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Deputy Daly  
Leinster House  
Dublin 2

**PQ Ref 5342/19 To ask the Minister for Health when community midwifery support will be rolled out for women giving birth in the days immediately following birth once they are discharged from hospital -Clare Daly**

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 Model of Care as proposed in the *National Maternity Strategy Creating A Better Future Together 2016 – 2026* identifies the supported care pathway as one of three pathways which should be available to women accessing maternity services. This pathway, intended for normal-risk mothers and babies, will be delivered by midwives working within a multidisciplinary framework. It is envisaged that within this pathway, most antenatal and postnatal care will be provided in the community and home settings.

The National Women and Infants Health Programme in developing the Model of Care and working with the 19 maternity services has prioritised the implementation of the supported care pathway. In its engagement with sites, a number of services had already undertaken significant work in this area, even prior to the publication of the National Maternity Strategy. Therefore those services with well-established community based midwifery services and schemes like DOMINO or midwifery led units are already actively providing postnatal care in the community by means of early transfer home schemes.

In the remaining maternity services, work programmes have actively commenced regarding the design and delivery of the supported care pathway. This has been supported by additional midwifery posts approved by NWIHP in 2018. In these services, this pathway is being implemented in a phased basis with the initial emphasis being on the antenatal component of care. The next stage thereafter will be the postnatal component of care. Each site is at a different stage of development; with the majority still working on and building their community based antenatal capacity and processes but actively looking towards enabling early transfer home thereafter.

Therefore, whilst at present this remains very much a work in progress for most maternity services, the HSE remains confident that as work progresses in relation to the roll out of the Model of Care, that community based midwifery delivered postnatal care will become more widely available throughout

maternity services in the country. The timelines associated with this component of care is dependent on the progress made in relation to community based antenatal care which NWIHP are currently assessing by means of a programme of site visits. Additionally the deployment of early transfer home services will inevitable require a degree of additional investment in the respective maternity services.

I trust this clarifies the matter.

Yours sincerely,



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