and through close collaboration with ante-natal/labour ward staff. If a postnatal woman is reviewed in the Emergency Department and requires admission, the gynaecology ward will accommodate this admission.

A reproductive service is also provided for new and ongoing patients incorporating a nursing-led clinic that works in conjunction with the reproductive service consultant. In addition to this, the gynaecology services also oversee the urodynamics clinic service for UHK. This is an outpatient clinic that assesses bladder function.

The following clinics/services are provided in Gynecology Services in UHK:

- Ambulatory gynaecology
- Women's Health Service: colposcopy/hysteroscopy/smear clinics/sexual health clinics/sexual transmitted infection clinics/urogynaecology
- Continence advice
- Endometriosis
- General gynaecology and telephone follow up
- Reproductive service
- Paediatrics/adolescent gynaecology
- Perineal clinic
- Postmenopausal bleeding clinic
- Pre-operative assessment

## UHK gynaecology waiting lists

At the end of 2020, the waiting list stood at:

- OPD: 968
- Inpatient/day cases urgent :11
- Inpatient/day cases non-urgent: 13
- Total inpatient/day cases: 24

## UHK: Key achievements in gynaecology 2020

- In 2018, the Cill Íde Unit, ambulatory gynaecology clinic at UHK, was established as a "one-stop & see-and-treat" approach clinic for gynaecological

procedures provided in an outpatient setting, thereby reducing the demand on inpatient beds.

- In addition, there are more gynaecological procedures than ever being performed through minimal access surgery, which has allowed for greater hospital bed availability.

### Education and equipment:

- PROMPT – Train the Trainer Programme. Multi-disciplinary team went to PROMPT 3 in the UK.
- Skills drills (weekly).
- ISBAR adoption and implementation.
- National communication programme.
- Training Need Analysis – multi-disciplinary training standard/training data base.
- MIMT – Maternity Incident Management team meeting fortnightly, with key stakeholders and the UHK hospital Risk Manager.
- Audit planner.
- Electronic beds.
- ICT MN-CMS training and equipment.

### Future capital and service developments:

Following on from 2020, UHK Maternity Services are anticipating and looking forward to accomplishing the following needs and project in the years ahead.

University Hospital Kerry (UHK) wishes to stabilise and streamline its current gynaecology service by introducing an enhanced Women's Health Service (WHS). In 2021, it is planned to relocate the Women's Health Services off site to a community premises within Tralee town. Construction is expected to commence in Q1, 2022 and clinics to commence in Q2, 2022. This will be a multipurpose facility accommodating the following services:

- Colposcopy.
- Outpatient hysteroscopy.
- Ambulatory gynaecology.
- Urogynaecology and pessary clinic.
- Sexual health/STI.
- Women's health physiotherapy service.

The design for this community-based clinic includes:

- Designated clinical setting with appropriately sized:
  - Fully equipped treatment rooms with adjoining private changing facilities and toilet.
  - Recovery room.
  - Double the number of colposcopy clinic slots.

The plan is to develop a service and deliver it across two adjacent clinical rooms in the hospital outpatients department thereby enabling a consultant to manage the two rooms simultaneously. This increase in numbers is necessary to facilitate the current waiting lists and support the projected demands of the service. It is estimated 800 plus

procedure slots could be provided, in line with NWIHP Model of Care, suggesting that between 500 to 1,500 service users should be managed. CervicalCheck also expects that the numbers attending colposcopy in UHK is likely to increase and reach up to 1,000 women per annum.

Providing a “one-stop & see-and-treat” approach for women in one visit, in an outpatient setting, including

assessment, treatment and discharge is in keeping with NWIHP gynaecology Model of Care. The goal is to deliver high quality, cost effective and appropriate care for patients. Women will receive information and instructions prior to their appointment. A patient information leaflet will be sent out to patients with their appointment letter and consent will be obtained at the beginning of the consultation.

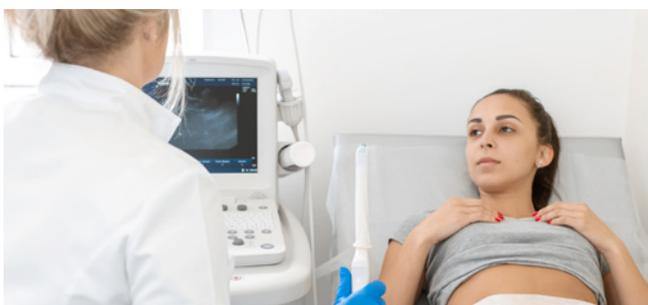


## UHW gynaecology services

Gynaecology outpatient clinics experienced another very busy and challenging year in 2020. General and gynaecology oncology services are provided in UHW with an expert, multidisciplinary approach in line with the best evidence-based practice. Other specialist areas include colposcopy, Sexual Assault Treatment Unit (SATU) and genital urinary medicine clinics.

All gynaecology services are provided in the UHW hospital campus on the antenatal and gynaecology ward, the Day Surgical Ward, UHW and the Gynaecology OPD adjacent to Maternity Services.

Colposcopy services are located in a purpose designed clinic within the wider OPD setting in UHW and SATU is located in a discrete location in UHW, but with full support and access to maternity and gynaecology services as required.



### UHW: Key achievements in gynaecology 2020

- **Oncology**

There were 52 operations on cancer patients, 46 of which were major. Chemoradiotherapy was the primary treatment used in 6 women referred with cervical cancer and 1 woman with vulval cancer. Neoadjuvant chemotherapy was used for 12 women, 5 ovarian primary, 2 vaginal primary and 1 peritoneal disease. 191 patients were discussed at the bimonthly multidisciplinary team meeting.

- **Colposcopy service**

The Waterford colposcopy service is one of 15 clinics in Ireland providing a service for CervicalCheck. In 2020, UHW had 2,756 (colposcopy and smears) attendances in colposcopy clinics, including larger than projected numbers of new patient referrals.

- **Minimal access surgery**

There are more gynaecological procedures than ever being performed through minimal access surgery, which has allowed for a greater hospital bed availability and faster patient recovery. We look forward to the development of ambulatory gynaecology day hysteroscopy service in Q1, 2021.

# STGH gynaecology services

During the year, women's health services continued to expand with increasing activity in the colposcopy and gynaecology outpatient clinics. Despite this, outpatient services continued to deliver a high standard of patient-centred care.

Key activity in 2020 included:

- 2,318 attendances in gynaecology clinics
- 1,425 attendances at the colposcopy clinics (New and Follow up)
- 461 nurse led smear clinics



## STGH gynaecology waiting lists

At the end of 2020, the waiting lists stood at:

- Outpatients: 321
- Inpatient: 44

## STGH: Key achievements in gynaecology 2020

### • Gynaecology waiting list management

STGH continued to operate a smooth-running service for gynaecology in outpatients and inpatients during 2020. The consultants under the leadership of Dr Vijoyashree Hiremath have worked very hard at ensuring that gynaecology waiting lists are kept at a manageable level. In particular, the provision of 3 full day theatre lists per week have helped to keep down waiting times for treatment.

### • Colposcopy service

STGH experienced above average numbers of new referrals to the colposcopy service in 2020, exceeding recommended numbers by CervicalCheck.

### • Minimal access surgery

More gynaecological procedures than ever were performed through minimal access surgery, which has allowed a greater turn-over of hospital beds.

**Table 7.2: Numbers of attendances in gynaecology outpatient clinics at UHK, STGH and UHW 2020**

Outpatient activity	UHK	STGH	UHW
Gynaecology	1,729	2,318	3,352
Ambulatory gynaecology (incl hysteroscopy at UHK)	301	0	285
Colposcopy	1,029	1,425	1,721
Smears	395	461	1,035
Urodynamics	16	0	55
STI/SATU	139	0	198
Reproductive clinic	454	0	0
<b>Total</b>	<b>4,063</b>	<b>4,204</b>	<b>6,646</b>

**Table: 7.3: Numbers of inpatient and day case gynaecology procedures**

Surgery activity	UHW	STGH
Inpatient procedures	347	303
Day case procedures	326	462
<b>Total</b>	<b>673</b>	<b>765</b>



## The National Gestational Trophoblastic Disease Registry, Monitoring and Advisory Centre

The National Gestational Trophoblastic Disease (GTD) Registry, Monitoring and Advisory Centre was established to co-ordinate the management of women who have been diagnosed with molar and non-molar trophoblastic disease. The Centre is coordinated by the Health Service Executive, the National Cancer Control Programme and Cork University Maternity Hospital (CUMH). It is located at CUMH and is the only such centre in Ireland.

The Centre is led by Dr John Coulter, Consultant Obstetrician and Gynaecologist and includes a team of specialist doctors, nurses and administrative staff. Patients from all the maternity hospitals in Ireland are registered with the national GTD centre following diagnosis of gestational trophoblastic disease and their management is then coordinated from CUMH.

Since the national centre went live in early 2017, over 400 patients have been treated by Dr Coulter and his team up to December 2020. This includes 112 complete and 281 partial moles, 4 choriocarcinomas and 3 atypical placental nodules. 20 patients with persistent or recurrent disease have been treated with chemotherapy with 100% cure rate.

The plan to centralise national hCG monitoring to the biochemistry laboratory in CUH is progressing under the expertise of Dr Caroline Joyce, senior clinical biochemist. Dr Joyce has also commenced a PhD examining new biomarkers for the early detection of persistent and recurrent disease.

The national GTD centre has been embedded in international societies EOTTD and ISSTD and contributes to a European MDT for rare tumours on a monthly basis (EURACAN). Dr Coulter also has a mentoring role in the management of GTD in the Caribbean gynaecological cancer centres and was a member of the working party which recently published European GTD management guidelines in the European Journal of Cancer. The current Irish national management guidelines are being revised and will be published this year.

The feedback from our patients continues to praise the excellence and holistic care of our clinical nurse specialists who provide such a comprehensive service to all patients in Ireland registered with the centre.

# Specialist Perinatal Mental Health Service (SPMHS)



## Background and Context

Perinatal mental health problems are those that arise during pregnancy and in the postnatal period (up to 12 months).

### Epidemiology

- 10-15% of women suffer from mild to moderate postnatal depression.
- 3% of women suffer from moderate to severe mental health illness.
- Similar number with anxiety.
- 2/1000 women delivered are likely to suffer from a postnatal psychosis.
- 3% with Post Traumatic Stress Disorder.
- Adjustment or Acute Stress reactions/disorders are even more common.

