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Deputy Daly
Leinster House
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PQ Ref 20839/19 To ask the Minister for Health his views on the fact that the level of midwifery staffing in many maternity units remains below the Birthrate Plus recommendations and in some cases well below same; and if he will make a statement on the matter.

Dear Deputy Daly,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

The HSE Midwifery Workforce Planning Project Report modelled on Birthrate Plus methodologies was published in April 2016. This Report recommended a range of midwifery staffing ratios across the 19 maternity services taking into account the variability in working arrangements and clinical practices between the different sites and services. Notably this Report was based on the model of care in operation in maternity services in 2014. It was acknowledged within the Report that the implementation of the National Maternity Strategy 2016 – 2026 would have a significant impact to the way midwifery services are delivered and will consequently have a further impact on workforce requirements.

On foot of the publication of the Report in 2016, it was identified by the HSE that an additional 196 midwives, in both clinical and non-clinical roles, were required across the maternity services. To address this acknowledged deficient an additional 100 WTE midwives were approved and funded in 2016, whilst a further 71.45 WTE were approved and funded in 2017. All of these additional posts would have been incorporated within the base staffing of each maternity service and as such would have been advertised, recruited and filled. Akin to the existing cohort of midwifery posts in place, these additional posts would have been subject to staff turnover and fluctuations in fill rate that is consistently managed in an on-going basis by all maternity services.

With the commencement of the National Women and Infants Health Programme in the HSE in 2017, a programme charged with driving the implementation of the National Maternity Strategy, a further 77 WTE midwifery posts were approved across the 19 maternity services in 2018. This last tranche of posts included specialist perinatal mental health midwifery posts, advanced midwifery practitioner posts and 52 WTE registered midwifery posts to enable the development and delivery of the midwifery supported care pathway in all 19 services.

The HSE's national employment census as of 31st January 2019 recorded a total of 2,087 WTE midwives in employment in the HSE. This figure encompasses all grades of midwifery personnel, both clinical and non-clinical. This figure will not include those posts that are in the process of being actively recruited into and filled nor would it include other staff who may be directly involved in the provision of maternity care in the 19 services such as theatre nurses, general nurses and ultrasonographers from a radiography professional background as these will not be classified and returned under a midwifery heading.

This active employment figure compares to a national figure of 2,089 WTE midwives as recommended in the 2016 Workforce Report. Whilst it is noted that there are variations across the 19 services when assessed against their individually recommended Birthrate ratios, as referenced previously all sites are actively recruiting with the midwifery employment numbers presented being dynamic, with employment levels fluctuating up and down in each of the maternity services during the course of any given year.

In line with the requirements of the Strategy, the NWIHP is currently commencing an exercise in relation to birth rate plus metrics. The objective of this exercise is to assess and determine the impact on same arising from the new pathways of care being actively developed and implemented in maternity services with particular reference to the midwifery delivered supported care pathway. The outcome of this exercise will inform the estimate process for 2019/2020.

I trust this clarifies the matter.

Yours sincerely,



Mary-Jo Biggs
General Manager, National Women and Infants Health Programme