OVERALL CARE						
AREA FOR IMPROVEMENT: Patient feedback and complaints						
SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE			
Improve access to feedback and complaints by offering multiple platforms for timely feedback and prompt responses.	 Increase visibility of feedback and complaints processes (posters, leaflets, discharge information) by displaying clear signage throughout the hospital, including reception and all clinical areas, add to 'whatsupmum' platform and incorporating relevant information with discharge packs 	Parents are more aware of how to provide feedback or raise complaints.	Q1 2026			
	Build awareness and reinforce the HSE 'Your Service, Your Say' policy through encouraging HSELanD training and local briefings facilitated by line managers or Consumer Affairs. Train staff to proactively inform parents about feedback and complaints processes.	Staff confidence in signposting parents to the right channels.	Q2 2026			
	Regularly review and publicise changes made in response to feedback ('You said, we did') via posters, noticeboards, "whatsupmum" platform and discharge information.	Parents trust that feedback leads to improvement.	Q4 2026			

LABOUR AND BIRTH						
AREA FOR IMPROVEMENT: Creating protected time for debriefs, standardising the process, improving communication, and ensuring follow-up opportunities.						
SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE			
Enhance and improve women's labour and birth experience and enhance postpartum.	Introduce a structured debrief for all parents within 24- 48 hours of birth (Pilot developed in the Coombe).	Mothers have the chance to ask questions and understand what happened during labour and birth.	Q1 2026			
	Provide written information about the labour/birth experience in discharge packs, including who to contact for follow-up questions.	Mothers can revisit information and feel more supported after leaving hospital.	Q1 2026			
	Train midwives and doctors in effective communication and debriefing skills (National Communications Programme).	Staff confidence in answering sensitive questions and supporting mothers.	Q2 2026			
	Allocate protected time during ward rounds or discharge to address parent questions.	Mothers feel listened to and reassured, reducing anxiety or confusion.	Q1 2026			
	Establish a follow-up phone call or clinic appointment within 2 weeks for unresolved questions.	Ongoing opportunity for parents to clarify concerns.	Q1 2026			



CARE IN THE HOME AFTER BIRTH

AREA FOR IMPROVEMENT: RHM needs to strengthen communication, staff training, proactive checks, referral processes, and peer/community support to ensure mother feel adequately supported with their mental health after birth.

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SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE		
Enhance post partum care by prioritising perinatal mental health and wellbeing.	 Increase awareness of available mental health services (leaflets, posters, discharge packs, digital resources) by reviewing and updating current documentation and materials to ensure they contain relevant, accurate and accessible information for mothers and staff. 	Mothers will know what support exists and how to access it.	Q1 2026		
	Provide staff training in perinatal mental health awareness and referral pathways, facilitated by the Perinatal Mental Health midwives.	Staff confidence and consistency in supporting mothers.	Q2 2026		
	Promote routine check-ins for mental health during postnatal visits.	Earlier identification of mothers needing support.	Q1 2026		
	Strengthen and streamline referral pathways to specialist mental health services through engagement with Director of Public Health Nursing, ensuring staff are informed of available services and clear on the procedures for referring women requiring additional mental health support.	Faster access to appropriate care.	Q2 2026		
	Develop peer support groups or link with community organisations.	Mothers will feel less isolated and more supported.	Q2 2026		