There is a wide range of mental health morbidity that can occur during the perinatal period and timely access to a specialist service is of the utmost importance.

Dr Deirdre Muller Neff, Consultant Perinatal Psychiatrist is the Clinical Lead for the Specialist Perinatal Mental Health Service (SPMHS) in Ireland South. The Specialist Perinatal Mental Health Service is being developed in line with the National Model of Care for SPMHS launched in November 2017.

The delivery of specialist perinatal mental health services is via a hub and spoke model. In the ISWHD, CUMH is the hub site where the multidisciplinary team are based.

## Staffing

**Table 8: Complete SPMHS Multidisciplinary Team, Model of Care, November 2017**

Consultant Perinatal Psychiatrist	Deirdre Muller Neff
Clinical Nurse Specialist	Anne O'Flynn
Clinical Nurse Specialist	Rachel O'Donoghue
Mental Health Midwife	Breda Bird
Senior Mental Health Social Worker	Noelle Harris
NCHD	Moezz Maqbool
Administrative Officer	Evan O'Mahony

The above table includes the current full SPMHS team complement, with the addition of a senior clinical psychologist, senior occupational therapist and second mental health midwife to join the team in 2021.



**Figure 4: Specialist Perinatal Mental Health Team staffing**

**Table 9: Headline numbers/clinical activity April to December 2020**

Consultant Psychiatrist	<b>148</b>
NCHD*	<b>114</b>
Clinical Nurse Specialists**	<b>241</b>
Mental Health Midwife	<b>74</b>
Mental Health Social Worker	<b>95</b>
Total number of new assessments accepted to SPMHS	<b>672</b>

\*NCHD commenced duty July 2020

\*\*2nd CNS commenced duty June 2020

This table accounts for new referrals seen by each member of the multidisciplinary team from April 2020 to December 2020 and accepted to the service. This does not account for referrals that were triaged or assessed and deemed not suitable for the SPMHS i.e., more appropriate for Medical Social Work or signposted to relevant support service based on need.

The service resumed on 1st of April 2020 on return of the consultant psychiatrist. Prior to April, an inpatient obstetric liaison service was operated by the Clinical Nurse Specialist and Mental Health Midwife.

Referrals to the SPMHS are received from a variety of sources including booking and antenatal clinics, ED CUMH, private rooms, Community Mental Health Teams, GPs, Public Health Nurses and private psychiatrists.

Referrals are triaged by the SPMHS at a weekly MDT meeting to ensure the most appropriate member of the team assesses the patient in the first instance.

Once a patient is accepted to the SPMHS, a variety of interventions are offered including, but not limited to, psychoeducation, medication review, pre-conception counselling and on-going assessment of need. Clinical team members continue to work with women based on need and a typical caseload per team member is 35-40 at any given time.

The SPMHS provides a timely and responsive service. Urgent or emergency presentations (i.e., unscheduled care) are seen within 48 hours following a risk assessment. To date, the vast majority of urgent referrals are seen on the same day.

The role of the Mental Health Midwife is to promote parity of esteem between mental and physical health difficulties during the perinatal period. Mental Health Midwives (MH), alongside their health promotion and educational roles, assess and follow up women presenting with a wide variety of mild to moderate mental health difficulties.

The MD Midwife has a crucial role in ensuring routine screening, and early identification of women with mental health difficulties is carried out in booking and antenatal clinics.

### **Development of the hub and spoke model across the Directorate**

To date in ISWID, there is one spoke MH Midwife based in UHW – Mary Frisby, and in STGH – Janice O'Donoghue. The MH Midwife post in Kerry has been filled with the successful candidate due to take up post in the near future.

The SPMHS hub team accept referrals for second opinions from Community Mental Health Teams (CMHTs) and liaison psychiatrists for women attending for antenatal care in the spoke hospitals. Any urgent concerns in relation to a perinatal mental health issue arising in the spoke hospital can be discussed with the consultant perinatal psychiatrist in the hub team.

Further development and integration between the hub and spokes planned for 2021 include monthly meetings which are organised by the SPMHS hub team. The focus of these meeting is education in perinatal mental health presentations. These meetings are for health professionals directly involved in perinatal mental health in the spoke hospitals – liaison psychiatry, spoke MH Midwives.

### **Education and Training**

Education and training is a core component of the Specialist Perinatal Mental Health Service given our interface with a wide variety of healthcare professionals.

The SPMHS in CUMH began rolling educational sessions for midwives in OPD and the wards in CUMH in September 2020. These sessions were delivered in small group settings to take social distancing into account, but more importantly to facilitate and encourage interactive learning.

Peer teaching has also taken place whereby the team have presented on various topics of interest as well as guest speakers that provided us with information on their areas of interest here in CUMH.

The SPMHS produced a video for online parent education in CUMH outlining the importance of Mental Health in Pregnancy and highlighting our service available here in CUMH.



Our team have also facilitated education sessions for Intern Student Midwives in PREP as well as sessions for newly appointed staff as part of the Induction Programme.

Future priorities for education include plans to provide education sessions for community midwifery and community mental health teams, GPs and Public Health Nurses.

We also intend to support the education of the student midwives here in CUMH as part of their midwifery programme.

The consultant psychiatrist SPMHS has provided teaching to NCHDs working in psychiatry with an emphasis on psychopharmacology in the perinatal period. Dr Muller Neff also presented a talk on prescribing in the perinatal period for the RCPI Medicines in Pregnancy and Lactation Study Day.

## Research

Research areas that have commenced to date include a qualitative study examining the impact of COVID-19 on the experience of perinatal OCD.

A second research project is currently on-going examining the outcome of referrals not accepted to the SPMHS – this is to inform future educational initiatives with maternity staff in terms of referral criteria for SPMHS.

## Key challenges in SPMHS across the Directorate

The resumption of the service occurred in the context of COVID-19, which has impacted on the development of the service in a number of areas such as therapeutic work, including but not limited to the development of group work by clinical team members and educational initiatives.

An on-going challenge for the team has been limited access to rooms to allow for the development of specialist clinics, for example, mental health midwife clinics or clinical nurse specialist clinics. The team also plan on developing a rapid access clinic that would be held weekly to ensure that urgent referrals from a variety of sources would be seen within 1 to 2 weeks. This has not been possible to date due to lack of clinical space to facilitate this clinic.

With the addition of further clinical staff to the team in 2021, the SPMHS plans on extending the service to include referrals up to 12 months post-delivery, further develop therapeutic interventions including group work, and establish Rapid Access Clinics which function to provide rapid access to comprehensive mental health assessment and treatment. This prevents the escalation of an urgent situation to an emergency situation and aims to minimise the morbidity associated with more complex mental health presentations (for example admission to a mental health unit during pregnancy or post-delivery).

The SPMHS look forward to the on-going development of the service across the Directorate.



# Staffing across Ireland South Women & Infants Directorate

**Table 10: Overall staff numbers for Ireland South in 2020**

Staff	Ireland South	CUMH	STGH	UHK	UHW
Consultant Obstetrician and Gynaecologists*	34	21	4	4	5
Consultant Neonatologists	8	8	0	0	0
Midwives and Nurses	704.91	452.76	65.79	75.93	110.43
NCHDs	102	56	14	16	16
HSCPs	24.15	18.75	2.1	2.3	1
Administration	86.74	63.66	7.2	5.6	10.28
<b>Total</b>	<b>959.8</b>	<b>620.17</b>	<b>93.09</b>	<b>103.83</b>	<b>142.71</b>

\*Consultants and NCHD numbers are based on headcount. All other areas are WTE

HSCPs	Total	CUMH	STGH	UHK	UHW
Dietetics	<b>3.9</b>	3	0.7	0.2	0
Occupational Therapy	<b>0.6</b>	0.6	0	0	0
Pharmacy	<b>3.1</b>	2.6	0	0.5	0
Physiotherapy	<b>8.25</b>	5.75	0.4	1.6	0.5
Social Work	<b>7.3</b>	5.8	1	0	0.5
Speech & Language Therapy	<b>1</b>	1	0	0	0
<b>Total</b>	<b>24.15</b>	<b>18.75</b>	<b>2.1</b>	<b>2.3</b>	<b>1</b>

Physiotherapy in UHK increased 1.4 - 1.6 WTE

## Health and Social Care Professions (HSCPs)

Health and Social Care Professions (HSCPs) is a diverse group of professionals. In Ireland South Women & Infants Directorate, the following six professions provide direct services to mothers and their infants: dietetics, occupational therapy, pharmacy, physiotherapy, social work and speech and language therapy. One profession nominates a standing member to the Executive Management Committee. Maria Leahy, Acting Manager of Social Work Services, CUH/CUMH has been representative HSCP member since 2018.

While a number of these professions are dedicated to maternity services, the majority provide services to both maternity service users as well as patients in the general hospital setting.

Health and social care professionals play a key part in the care provided to families, ensuring that babies get the best start in life and that mothers and families are supported and empowered to improve their health and wellbeing.

The Directorate have prioritised the development of HSCP services and have recruited a number of additional staff for 2020. While it will take some time to fully resource all professions to enable the provision of an optimal service, this is huge step forward and an exciting time for HSCPs in Ireland South.

## CUMH Staff 2020

### Consultants in Obstetrics and Gynaecology

- Professor John R. Higgins, Clinical Director
- Professor Barry O'Reilly
- Professor Keelin O'Donoghue
- Professor Richard Greene
- Dr Aoife Morris
- Dr Barbara Kerckhoff
- Dr Cathy Burke
- Dr Dan McKenna
- Dr Fergus McCarthy
- Dr John Coulter
- Dr Karen McNamara
- Dr Minna Geisler
- Dr Mairead O'Riordan
- Dr Manal Younis
- Dr Matt Hewitt
- Dr Moya McMenamin
- Dr Mudathir Abdelmaboud
- Dr Nóirín Russell
- Ms Orfhlaith O'Sullivan
- Dr Richard Horgan
- Dr Suzanne O'Sullivan

### Consultants in Neonatology

- Dr Brendan Murphy
- Dr Brian Walsh
- Professor Eugene Dempsey
- Dr Liam O'Connell
- Dr Mmoloki Kenosi, Locum Consultant Neonatologist
- Dr Mugahid Ibrahim, Locum Consultant Neonatologist
- Dr Jojanneke DeRoest, Locum Consultant Neonatologist
- Dr Peter Filan

### Senior Midwifery and Nursing Staff

- Olive Long, Director of Midwifery
- Katie Bourke,\* Assistant Director of Midwifery
- Rosaline O'Donovan, Assistant Director of Midwifery
- Úna Cahill, Assistant Director of Midwifery
- Maire Crowley, Assistant Director of Midwifery
- Nicole Coakley, Assistant Director of Midwifery
- Paula Murphy, Assistant Director of Midwifery
- Claire Everard, Acting Midwifery Practice Development Coordinator
- Fiona Kirby,\*\* Midwifery Practice Development Coordinator

\*Katie Bourke was appointed Director of Midwifery at CUMH during 2020 after Olive Long retired. \*\*Fiona Kirby was appointed Midwifery Practice Development Coordinator during 2020.

