



Women's Health Taskforce

17th Meeting

Women's Health Taskforce – 17th Meeting

On 5th October, the **Women's Health Taskforce** met for its 17th Meeting.

Welcome

- Address from Minister for Health, Stephen Donnelly, T.D.

Programme Review

- Update on delivery of priority initiatives

Programme Development

- 10-week Workstream programme to implement remaining priority actions in the Action Plan

Working session – Women's Health Hubs

Question 1: What are the key enablers to consider for the implementation of the Women's Health Hubs?

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National Women & Infants Health Programme (NWHIP)

Women's Health Task Force (WHTF)

Desire by clinicians to drive women's health

Feasibility study for new sites – bring more on board

Cultural awareness training/cultural competency training

Anti-racism training

Inclusion of marginalised community including Traveller and Roma

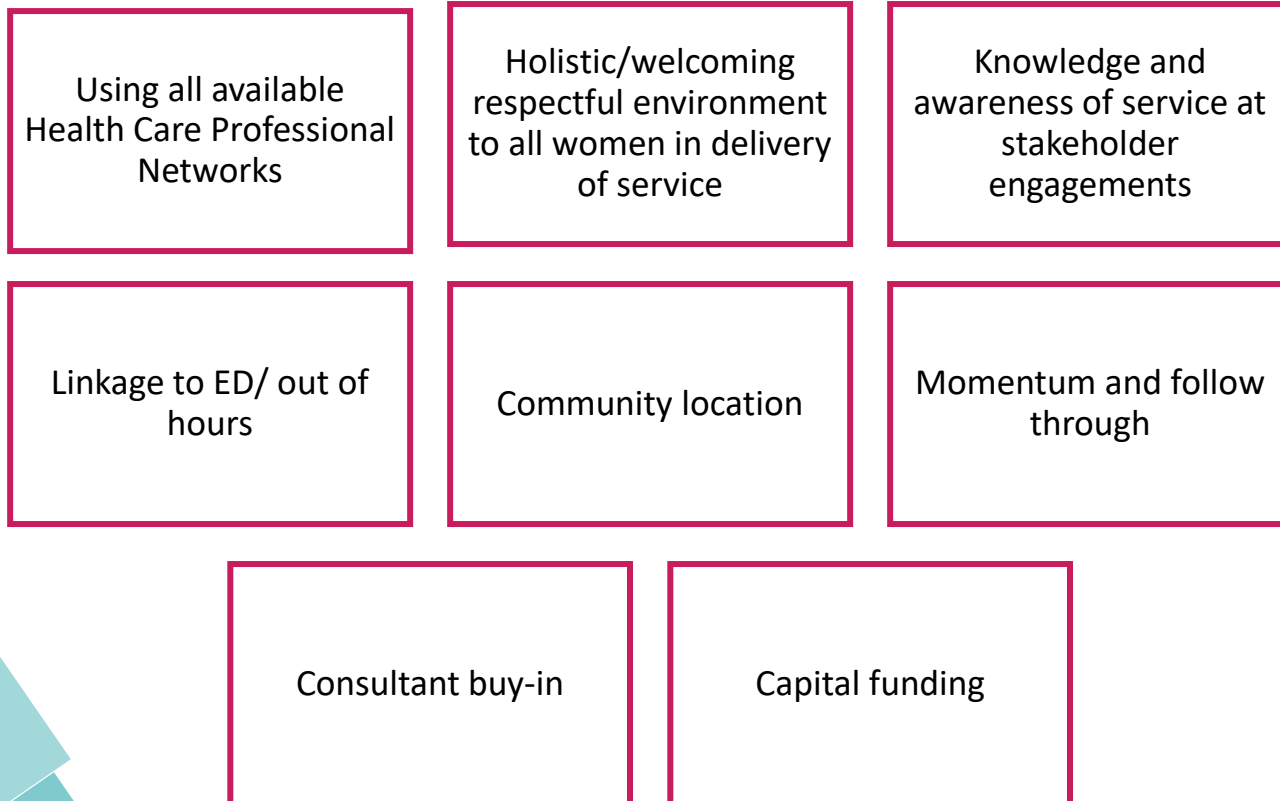
Explore shift of care provision across traditional boundaries in order to combat HCP shortage

Move care provision to lowest access point

What are the key enablers to consider for the implementation of the Women's Health Hubs?



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Allocated resources
supplied to date

Ehealth – pilot
standard care record,
access to timely info
for decision making

Referral pathways

Leadership – Clinical
and policymakers;
national and local

Patient-centred
provision of service
e.g., weekend, late
nights

Collaboration – policy,
community, specialists;
GP Buy in and buy-in
across the system

Political support

Protected and
dedicated resources

Childcare facility on
site

Working session – Women's Health Hubs

Question 2: What are the key barriers to consider for the implementation of the Women's Health Hubs?

