

Clár Sláinte Náisiúnta do Mhná & do Naíonáin

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30th July 2020

Deputy Murphy Dáil Éireann. Leinster House Dublin 2

PQ Ref 17175/20 & 17176/20 To ask the Minister for Health if he will issue revised guidelines to allow fathers-to-be attend scan appointments and antenatal check-ups with their expectant wives and partners and to ask the Minister for Health if he will issue new guidelines allowing new fathers to remain for a longer period with their newborn child and partner after birth and allow for greater visitation of partners to hospitals after the birth of a child; and if he will make a statement on the matter.

Dear Deputy Murphy,

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.

To reduce footfall through maternity units, visiting restrictions were implemented at the start of the Covid-19 pandemic in all public maternity services, similar to measures taken in relation to other public health services. These restrictions extended to attendance by fathers at pregnancy scans and other antenatal appointments on site. The objective of these restrictions was to reduce the impact of the infection on mothers, babies and staff.

The step of restricting footfall on site was implemented as part of a suite of actions taken by maternity services to ensure that essential care to women and their babies continued in such a way that any risk to their wellbeing was kept to an absolute minimum. Other actions taken by services included increased use of tele-consultations, additional clinics being provided in the community, clinics being held in larger spaces and areas in the hospitals etc.

Early in the course of the pandemic a high percentage of staff were unable to attend due to concerns over the infection. As is well known a considerable proportion of people with Covid-19 proven infections were front line healthcare workers. At one stage, maternity services were under significant pressures due to the high numbers of staff affected.

Fortunately, notwithstanding that a small number of mothers were very unwell, the issue of staff being infected has improved, with Covid-19 not having had a major impact on the ability of maternity services to continue to care for women and their babies safely, probably in no small part to the restrictions imposed.

As the number of infected cases in the community becomes less it can be anticipated that these restrictions on spouses and partners will be eased. This easing of restrictions is already happening in a limited manner in a small number of maternity services further to local assessments. The maternity community, midwifery and obstetrics, are very keen to return to what was previously the status quo if this can be facilitated safely.

With reference to scans the maternity services continued to provide scanning throughout Covid-19 despite the fact that the majority of these were not emergencies, one of the reasons for the provision of non-emergency ultrasound investigations was due to the adherence of rigorous conditions regarding attendance at scans.

Unfortunately, the course of the Covid-19 pandemic is proving to be unpredictable and therefore the visiting arrangements for fathers will therefore vary in time and by location. The HSE can but reiterate the importance of a father's role in the birthing process and all units are trying to accommodate whilst maintaining safe practice.

The maternity community is acutely aware of their responsibilities in keeping the hospital environment as safe as possible for mothers and babies and staff. It is not possible to put precise timelines as to when the restrictions will be lifted in totality as this depends on the progress of the disease in our community which although encouraging is, as previously mentioned, unpredictable. Additionally, different hospitals and services may have to respond differently in line with locally emerging issues and public health advice.

I trust this clarifies the matter.

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Yours sincerely,

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