### Clinical Midwife/Nurse Managers 3

- Celine O'Keefe
- Claire O'Halloran
- Deirdre Moriarty
- Denise Malone
- Fidelma Harrington
- Frances Healy
- Lorraine O'Connor
- Lucille Bradfield
- Maria O'Donovan
- Mary Fitzgerald
- Mary Quaid
- Monica O'Regan
- Niamh Spillane
- Nilima Pandit

## STGH Staff

### Consultants in Obstetrics and Gynaecology

- Dr Vijoyashree Hiremath, Clinical Lead, Consultant Obstetrician and Gynaecologist
- Dr Attia Al Fathid, Consultant Obstetrician and Gynaecologist
- Dr Mostaffa Abdalla, Consultant Obstetrician and Gynaecologist
- Dr Rita Mehta, Consultant Obstetrician and Gynaecologist

### Senior Midwifery and Nursing Staff

- Sinéad Heaney, Director of Midwifery
- Mary O'Donnell, Clinical Midwife Manager 3

## UHK Staff

### Consultants in Obstetrics and Gynaecology

- Dr Paul Hughes, Clinical Lead, Consultant Obstetrician and Gynaecologist
- Dr Mary McCaffrey, Consultant Obstetrician and Gynaecologist
- Dr Savita Lalchandani, Consultant Obstetrician and Gynaecologist
- Dr Magid Abubakar, Consultant Obstetrician and Gynaecologist

### Senior Midwifery & Nursing Staff

- Sandra O'Connor, Director of Midwifery
- Mary Stack Courtney, Clinical Midwife Manager III

## UHW Staff

### Consultants in Obstetrics & Gynaecology

- Dr Eddie O'Donnell, Clinical Lead, Consultant Obstetrician and Gynaecologist
- Dr Azriny Khalid, Consultant Obstetrician and Gynaecologist
- Dr John Bermingham, Consultant Obstetrician and Gynaecologist
- Dr John Stratton, Consultant Obstetrician and Gynaecologist
- Dr Mairead Butler, Consultant Obstetrician and Gynaecologist

### Senior Midwifery and Nursing Staff

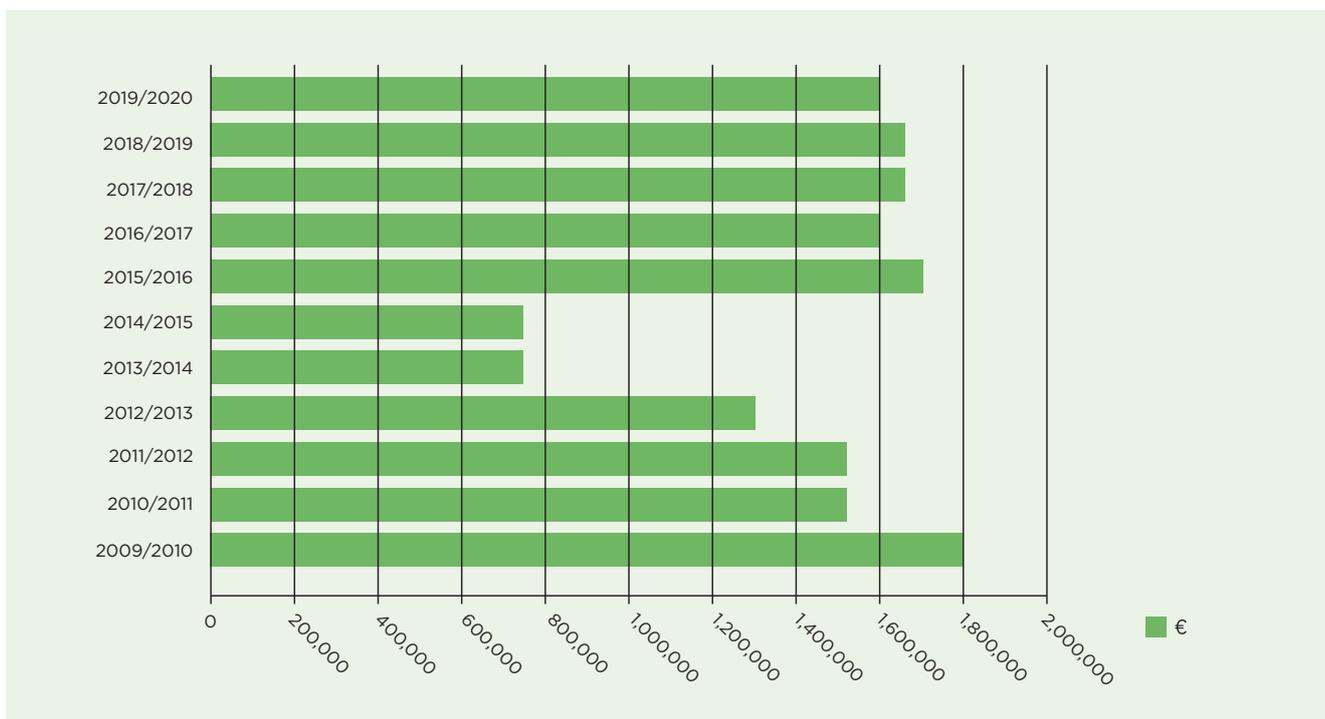
- Paula Curtin, Director of Midwifery
- Breda Crotty, Assistant Director of Nursing & Midwifery
- Maria Murtagh, Clinical Midwifery Manager 3
- Janet Murphy, Advanced Midwife Practitioner
- Amy Weymouth, CMS Ultrasound
- Una Walsh, CMS Ultrasound
- Anne Fanning, CMS Ultrasound
- Helen Patmore, Midwifery Scanning Early Pregnancy Unit
- Rachel Cashin, Midwifery Scanning Early Pregnancy Unit
- Elaine Roche, CMM2 Ambulatory Gynaecology
- Jill Whelan, CMS Bereavement & Loss
- Linda O'Callaghan, Clinical Placement Coordinator Midwifery
- Mary Frisby, CMM2, Perinatal Mental Health
- Lorraine Harrison, Nora Lyng, Margaret Lyster, Brid Galvin, Greta Power, Aoife Keenahan, Vanessa Behan, CMM2 Shift leaders, Delivery Suite
- Victoria Byrne, CMM2 IHCMS
- Grace Walsh, CMM2 Postnatal
- Celine O'Connor, CMM2 Antenatal and Gynaecology
- Margaret Coe, CMM2
- Martina Wynne, CMM1 OPD
- Julie Moriarty, CNM2
- Audrey Comerford, CNM1
- Katrin Hessler, CNM1 NICU/SCBU
- Brigita Moore, CNM2
- Kelly Logue, CNM2
- Elizabeth Kinsella, CNM2
- Joanne Dineen, Colposcopy
- Sinead Boyle, C/ANP
- Ann Folan, CNS SATU

# Education, Research and Innovation

## Department of Obstetrics and Gynaecology, UCC

The Department of Obstetrics and Gynaecology’s aim is to lead the development of teaching and research in obstetrics and gynaecology in Ireland and to become a centre of excellence internationally. This academic agenda is fully integrated with the delivery of clinical care in Cork University Maternity Hospital, thus providing a high-quality academic service across a broad range of clinical, educational and research activities.

The department is located on the fifth floor of Cork University Maternity Hospital. It provides formal undergraduate teaching to UCC medical students. The department also provides postgraduate and continuous professional development opportunities in Ireland South Women & Infants Directorate.



**Figure 5: Research income in the Department of Obstetrics and Gynaecology, 2009-2020**



## Response to COVID-19

The delivery of teaching and examinations for fourth year medical and final year medical students was altered significantly due to the onset of the COVID-19 global pandemic in 2020. The initial Final Med exams in Obstetrics and Gynaecology were due to take place on the week commencing 21 April 2020 with Clinical Exams being undertaken in CUMH and maternity units of UHW, UHK and STGH.

Due to the serious nature of the pandemic UCC had to close the campus down, and students were asked not to attend their teaching in university or hospitals. It was decided on the 4 March 2020 to bring the Final Med exams forward. Over the following week and days, the arrangements for these exams were altered due to the fluid nature of the pandemic and on 16 March, it was eventually decided by all parties in the School of Medicine that the Obstetrics and Gynaecology exams would take place over one day on Saturday 21 March 2020 in conjunction with the Paediatrics department.

The exam (incorporating clinical and written questions) took the form of an OSCE exam held in one day, with various stations set up for the students in the Brookfield Health Science Complex (BHSC). All safety measures (unfamiliar at the time) had to be adopted – face masks, hand hygiene and social distancing. Consultant examiners came from across the Directorate to support this effort.

The teaching for the 2020/2021 fourth and final year medical students was then adapted to a hybrid of online and in person small group teaching with strict scheduling of students to wards, floors and areas to ensure efficient contact tracing if needed.

The UCC Medicine Class of 2020 graduated virtually on 17 April 2020 and were offered internships in the Irish health system.

## Awards

Due to COVID-19, the Anu Research meeting was cancelled, and the Anu Research Medal was not awarded for 2020. The Anu Undergraduate Gold Medal in Obstetrics and Gynaecology and the Anu Undergraduate Scholar Medal in Obstetrics and Gynaecology awarded to students who outperformed in their written and oral examinations were not awarded this year due to the COVID-19 pandemic and the changed format of exams. We look forward to resuming these traditions once safe to do so.

## Student Achievements

### Completed MSc in Obstetrics and Gynaecology October 2020

- Dr Bernard Kennedy
- Dr Ciaran McKeown
- Dr Corina Oprescu
- Dr David Rooney
- Dr Jill Mitchell
- Dr Sarah Murphy

## Anu Research Centre

The Anu Research Centre is the dedicated research facility within the Department of Obstetrics and Gynaecology, UCC focusing on the mother and the unborn baby. The Anu Research Centre strengthens the department's commitment to maternity and neonatal healthcare and is central to its aims and philosophy. The centre is a purpose-built integrated research and clinical centre in human reproduction bringing together expert academic and clinical staff.