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Availability of staff and ANPs

Funding for additional staffing/prioritisation of funding

Resources and capacity

Targeting of 'right' groups – those most in need sometimes don't recognise the need

Funding to ensure national access/continued prioritised funding

Access to space/premises

Ensuring marginalised women are connected to and supported by service infrastructure/transport

What are the key barriers to consider for the implementation of the Women's Health Hubs?

Connecting points in the system

Transport links – sustainable travel and women-centred

Workforce in the face of global shortage of HCW

Social determinants to health – poor/substandard accommodation/ housing discrimination/racism

Lack of hospital management buy-in

Geography/access

Resources – staff/money

What are the key barriers to consider for the implementation of the Women's Health Hubs?

Referral- demand
led

Level of buy-in and
awareness

Infrastructure

Access and
awareness

Information on
access and access
to information

Lack of qualified
HCP to provide
service

Fear of service -
not understanding
culture of all
attending

Working session – Experiences

Action 5: We will improve women's experiences of health services by changing how care is provided.

- ❖ Improving the **culture of care** and supporting healthcare workers to provide the best care to women.
- ❖ Looking creatively at how women and girls can access better **information** on women's health at different ages and stages.
- ❖ Rethinking how we support women, and particularly **marginalised women**, to connect into health supports in settings that are comfortable and convenient.

Experiences Workstream – story so far...

Listening to
women (surveys,
Radical
Listening,
Women's Health
Weekly)

Stakeholder
workshop on 4th
July

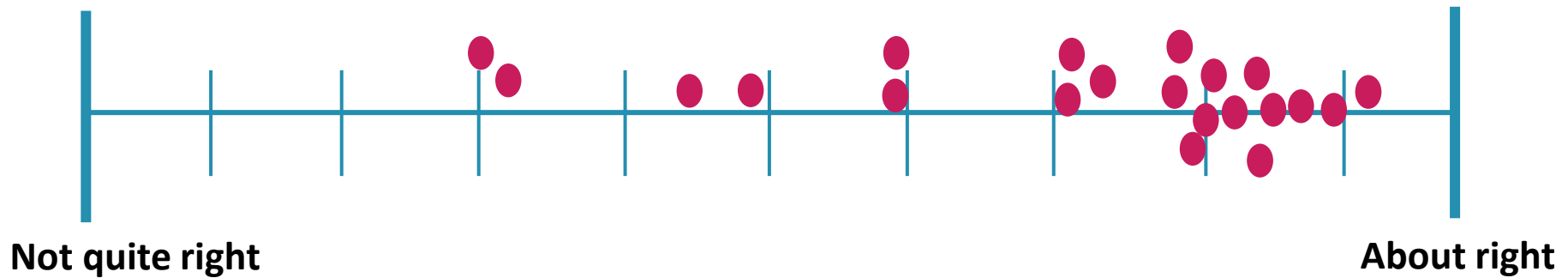
Actions for 2022

Taskforce –
ideas generation
(June 2022)

Taskforce –
prioritisation on
5th October

Experiences Workstream – Temperature Test

Following a presentation of the options worked up so far for action in 2022, the Taskforce was polled on their impressions...



Experiences Workstream – Prioritisation

The Taskforce was then asked to vote for **2** preferred options, for immediate action in 2022...

PR Campaign – using
listening and research*

Sign-posting referral
pathways*****

Increased presence on
social media

Map and audit
university offerings on
women's health

Quick Reference
Guides***

Trusted
webpages/portals*****

Pharmacy Mark***

Experiences Workstream – Prioritisation

The Taskforce provided important **feedback** on the options, emphasising that the following should be considered in any development process...

- ❖ The needs of **marginalised women** should be prioritised, ensuring that any interventions are accessible and impactful for those groups.
- ❖ **Structural barriers** affecting marginalised groups must be addressed.
- ❖ The needs of those with specific health needs should be considered e.g., those requiring support with **mental health** or **chronic health** issues.
- ❖ The role of **regulatory bodies** should be considered, particularly related to how women's health is prioritised in training and education.
- ❖ **Stakeholders** should be included in decision-making processes e.g., GP and allied health.
- ❖ The impact of **echo-chambers** should be considered, making sure to include varied evidence and sources in options development.

The image features a solid teal background. In the top-right and bottom-left corners, there are abstract, layered geometric shapes in various shades of pink and red, creating a modern, graphic feel. The text "Thank You" is centered in a white, bold, sans-serif font.

Thank You