## The National Perinatal Epidemiology Centre (NPEC)

The mission of the National Perinatal Epidemiology Centre (NPEC) is to collaborate with Irish maternity services in order to translate clinical audit data and epidemiological evidence into improved maternity care for families in Ireland. The NPEC has a national focus, working in collaboration with all 19 of Ireland's maternity units: it audits and reviews the practice of the Irish maternity services with a view to deriving learning and making recommendations based on that learning.

The NPEC are a team of midwives, researchers, administrators, clinicians and is directed by Professor Richard Greene. The NPEC produces annual national clinical audit reports on perinatal mortality in Ireland, maternal morbidity in Ireland, home births in Ireland, neonatal care of very low birth weight babies in Ireland, and therapeutic hypothermia in Ireland, subject areas that constitute key indicators of quality of maternity and neonatal care.

The Lourdes Hospital Inquiry report of 2007 recommended that an electronic record of every maternity in Ireland be maintained: to this end the NPEC, and its Director, has been instrumental in the development of the Maternal Newborn Clinical Management System (MN\_CMS).

The Centre continues to build on its existing portfolio of audit and research. *Every time a mother gives birth in Ireland, the important interventions, the*

*good outcomes and the complications are recorded and analysed at a national specialist centre. Unusual trends are easily and quickly observed and most importantly acted on.*

The NPEC makes recommendations in its annual audit reports. However, it recognises that recommendations are ineffective if they are not implemented. In order to ensure that its recommendations are acted upon and that learning is achieved from its audits at both hospital level and national level, the NPEC works with the National Office of Clinical Audit (NOCA).

NOCA was established in 2012 to create sustainable clinical audit programmes at a national level. NOCA enables those who manage and deliver healthcare to improve the quality of care through national clinical audit. The NPEC aligns its audit governance structures to the NOCA audit governance standards for audit governance committees, the monitoring and escalation of outliers and for national reporting.

The NPEC has always strategically aimed to close the audit loop and since the establishment of the National Women and Infants Health Programme (NWIHP) in January 2017, a number of the NPEC recommendations have been progressed. The NPEC works in collaboration with NWIHP and acknowledges the key relationship that has developed between the two organisations.

At local hospital level, the NPEC provides customised feedback to individual hospitals on how they compare and what areas of their care they might review in the context of bench-marking against the national average. To this end, it publishes annual individual hospital reports and presents its findings at individual hospitals. The NPEC actively encourages the use of data in the units and appreciates the importance of working with the units to ensure they know their data and understand how this data can be used in their units.

Data is submitted to the NPEC throughout the year in Perinatal Mortality, Severe Maternal Morbidity, Very Low Birth Weight Audit, Home Births, Robson Ten Group Classification System, Neonatal Therapeutic Hypothermia, Maternal Death Enquiry and for 2020 the ROI COVID-19 Study.

The NPEC in collaboration with the NWIHP and the National Clinical Programme for Paediatrics and Neonatology (NCPN) created a register of all pregnant women and newborns before 29 days of age who tested for the COVID-19 virus. Following the register data for those pregnant women and newborns who tested positive for SARS-CoV-2, a

retrospective chart review was conducted to capture the epidemiological and clinical characteristics of COVID-19 and outcomes.

#### **Report Outputs:**

O'Hare MF, Manning E, Corcoran P, Greene RA on behalf of MDE Ireland. Confidential Maternal Death Enquiry in Ireland, Report for 2016-2018. Cork: MDE Ireland, December 2020.

Meaney S, Byrne A, Corcoran P, Greene RA on behalf of the Designated Midwifery Officers. Planned Home Births in Ireland Annual Report 2017; HSE National Home Birth Service provided by Self Employed Community Midwives. Cork: Health Service Executive, 2020

Leitao S, Corcoran P, Twomey A, Murphy BP, Greene RA, on behalf of NICORE Republic of Ireland. Very Low Birth Weight Infants in the Republic of Ireland Annual Report 2018. Cork: National Perinatal Epidemiology Centre, 2020

Meaney S, McGinley J, Corcoran P, McKenna P, Filan P, Greene RA, Murphy J on behalf of Neonatal Therapeutic Hypothermia Working Group. Neonatal Therapeutic Hypothermia in Ireland, Annual Report 2018. Cork: National Perinatal Epidemiology Centre, 2020.

## **Health Innovation Hub Ireland (HIHI)**

Health Innovation Hub Ireland is a national government backed initiative supported by Enterprise Ireland and the Health Service Executive (HSE). Through its unique academic and clinical partnership (UCC, NUIG, TCD, MTU and the associated Hospital Groups), HIHI supports Irish based companies to fast-track their product development by enabling unique clinical feedback and piloting.

HIHI also supports the development of new ideas and products through its ideation activity - stimulating the development of needs driven solutions and assessing and supporting further development. Underpinning these activities, HIHI delivers educational tools and programmes to stimulate a culture of innovation within our healthcare system and to support healthtech sector growth in Ireland.

Together, these activities support the Irish economy, ensuring start-ups and established companies grow, scale and remain in Ireland, and this in turn supports the healthcare system by providing access to innovative technologies that lead to better patient outcomes.

## INFANT

INFANT is a leading translational Research Centre in maternal and child health. INFANT's mission is to deliver pioneering translational research to improve health outcomes in pregnancy, birth, newborn and early childhood phases of growth and development.

INFANT is hosted by University College Cork (UCC), an internationally competitive, research-led university which plays a key role in the development of the regional and national knowledge economy and is co-located with clinical partners Cork University Hospital and Cork University Maternity Hospital (CUH/CUMH). INFANT's state-of-the-art co-located facilities serve the centre's research goals and support multi-disciplinary and trans-disciplinary collaboration between the university and hospitals.

INFANT was established in 2013, building on over a decade of award winning fetal and neonatal translational research. Our establishment was initially supported by core funding from Science Foundation Ireland (SFI), and we have grown a funding portfolio of over €47M from a diverse range of exchequer, non-exchequer, industry and philanthropic sources.

INFANT has evolved significantly since its launch. Initially set-up with a team of 8 founding Principal Investigators (PIs), we are now home to a multidisciplinary team of over 100 PIs, clinicians, research scientists and engineers in areas ranging from obstetrics, paediatrics, neonatology, neuroscience and nutrition to bio-medical engineering, informatics, and artificial intelligence, as well as over 40 industry partners and over 50 international collaborators. More than 4,000 mothers and 3,000 babies have participated in our research studies – facilitated by the supportive clinical research environment in CUMH and CUH.

INFANT's research has also evolved. When the Centre was established, our focus was to advance perinatal translational research. Our research now also embraces maternal and child health, focusing particularly on interventions or events that occur in pregnancy, birth, the neonatal period, and early infant development. This expansion reflects the importance of early life (from conception to the second birthday – the “first 1,000 days”) as a critical period of human development, when healthy growth and neurological development establish the foundations for life-long health.

### Key challenges INFANT is addressing:

Challenges of pregnancy and birth, the newborn period, early life, and childhood represent a massive global burden of disease and pose a significant burden on health-care resources and patients' quality of life. They have been historically neglected in terms of research investment and the development of effective solutions.

INFANT has developed many world first scientific breakthroughs, helping clinicians to alleviate these challenges e.g., screening tests for pre-eclampsia, automated detection systems for neonatal seizures and breakthrough therapies for peanut allergy.

The INFANT strategy is to strive for scientific excellence and disruptive innovation in our quest to become a leading Institute of Maternal and Child Health of international renown. We have a clear vision of how we will achieve this, enabling us to deliver scientific excellence, innovation, and societal and economic impact now and for the next generation.

### Some key achievements for INFANT during 2020 were:

- Funding - secured over €5M of new funding in 2020 from exchequer, non-exchequer and industry sources (e.g. SFI, Wellcome Trust, HRB, IRC, Horizon 2020).
- Publications - INFANT published over 70 peer reviewed journal publications in 2020 - with a number of key breakthroughs published in high impact journals such as the Lancet Child & Adolescent Health, JAMA & Jama Paediatrics, Journal of Allergy & Clinical Immunology, Nature Communications, PLOS Medicine, Trends in Microbiology.
- PhD Graduates - INFANT had 5 PhD graduates in 2020, 4 of whom were in Obstetrics, vital in keeping the development of new talent to support research in line with CUMH objectives.
- PhD/MD Registrations - INFANT also has 30 postgraduate (PhD/MD) students registered during 2020 across all disciplines.
- Research Leadership and Professorships – 2020 was a very significant year in enhancing INFANT clinical research leadership. Professor Keelin O'Donoghue, INFANT's Clinical lead for Obstetric Research, was appointed Professor at UCC, Professor Eugene Dempsey was appointed as the Horgan UCC Chair in Neonatology and Professor Deirdre Murray was appointed as UCC Professor of Paediatrics.
- Adjunct Professorships - in addition, INFANT and UCC appointed two Adjunct Professors in 2020 – Professor Blandina Mmbaga (Kilimanjaro Clinical Research Institute, Tanzania) and Professor Mark Turner (University of Liverpool).
- Global Health – INFANT successfully translated its first global health innovation by deploying an electronic birth registry in Kilimanjaro Clinical Research Institute in Moshi, Northern Tanzania arising from collaboration funded by philanthropy, industry and ESTHER Ireland (HSE-Irish Aid Programme).
- COVID-19 Resources – INFANT created a COVID-19 Research Hub ([www.infantcentre.ie/research/covid-19-hub](http://www.infantcentre.ie/research/covid-19-hub)) to gather and share all the latest COVID-19 research in maternal and child health for health professionals, researchers, and the public.

- COVID-19 Research – INFANT also established a number of COVID-19 research studies to understand and explore key research questions in maternal and child health catalysed by the pandemic (LEANBH II, CATePILLaR, CARE, COCOON).
- COVID-19 Clinical Response – In addition to these research highlights, INFANT recognises all our clinical and HSE colleagues who responded to the pandemic and were at the frontline throughout 2020 in leading the national effort through clinical practice and policy. Our deepest thanks.
- Entrepreneurship - INFANT PhD student, Mark O’Sullivan, won the Enterprise Ireland Student Entrepreneur of the Year 2020 for his start-up prospect Neurobell, a low power, mobile, low-cost EEG device.
- Public and Patient Involvement (PPI) – Professor Keelin O’Donoghue’s Pregnancy Loss Research Group and INFANT Research Centre launched [www.corkmiscarriage.ie](http://www.corkmiscarriage.ie) a first-of-its-kind website in Ireland, providing medically accurate, sensitive and user-friendly information for parents who experience first trimester miscarriage.



## Pregnancy Loss Research Group

The Pregnancy Loss Research Group is led by Professor Keelin O’Donoghue and is based at CUMH. The group encompasses a multidisciplinary team of doctors, researchers, scientists, midwives, nurses, social workers, pathologists and chaplains alongside medical, Masters and Doctoral students, working collaboratively with the common goal – to provide support and information to parents bereaved by early and late pregnancy loss, promote their emotional, psychological, spiritual and physical well-being, as well as improving professional practice and clinical care, influencing health-care policy and facilitating research in all areas of pregnancy loss and perinatal mortality.

The Pregnancy Loss Research Group came together formally in 2012 and now meets monthly at CUMH. Research from the group has been presented at a wide variety of international conferences around the world. Members of the group have also been involved in a large number of national and international publications as well as national guidelines and reports.

Website: [www.ucc.ie/en/obsgyn/plrg/](http://www.ucc.ie/en/obsgyn/plrg/)

Twitter: [@PregnancyLossIE](https://twitter.com/PregnancyLossIE)

### The aims of the group are to:

- Examine the lived experiences of men and women who have experienced early pregnancy loss, late miscarriage, stillbirth and neonatal death as well as those who have had pregnancies complicated by fatal fetal anomaly.
- Examine lifestyles and psycho-social demographic factors as well as risk factors associated with all types of pregnancy loss.
- Explore the psychological and spiritual needs of bereaved parents.
- Explore bereaved parents’ attitudes and experiences and assess how these interact with biological or socio-demographic causes of pregnancy loss.
- Improve population awareness and understanding of the prevalence and impact of pregnancy loss.
- Develop evidence-based behaviour change interventions targeting modifiable risk factors for stillbirth.
- Discover bereaved parents’ attitudes to post-mortem investigations, including autopsy and examination of the role of the Coroner.
- Examine the impact of pregnancy loss for the next pregnancy on parents and healthcare professionals and to explore the specific experiences of pregnancy after stillbirth.
- Examine children’s experiences after the death of a sibling through perinatal death.
- Improve understanding and increase awareness of the consequences of pregnancy loss amongst healthcare professionals.
- Explore population knowledge and incidence of fatal fetal anomaly, and experiences of both volunteers and fetal medicine specialists in supporting and caring for parents who experience a pregnancy with a fatal fetal anomaly.
- Analyse the methodology and structure of local and national perinatal mortality reviews, focussing on recurrent themes and implementation of recommendations, as well as the involvement of staff and the role of bereaved parents in reviews.
- Identify risk factors for perinatal mortality in multiple pregnancy in Ireland and examine the current maternity services and service needs for this cohort.

- Examine the investigation and management practices in recurrent miscarriage with a focus on subsequent pregnancy outcomes and service provision in this area, including for those patients with coexisting infertility.
- Develop educational resources and provide education and professional development for all healthcare professionals involved in pregnancy loss.

#### Key achievements during 2020 include:

- Professor Keelin O'Donoghue led the two-year implementation programme (2017-19) for the National Standards for Bereavement Care Following Pregnancy Loss and Perinatal Death in all 19 Irish maternity units. This was extended by the HSE's National Women and Infants Health Programme into a development programme of work from 2019-2021.
- In March, the Pregnancy Loss Research Group and INFANT Research Centre at University College Cork launched [www.corkmiscarriage.ie](http://www.corkmiscarriage.ie) a first-of-its-kind website in Ireland. The website provides medically accurate, sensitive and user-friendly information for parents who experience first trimester miscarriage. The website was developed and designed in collaboration with Clinical Bereavement Midwife Specialist Anna Maria Verling, Parent Advocate Rachel Rice and Caoimhe Byrne Public Engagement Manager. Designed to guide users through what to expect, what to do and how to access appropriate care services, while complementing the care and support women receive in maternity services, the website will also be a helpful resource for clinical staff.
- Professor O'Donoghue as Principal Investigator was awarded funding under the HRB Investigator-Led Projects (ILP) in 2019 for a study of the impact of dedicated recurrent miscarriage clinics in Ireland. The aim of the RE:CURRENT project which commenced January 2020 and runs for two years, is to actively collaborate with a range of stakeholders (men and women who experience recurrent miscarriage, as well as those involved in the delivery/organisation/governance of their care), to evaluate recurrent miscarriage services in Ireland using mixed-methods, multidisciplinary approaches to inform efforts to standardise and improve the quality of care provided.

[www.infantcentre.ie/research/research-studies/recurrent](http://www.infantcentre.ie/research/research-studies/recurrent)

[www.ucc.ie/en/obsgyn/plrg/plrgresearchactivity/therecurrentstudy/](http://www.ucc.ie/en/obsgyn/plrg/plrgresearchactivity/therecurrentstudy/)

#### RE:CURRENT Project updates

No. 1, July 2020:

<https://mailchi.mp/62b177c8ab36/recurrent-project-update-1-july-2020>

No. 2, October 2020:

<https://mailchi.mp/1d3c46978e1e/recurrent-project-update-2-oct-2020>

No. 3, December 2020:

<https://mailchi.mp/628ae5797f74/recurrent-project-update-3-dec2020>

- Members of the group contributed to / authored 18 peer-reviewed journal articles published in the international literature throughout 2020.
- Members of the group (Professor O'Donoghue, Dr S Meaney and Dr M Murphy) collaborated in the Ethics, Law and Pregnancy in Ireland Network (ELPIN) which was funded by the Wellcome Trust in 2019 and is based at University College Cork. Professor O'Donoghue and Dr Meaney led one of the national ELPIN workshops in September 2020. [www.ucc.ie/en/elpin/workshops/](http://www.ucc.ie/en/elpin/workshops/)
- The development and provision of TEARDROP (Teaching, Excellent, pArent, peRinatal, Deaths-related, inteRactions, tO, Professionals) multidisciplinary bereavement training programme began in 2019, led by the PLRG, and continued in early 2020 with a SSWHG based workshop at CUMH. We were unable to run a further workshop in 2020 due to the COVID-19 pandemic.
- Professor O'Donoghue and PhD Student Caroline O'Connor were awarded a 2020 Government of Ireland Postgraduate Research Scholarship. This is for Multiple pregnancy: An investigation of the risk factors and outcomes in the Republic of Ireland; The MILESTONE study, which is due to commence in January 2021. <https://research.ie/2020/10/23/minister-simon-harris-announces-funding-of-e21m-for-close-to-300-new-research-projects/>
- Indra San Lazaro Campillo was awarded her PhD in March 2020 for her thesis entitled; "An exploration of miscarriage in the Republic of Ireland: Incidence, management, risk factors, interventions, and populations' knowledge". Supervisors; Professor O'Donoghue and Dr S Meaney.
- Stacey Power was awarded her PhD (subject to minor revisions) in December 2020 for her thesis entitled: "Experiences of pregnancy with major fetal anomalies". Supervisors; Professor O'Donoghue and Dr S Meaney.
- Dr Laura Linehan joined the group in July 2020 to undertake a PhD entitled: "Recurrent First Trimester Miscarriage and Subfertility: Pregnancy Outcomes, Service Provision and the Experiences of Providers, Women and their Partners." Supervisors: Professor O'Donoghue and Dr M Hennessy.
- Professor O'Donoghue was appointed to the National Screening Advisory Committee at the Department of Health and to the Stillbirth Clinical Study Group at the Royal College of Obstetricians and Gynaecologists, London.

- Professor O'Donoghue joined international collaborations working on COVID-19 in Pregnancy and contributed to international resource centres and databases for COVID-19.
- Professor O'Donoghue and Dr Murphy were collaborators with the Stillbirth Centre of Research Excellence on COCOON: COntinuing care in COVID-19 Outbreak: A global survey of New and expectant parent experiences. This Global research study aims understand the challenges and concerns of parents who are pregnant or have recently given birth during the COVID-19 pandemic outbreak, including parents who have experienced stillbirth or neonatal death.

[www.stillbirthcre.org.au/our-research/global-research-study-maternity-care-during-covid-19/](http://www.stillbirthcre.org.au/our-research/global-research-study-maternity-care-during-covid-19/)

## Newsletters/News items

South/South West Hospital Group. Research grant success: Study of the impact of dedicated recurrent miscarriage clinics. UltraNews: eNewsletter of the Maternity Directorate of the South/South West Hospital Group, Issue 5, Autumn 2019 (page 14)

[www.cuh.hse.ie/Cork-University-Maternity-Hospital/News-Events-at-CUMH/UltraNews-newsletters/UltraNews-Autumn-2019.pdf](http://www.cuh.hse.ie/Cork-University-Maternity-Hospital/News-Events-at-CUMH/UltraNews-newsletters/UltraNews-Autumn-2019.pdf)

College of Medicine and Health, University College Cork. INFANT Working Collaboratively to Evaluate Recurrent Miscarriage Services The RE:CURRENT project funded by the HRB. COMH eNews, Issue 38, November 2020 (page 8). [www.ucc.ie/en/media/academic/medicineandhealth/2019documents/CoMHeNewsNo38\\_November2020.pdf](http://www.ucc.ie/en/media/academic/medicineandhealth/2019documents/CoMHeNewsNo38_November2020.pdf)

INFANT Research Centre. The RE:CURRENT project: Working collaboratively to evaluate recurrent miscarriage services. INFANT Newsletter, December 2020.

Launch of the Cork Miscarriage website in March 2020 was featured by a number of media outlets.

[www.medicalindependent.ie/new-miscarriage-website-launches-in-cork/](http://www.medicalindependent.ie/new-miscarriage-website-launches-in-cork/)

<https://irishtatler.com/news/early-miscarriage-support>

[www.echolive.ie/corknews/New-support-services-for-Cork-families-who-experience-miscarriage-e67e9184-8b51-4425-8569-2e6abba83c82-ds](http://www.echolive.ie/corknews/New-support-services-for-Cork-families-who-experience-miscarriage-e67e9184-8b51-4425-8569-2e6abba83c82-ds)

[www.image.ie/life/website-launched-assist-going-early-miscarriage-182269](http://www.image.ie/life/website-launched-assist-going-early-miscarriage-182269)

## Blogs

Hennessy M, Dennehy R, Rice R. Using evidence and stakeholder engagement to optimise and standardise care for women and men who experience recurrent miscarriage. HRB Open Res, 12 October 2020.

<https://blog.hrbopenresearch.org/2020/10/12/using-evidence-and-stakeholder-engagement-to-optimise-and-standardise-care-for-women-and-men-who-experience-recurrent-miscarriage/>

## Research from the Pregnancy Loss Research Group was presented at the following Conferences in 2020

- New Horizons School of Medicine Research Conference, UCC. 3 December 2020 (Online).
- Junior Obstetrics and Gynaecology Society Annual Scientific Meeting. 27 November 2020 (Online).
- Institute of Obstetricians and Gynaecologists Study Day, Royal College of Physicians of Ireland. 27 November 2020 (Online).
- ISUOG Virtual World Congress on Ultrasound in Obstetrics and Gynaecology. 16-18 October 2020 (Online).
- European Society of Human Reproduction and Embryology 36th Annual Meeting. 5-8 July 2020 (Online).
- Trinity Health and Education International Research Conference (THEconf2020). 4 and 5 March 2020.
- International Marce Society for Perinatal Mental Health. 5-7 Oct 2020 (Online).
- NPEC Study Day 2020: Investigations into Perinatal Mortality: Considerations and Lessons Learned. Kingsley Hotel, Cork. 17 January 2020.
- Planned plenary and poster presentations at the Compassion in Action Healthcare Conference. the Schwartz Center for Compassionate Healthcare 14- 16 June 2020 and PalCare Montreal, the 21st International Congress on Palliative Care, Montreal, Canada 18-20 October 2020 were rescheduled as both conferences were cancelled due to the COVID-19 Pandemic.
- Professor O'Donoghue was invited to give Plenary Lectures at the Institute of Obstetricians and Gynaecologists Annual Study Day at the Royal College of Physicians of Ireland, the Dublin First Trimester Ultrasound Symposium at the National Maternity Hospital Dublin, the National NPEC Study Day, and led the Stillbirth Masterclass in Obstetrics and Gynaecology for the Royal College of Physicians of Ireland.

## Impact of the COVID-19 pandemic

From March 2020, the PLRG research meetings became largely virtual, and the team had to rapidly respond to the challenges arising from closure of the college campus, and the requirement for many researchers and students to work from home.



Research work programmes and projects were pivoted as much as possible to minimise the impact of this change in working, both for researchers and research participants, and for project deadlines. We were fortunate that the majority of our research projects could be reorganised around this 'new way' of working in 2020, although we expect to seek extensions from research funders in 2021. It is also notable that funding opportunities for non-COVID-19 clinical or health services research were extremely limited in 2020. A number of international conferences usually attended by members of the PLRG were cancelled in 2020, and while online meetings and virtual events have been supported by the group, they are not an equivalent substitute for collaboration or research dissemination. Despite these unexpected challenges for researchers and clinicians, 2020 has been a productive year for the PLRG, which is testament to the resilience, innovation, hard work and commitment of all.

## School of Nursing & Midwifery, UCC

Located in the Brookfield Health Sciences Complex, the School of Nursing & Midwifery offers two registerable midwifery programmes in partnership with the Cork University Maternity Hospital; a 4-year BSc in Midwifery and an 18-month post registration Higher Diploma in Midwifery. Apart from midwifery students, the CUMH also accepts General Nursing and Public Health Nursing students for their required maternity placements. This was a difficult year for

all students as from 12 March 2020 teaching moved online when the Global Pandemic was announced by the WHO. Clinical skills sessions were curtailed, and end of year exams moved online for 2019-2020 students at short notice.

In the early stages of the pandemic, the ability to support the education of students was impacted by the challenges within the maternity services. There were multiple directives from the HSE and DOH who worked with the NMBI, the universities and the health sector to ensure that practice placements could be facilitated safely as soon as possible. Students throughout the health services contributed to health care needs and while the rest of the population, including academic staff, worked from home, the students made up their required placements, with additional time spent during their summer break.

Student midwives are supported in practice by the midwifery practice development officer, clinical placement coordinators, postgraduate clinical coordinator, allocations liaison officer and link lecturers. Midwives provide preceptor support to students to ensure that their midwifery competencies are achieved.

In 2019-2020 the School provided postgraduate and continuing education including the MSc Midwifery and Continuing Professional Development (CPD) modules in Maternity Critical Care and Nursing Management of the Neonate.

## Student Achievements 2020

### Completed BSc (Hons) in Midwifery 2016 - 2020

Krystina Bendula, Hannah Courtney, Robyn Creagh, Kellie Cregan, Anna Cywinska, Niamh Enright, Danielle Hourihane, Cliona Joyce, Aisling Keane, Doireann Kelleher, Patrycja Kowalczyk, Clarissa Lynch, Joanne Mc Dermott, Kerry Mullen, Lauren Murray, Anne O Sullivan, Laura O Sullivan, Fern Renton, Annaleigh Walsh, Greta Walsh

### BSc (Hons) in Women's Health Studies 2020

Kate Wilson.

### MSc Midwifery 2020

Noreen Preston Ryan, Roberta Spillane, Lorna Sewell.

### MSc ANP 2020

Elaine Healy.

### HH Stewart Medical Scholarship in Midwifery Award 2020

1st Prize - Niamh Enright.

### COMH Quercus Awards 2019/20 results.

BSc (Midwifery) 1: Anna Teresa Roche.

BSc (Midwifery) 2: Giulia Marinelli.

BSc (Midwifery) 3: Arisha Sadaf Muhammed.

[www.ucc.ie/en/med-health/quercus-college-scholarships/](http://www.ucc.ie/en/med-health/quercus-college-scholarships/)

### Media

Staying abreast of the times (Report on breastfeeding study with women giving birth during COVID-19 pandemic). Sharon Ni Chonchuir (2020) Staying abreast of the times. Cork, Ireland: Newspaper Articles.

Jessie McCarthy Morley about why midwifery appealed to her in Tomorrow's world: UCC medical and nursing students born in 2000 on why they chose their career Irish Examiner. [www.irishexaminer.com/lifestyle/arid-31005113.html](http://www.irishexaminer.com/lifestyle/arid-31005113.html)

Arisha Muhammed BSc Midwifery student and her BSc Nursing student colleagues promoting nursing and midwifery as a career option for HSE.

[www.youtube.com/watch?v=UQsE-TW4\\_WE&t=1s](https://www.youtube.com/watch?v=UQsE-TW4_WE&t=1s)

## Centre of Midwifery Education

The Centre of Midwifery Education (CME) is based in CUMH and is committed to the development and provision of programmes of education and training for registered midwives, nurses and the multidisciplinary team to support service delivery and be responsive to continuous service development. All education programmes support the development and ongoing maintenance of clinical competence and promote evidence-based care.

UHW and STGH have access to continuing education through the Nursing and Midwifery Planning and Development Unit (NMPDU) in Kilcreene, Kilkenny and the Regional Centre for Nurse and Midwifery Education (RCNME) based at University Hospital Waterford. A range of the programmes provided by CME are open to staff in UHK.

## CME Activity and Achievements

In January 2020, two new Midwifery Specialist Coordinator teaching positions were filled in the CME. These new staff members were supported by the CME in developing their education, to include certificates gained in Preparation for Birth and Parenthood in UCC and Pain Management in UCD. They also received distinctions in People Moving and Handling Instructor training. It is envisaged that the qualifications attained will enable ongoing facilitation of the Preparation for Birth and Parenthood module and also support the design and development of a new CME programme on Pain Management for midwives and nurses. Another member of the CME team attended a People Moving and Handling update in 2020. The number of instructors now increased to three, will benefit staff in CUMH.



In response to the COVID-19 pandemic, a suite of multidisciplinary education programmes was provided in the CME. This included Personal Protection Equipment (PPE) Ward Training, Coronavirus and PPE Video and Demonstration Session, Airvo Training and Respiratory Pathway Support Training. The roll out of the COVID-19 education programmes ensured that all staff in CUMH were provided with an up-to-date COVID-19 skill set, focussed on the detection, prevention of transmission and management of the disease. Sessions were repeated frequently to ensure that education was available to as many staff as possible. Records show that an increased number of staff attended from the onset of the pandemic.

Four new programmes were introduced in the CME in 2020, in addition to COVID-19 education. A two-day Induction Programme for new midwives and nurses in the service was updated from a previous programme and a one-day Induction Programme for Healthcare Assistants was commenced. An Introduction to Gynaecology Nursing was also well attended in December 2020.

New classroom IT equipment was installed in both CME classrooms in December 2020. This has significantly enhanced facilitation of education programmes and will also be a vital component for virtual classrooms and online meetings. The CME are currently awaiting updated camera and audio equipment to be installed on the new computers.

All programmes provided by the CME carry Continuing Education Units (CEUs) from the Nursing and Midwifery Board of Ireland (NMBI) and some hold academic accreditation.

Programmes on offer in 2020 include:

- Airvo Training
- Anaphylaxis
- Antenatal/Postnatal Refresher
- Baby Tagging
- Basic Life Support
- Classroom Equipment Training
- Coronavirus and PPE Video and Demonstration Session
- Full IMEWS Programme
- HCA 1 Day Induction Programme
- Hoist Workshop
- Introduction to Gynaecology Nursing
- Irish Maternity Early Warning System (IMEWS) update
- Intravenous Therapy
- K2 Perinatal Training Programme TTT
- Maternity Critical Care
- Midwifery/Nursing Induction One Day Foundation Programme

- Midwifery/Nursing Induction One Day Full Programme
- MN-CMS Update
- Moving and Handling Full Programme
- Moving and Handling 4 Hour Programme
- Newborn Bloodspot Screening Training
- Open Disclosure
- Perineal Repair
- Positions for Labour and Birth
- PPE Ward Training
- PPPG Training Programme
- Preceptorship
- Preparation for Birth and Parenthood Education 1 Day Facilitation Programme
- Preparation for Birth and Parenthood Education Facilitation Module (NU5081)
- Preparation for Birth and Parenthood Education Facilitation Module (NU6153)
- PROMPT 3
- Prostin Workshop
- Respiratory Pathway Support Training
- Shoulder Dystocia Workshops
- Seasonal Influenza Peer Vaccination Programme
- Venepuncture and Peripheral IV Cannulation Full Programme

The CME are also involved in the provision of the Neonatal Resuscitation Programme (NRP) in conjunction with the NRP Clinical Skills Facilitator & Coordinator in CUMH.

In addition, a number of programmes offered by the CME employ blended learning, which is a combination of face-to-face and e-learning i.e. K2 training, IMEWS, Venepuncture and Peripheral Intravenous Cannulation.

## Practice Development, CUMH

During 2020, in conjunction with the Centre of Midwifery Education, the Practice Development Team in CUMH continued to support the continuing professional development of new and qualified midwives/nurses as well as all activities relating to standards and practice throughout the hospital.

The Practice Development Unit coordinates and supports all activities related to midwifery and nursing requirements and standards and practice in CUMH. Much of the Practice Development Team's work is done through a variety of committees and groups within the Ireland South Women & Infants Directorate and with key clinical stakeholders from the clinical site, UCC and the Multidisciplinary Team.

During 2020, new appointments were welcomed within the Practice Development Team including Practice Development Coordinator, 0.5 Allocations Liaison Officer, 1.5 WTE Clinical Placement Coordinators and 1 WTE Clinical Skills Facilitator.

### Practice Development activity and achievements

- In January 2020 new neonatal ECG machines were rolled out to theatre and the birthing suite in line with NRP 7th edition guidelines. Ongoing NRP emergency training and updates were completed in clinical areas. New equipment for NRP was also updated for training.
- The biennial Domestic Violence Conference was held in February 2020 in CUH in collaboration with the Social Work Team. Four Continuing Education Units (CEUs) were awarded from the Nursing and Midwifery Board of Ireland (NMBI).
- From March 2020, the Practice Development Team supported PPE, respiratory care in the clinical setting in line with COVID-19 guidelines, 2020.
- Assisted with COVID-19 pathway training on the wards with support PPE donning and doffing in collaboration with the CME team.
- Assisted in the vaccination roll out with COVID-19 vaccination training in preparation for the COVID-19 vaccine roll out in 2021.
- Supported the marquee in COVID-19 screening of staff and visitors to CUMH.
- In 2020, the new Higher Diploma in Midwifery Requirements and Standards was successfully implemented to a group of 24 students who continued with their practice.
- Successful flu peer vaccination programme “Shot on the spot campaign” was supported by the Practice Development Team in coordination with the newly appointed Infection Prevention Control CNS, where we had a successful uptake of 86% for 2020 in comparison to 38% from 2019.
- 60 nursing students, 81 midwifery BSc students and 7 public health nurse students supported on placement in CUMH, to ensure a consistent learning environment was achieved. Unfortunately, due to the COVID-19 pandemic supernumerary placements were suspended from April to September 2020.
- In September 2020, the BSc 2016 midwifery group qualified, and a small socially distant gathering took place in UCC. Of the 19 students who completed their BSc in midwifery, 18 have taken up posts in CUMH.
- In 2020 one midwife completed the Certificate in Nursing/Midwife Prescribing in UCC and one midwife commenced the programme in collaboration with UCD. Nurse/Midwife Prescribers are supported by the Practice Development Coordinator. Emergency obstetric drills were facilitated on the wards by the clinical skills facilitators throughout the year. New emergency trolleys were provided to all clinical areas and have been supported by the Clinical Skills Facilitators.
- 117 multidisciplinary staff trained in the Neonatal Resuscitation Programme (NRP) in small workshops following COVID-19 safety guidelines. One member of staff completed the Newborn Assessment Observation 3-day workshop.
- The Clinical Skills Facilitator for birthing suite along with the MN-CMS Training Coordinator and Bereavement CMS continued with the educational session, Inter Uterine Death, 2nd and 3rd trimester. This was well evaluated by staff.

Audits conducted included:

- Newborn critical congenital heart screening was conducted which led to a new care pathway, a change of practice, and documentation in practice once the policy was updated. This was the 1st policy to be accepted across the SSWHG with the collaboration and work of the Practice Development Team in December 2020.
- Other audits completed were the Baby Length and CAUTI Educational Audit to support staff with ongoing education and induction of labour review.
- Successful implementation of the Policy, Procedure, Protocol Group (PPPG) continued throughout the year with a specific focus on streamlining PPPGs in collaboration across the four sites.
- Metrics data collection continued with the quality improvement action plans which is ongoing for the Practice Development Team.

Thanks to the commitment and hard work of the Practice Development Team in providing a quality culture of learning to support students and qualified midwives and nurses during 2020.



# Appendix: Selected Publications

## Selection of publications from staff 2020

Adam, F & Dempsey, E (2020) Intuition in decision making – Risk and opportunity, *Journal of Decision Systems*, DOI: 10.1080/12460125.2020.1848375.

Barrett PM, Khashan AS, McCarthy FP, Kublickiene K. Adverse pregnancy outcomes and maternal health: Action needed for long-term benefit. *Acta Obstet Gynecol Scand.* 2020 Sep;99(9):1107-1109. doi: 10.1111/aogs.13945. PMID: 32609893.

Barrett PM, McCarthy FP, Evans M, Kublickas M, Perry IJ, Stenvinkel P, Khashan AS, Kublickiene K. Stillbirth is associated with increased risk of long-term maternal renal disease: a nationwide cohort study. *Am J Obstet Gynecol.* 2020 Sep;223(3):427.e1-427.e14. doi: 10.1016/j.ajog.2020.02.031. Epub 2020 Feb 26. PMID: 32112729.

Barrett PM, McCarthy FP, Evans M, Kublickas M, Perry IJ, Stenvinkel P, Kublickiene K, Khashan AS. Risk of long-term renal disease in women with a history of preterm delivery: a population-based cohort study. *BMC Med.* 2020 Apr 1;18(1):66. doi: 10.1186/s12916-020-01534-9. PMID: 32234061.

Barrett PM, McCarthy FP, Kublickiene K, Cormican S, Judge C, Evans M, Kublickas M, Perry IJ, Stenvinkel P, Khashan AS. Adverse Pregnancy Outcomes and Long-term Maternal Kidney Disease: A Systematic Review and Meta-analysis. *JAMA Netw Open.* 2020 Feb 5;3(2): e1920964. doi: 10.1001/jamanetworkopen.2019.20964. PMID: 32049292.

Barrett PM, McCarthy FP, Evans M, Kublickas M, Perry IJ, Stenvinkel P, Khashan AS, Kublickiene K. Hypertensive disorders of pregnancy and the risk of chronic kidney disease: A Swedish registry-based cohort study. *PLoS Med.* 2020 Aug 14;17(8): e1003255. doi: 10.1371/journal.pmed.1003255. eCollection 2020 Aug. PMID: 32797043.

Barrington K, El-Khuffash A, Dempsey E. Intervention and Outcome for Neonatal Hypotension. *Clin Perinatol.* 2020 Sep;47(3):563-574. doi:10.1016/j.clp.2020.05.011. Epub 2020 May 20. PMID: 32713451.

Beecher C, Drummond L, Foley C, White M, Greene R, Ryan E, O'Dwyer LM, Dowling M, Devane D. Development of a survey instrument to evaluate women's experiences of their maternity care. *Women Birth.* 2021 Jul;34(4):e396-e405. doi: 10.1016/j.wombi.2020.07.007. Epub 2020 Aug 13. PMID: 32800468.

Beecher C, Greene RA, O'Dwyer L, Ryan E, White M, O'Dwyer LM, Beattie M and Devane D. Measuring women's experiences of maternity care: A systematic review of self-report survey instruments. *Women and Birth* 2020;34(3) DOI: 10.1016/j.wombi.2020.05.002.

Beecher C, Drummond L, Foley C, White M, Greene R, Ryan E, O'Dwyer LM, Dowling M, Devane D (2020) Development of a survey instrument to evaluate women's experiences of their maternity care. *Women and Birth* Aug 2020; <https://doi.org/10.1016/j.wombi.2020.07.007>.

Beecher C, Greene RA, O'Dwyer L, Ryan E, White M, O'Dwyer LM, Beattie M and Devane D. Measuring women's experiences of maternity care: protocol for a systematic review of self-report survey instruments. *Systematic Reviews* 2020; 9(1) DOI: 10.1186/s13643-019-1261-8.

Chukudi H U, Corcoran P, Dunn EA, Burke C. Does membrane sweep work? Assessing obstetric outcomes and patient perception of cervical membrane sweeping at term in an Irish obstetric population: a prospective multi-centre cohort study. *Ir J Med Sci.* 2020 Aug;189(3):969-977.

Conlan N, Maher GM, Al Khalaf SY, McCarthy FP, Khashan AS. Association between hypertensive disorders of pregnancy and the risk of asthma, eczema and allergies in offspring: A systematic review and meta-analysis. *Clin Exp Allergy.* 2021 Jan;51(1):29-38. doi: 10.1111/cea.13754. Epub 2020 Oct 23. PMID: 33037716.

Corcoran P, Greene R A, McKiernan J, Manning E, O'Farrell I and Robson M. Using the Ten Groups Classification System (TGCS) to analyse perinatal mortality in Ireland. *American Journal of Obstetrics and Gynaecology* 2020; 222(1): S466. 10.1016/j.ajog.2019.11.750.

Corroenne R, Al Ibrahim A, Stirnemann J, Zayed LH, Essaoui M, Russell NE, Chalouhi GE, Salomon LJ, Ville Y. Management of monochorionic twins discordant for structural fetal anomalies. *Prenat Diagn.* 2020 Oct;40(11):1375-1382. doi: 10.1002/pd.5734. Epub 2020 Aug 19. PMID: 32394424.

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Dillon, C. B., Saab, M. M., Meehan, E., Goodwin, M. J., Murphy, M., Heffernan, Greaney, MS; Kilty C; Hartigan I; Chambers D; Twomey U; Horgan, A. (2020). Staff awareness of suicide and self-harm risk

in healthcare settings: a mixed-methods systematic review. *Journal of affective disorders.*

Dionne JM, Bremner SA, Baygani SK, Batton B, Ergenekon E, Bhatt-Mehta V, Dempsey E, Kluckow M, Pesco Koplowitz L, Apele-Freimane D, Iwami H, Klein A, Turner M, Rabe H; International Neonatal Consortium. Method of Blood Pressure Measurement in Neonates and Infants: A Systematic Review and Analysis. *J Pediatr.* 2020 Jun; 221:23-31.e5. doi: 10.1016/j.jpeds.2020.02.072. PMID:32446487.

Egan AM, Bogdanet D, Griffin TP, Kgosidialwa O, Cervar-Zivkovic M, Dempsey E, Allotey J, Alvarado F, Clarson C, Cooray SD, de Valk HW, Galjaard S, Loeken MR, Maresh MJA, Napoli A, O'Shea PM, Wender-Ozegowska E, van Poppel MNM, Thangaratinam S, Crowther C, Biesty LM, Devane D, Dunne FP; INSPIRED research group. A core outcome set for studies of gestational diabetes mellitus prevention and treatment. *Diabetologia.* 2020 Mar 20. doi: 10.1007/s00125-020-05123-6.

El-Khuffash A, Dempsey E. Advances in Cardiovascular Care in Neonates: Challenging Current Concepts. *Clin Perinatol.* 2020 Sep;47(3):xix-xx. doi:10.1016/j.clp.2020.06.001. Epub 2020 Jul 1. PMID: 32713458.

Finn BP, Crimmins D, Walsh BH, Ni Chroinin M. Sinus pericranii (subgaleal varix). *Arch Dis Child.* 2020 Nov;105(11):1110. PMID: 31296603.

Garvey AA, Dempsey EM. Simulation in Neonatal Resuscitation. *Front Pediatr.* 2020 Feb 25;8:59. doi: 10.3389/fped.2020.00059. eCollection 2020. Review.

Geisler M, Meaney S, Waterstone J, O'Donoghue, K. Stress and the impact on the outcome of assisted reproductive technologies. *Eur J Obstet Gynecol Reprod Biol.* 2020 May;248:187-192. doi: 10.1016/j.ejogrb.2020.03.006. Epub 2020 Mar 6. PMID: 32240891.

Giblin L, McCarthy FP, Gill C, Seed PT, Bramham K, Brockbank A, Chappell LC, Shennan AH. Rule-in thresholds for DELFIA Xpress PIGF 1-2-3 test for suspected pre-eclampsia. *Pregnancy Hypertens.* 2020 Jul;21:35-37. doi: 10.1016/j.preghy.2020.04.005. Epub 2020 Apr 22. PMID: 32388118.

Greene RA, McKernan J, Manning E, Corcoran P, Byrne B, Cooley S, Daly D, Fallon A, Higgins M, Jones C, Kinsella I, Murphy C, Murphy J, Bhuiinneain MN; Maternal Morbidity Advisory Group. Major obstetric haemorrhage: Incidence, management and quality of care in Irish maternity units. *Eur J Obstet Gynecol*

- Reprod Biol. 2021 Feb;257:114-120. doi: 10.1016/j.ejogrb.2020.12.021 . Epub 2020 Dec 23. PMID: 33383410.
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## BOOKS

Clinics in Perinatology. *Advances in Cardiovascular Issues.* Editors: El Khuffash A, Dempsey E. Sept 2020.

Blood Pressure Management in the very preterm infant: more than just millimetres. Dempsey E, Kooi, E. *Hot Topics and Controversies in Neonatology.* Boyle and Cusack, 2020.

Dempsey, E. *The Delivery and the First Days. Breathe, Baby, Breathe! Neonatal Intensive Care, Prematurity, and Complicated Pregnancies.* Annie Janvier, Toronto press 2020.

## FUNDING AWARDED

Health Research Board DIFA-2020-013: PI: Safeguarding the Brain of Our Smallest Children – an open-label phase- III randomised trial of cerebral oximetry combined with a treatment guideline versus treatment as usual in premature infants. €984,000.

Health Research Board DIFA-2020-016: Co PI Randomised Placebo-Controlled Trial of Early Targeted Treatment of Patent Ductus Arteriosus with Paracetamol in Extremely Low Birth Weight Infants. €718,576.

## SELECTION OF INVITED LECTURES 2020

**Professor Keelin O'Donoghue**

"*Perinatal Mortality 2019*". Institute of Obstetricians and Gynaecologists Annual Study Day, Royal College of Physicians of Ireland, Dublin, 27 November 2020.

"*Awareness, Experience and Impact of Stillbirth*". Masterclass Obstetrics and Gynaecology, Royal College of Physicians of Ireland, 18 November 2020.

"*The Experience of Pregnancy with Fetal Anomaly*". Ethics, Law and Pregnancy in Ireland Network (ELPIN) workshop (online) www.ucc.ie/en/elpin/. 18 September 2020.

"*Evidence-Based Investigation of Perinatal Mortality*". NPEC Study Day 2020: Investigations into Perinatal Mortality: Considerations and Lessons Learned. Kingsley Hotel, Cork. 17 January 2020.

"*Access to first trimester ultrasound and service pathways in Ireland in 2020*". Dublin First Trimester Ultrasound Symposium. The National Maternity Hospital, Dublin 2, 11-12 January 2020.

"*Bereavement in the first trimester – a unique grief*". Dublin First Trimester Ultrasound Symposium. The National Maternity Hospital, Dublin 2, 11-12 January 2020.

## SELECTION OF INTERNATIONAL CONFERENCES 2020

### Oral Presentation

Mc Loughlin, G. (2020) The 'Prism of Maternal Attachment' International Conference on Nurse education: Research and Practice, Valencia, Spain Feb 24-26th 2020.

Murphy, M *Pregnancy Loss*, Perinatal Loss Interest Group Meeting, 40th International Marce Society for Perinatal Mental Health, Oct 5-7 2020, Iowa, USA.

## SELECTION OF POSTER PRESENTATIONS 2020

Healy, E. O'Connell, R. Phelan A. (2020) An Exploratory Study of the Support Needs of Midwives in relation to Perinatal Mental Health Minding Mothers with Morbidities II 29th October 2020 Conference Programme.

Martin-Arribas, A. Vila-Candel, R., O'Connell, R., Dillon, M., Vila-Bellido, I., Ángeles Beneyto, I., de Molina-Fernández, I. Rodríguez-Conesa, N., González-Blázquez, C., Escuriet, R. (2020) Transfers of Care between Healthcare Professionals in Obstetric Units of Different Sizes across Spain and in a hospital in Ireland. 5th International Normal Labour and Birth Research Conference Hyderabad, India 2nd -3rd December.

Monis, M. O'Connell, R., Andrews T. (2020) 'Mentalizing possibilities': A Grounded theory of women's decision making of their birth choices in pregnancy following a previous Caesarean Section (CS) 5th International Normal Labour and Birth Research Conference Hyderabad, India 2nd -3rd December.

**Table 11: Ireland South Women & Infants Directorate Grand Rounds 2020**

DATE	TOPIC/PRESENTING TEAM	PRESENTER/S
10/01/2020	<b>Team Monday</b> "Mirror Syndrome presenting in a 20-week pregnancy" "SWEdish Post Term Induction Study"	Dr Bernard Kennedy Dr Zahara ElSafty
24/01/2020	<b>Team Thursday</b> <b>Case presentation:</b> small case series on PET <b>Journal:</b> PITCHES Trial - Can Ursodeoxycholic Acid be used to prevent stillbirth in women with liver disease?	Dr Zahara ElSafty Dr Bernard Kennedy
31/01/2020	<b>NO GRAND ROUNDS</b>	
07/02/2020	Dietetics Gestational Diabetes Mellitus and long-term maternal health outcomes- how to make prevention work.	Linda Culliney
14/02/2020	<b>Neonatology</b> 'Delayed Cord Clamping in Preterm infants' <b>Case:</b> A case of MCDA twins with differing genders There will be a debate then on the use of Antenatal Corticosteroids in moderately preterm infants.	Professor Gene Dempsey Dr Eimear Kelly Dr Cillian Lineen Dr Jurate Panaviene
21/02/2020	<b>Team Tuesday</b> HPV primary screening Case presentation	Dr Matt Hewitt Dr Sophie Boyd
28/02/2020	<b>Team Wednesday</b> Urogynaecology video and female genital tract anomalies	Dr Ann Rowan
	<b>GRAND ROUNDS POSTPONED DUE TO COVID-19</b>	
11/09/2020	<b>Team Wednesday</b> COVID-19 in pregnancy	Dr Daniel Galvin Dr Rebecca Hunter Dr Emily Rutherford
18/09/2020	<b>Midwifery</b> Seasonal Influenza Vaccination Strategy Plan 2020-2021 "Shot on the Spot" Campaign for CUMH	Avril Stannard Sinéad Horgan
25/09/2020	<b>Team Thursday</b> Sepsis: Update to CUMH Antimicrobial Guidelines in Operative Vaginal Delivery	Dr Mei Yee Ng Dr Dheena Segar
02/10/2020	<b>Team Wednesday</b> Transforming theatre	Ms Orfhlaith O'Sullivan
09/10/2020	<b>STGH</b> A case of IUFD <b>Journal:</b> Greentop RCOG update on gestational trophoblastic disease	Dr Dora Butnaru Dr Michael Murphy
16/10/2020	<b>Bleeding Disorder Education</b>	Dr Maeve Crowley Dr Clodagh Ryan
23/10/2020	<b>Health and Social Care Professionals</b> Domestic Violence: Statistical analysis and CUMH Response Domestic violence and pregnancy: Irish research	Ann-Marie McCarthy Dr Siobán O'Brien Green
30/10/2020	<b>Team Tuesday</b> "Use of ICG Fluorescence Technique in sentinel Lymph node Mapping in Gynaecological Cancer"	Dr Maura Hannon Dr Syeda Farah Nazir
06/11/2020	<b>Neonatology</b> Outcomes at extreme of viability at CUMH 2004-2019	Dr Mmoloki Kenosi
13/11/2020	<b>UHW</b> Case Presentation: Life limiting fetal anomaly - 50 shades of gray Article: Multifetal pregnancy - reduction and selective termination	Dr Aisling McDonnell Dr Muiz Dr Ibrahim
20/11/2020	<b>Team Monday</b> Fetal surgery for spina bifida - a review of the literature and case discussion	Dr Charles Leahy Dr Aoife Corcoran Dr Helena Bartels Dr Hannah Glynn
04/12/2020	<b>Team Tuesday</b> SATU - Sexual Assault Treatment Unit	Dr John Coulter
11/12/2020	<b>UHK</b> Case Presentation	Dr Ahmed Eissa Dr Sarah Kennedy
18/12/2020	<b>Midwifery</b> Early Transfer Home Scheme	Alex Campbell, c/AMP (candidate Advanced Midwife Practitioner - Supported Care Pathway)



