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Deputy Whitmore,
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30th June 2020

PQ Ref 11373/20 To ask the Minister for Health the way in which access to sexual and reproductive healthcare including cervical screening, STI testing and treatment, abortion and contraceptive services have been impacted by the Covid-19 pandemic; and if he will make a statement on the matter.

Dear Deputy Chambers,

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 matters you raised and the following outlines the position.

Throughout the Covid-19 pandemic, the Health Service Executive has continued to actively review the provision of sexual and reproductive healthcare services with a view to applying infection prevention measures in line with best practice so as to minimise risks to patients and to staff. This has inevitably impacted on the level and manner of provision of a number of services in this area, akin to many other areas of the health services. However where possible and safe to do so, services have endeavoured to continue to support and provide care to patients by utilising either existing or new innovative ways of engagement. A brief overview is provided below of each of the service areas you highlighted and its provision during the pandemic.

Cervical Screening

The National Screening Service (NSS) programmes, including CervicalCheck, were paused in March 2020 as part of the government response to the COVID-19 pandemic. The pause was put in place to protect patients and staff by complying with social distancing guidelines. In addition, the NSS temporarily redeployed staff and resources, where available, to the response to COVID-19. However, patients who were being actively treated in the system at the time of the pause have continued to be managed as resources allow.

The safe restart of screening is now a priority for the NSS. The NSS has finalised issues around the dependencies and risks identified, and will restart screening on a phased basis in July as announced in recent times. At all times, the NSS has focused on ensuring that the recommencement of screening is undertaken in a safe, planned and aligned manner, in keeping with the established principles of running a screening programme with the approach of “at all costs do no harm to healthy people” underpinning work in this area.

Public STI Services

Due to the Coronavirus (COVID-19) situation, there were significant restrictions to public sexual health services between March and early June. This included some closures or restrictions to HIV and STI testing services and pre-exposure prophylaxis clinics however some services had telephone support available. Clinics that were cancelled contacted those who had appointments to consider and review options for prescriptions.

Treatment clinics for HIV, STIs and Hepatitis continued to operate to some level and individual clinics actively engaged with patients under their care so as to ensure they were informed regarding any changes in this regard. A number of clinics continued to take referrals for access to post exposure prophylaxis. Out of hours access through Emergency Departments continued.

Since early June the provision of services has increased with work on-going in this area. The HSE Sexual Health and Crisis Pregnancy Programme continues to work closely with HIV Ireland to monitor service provision through the crisis and to provide the public with updates as to service availability.

Unplanned pregnancy services

My Options provides support and information for those experiencing an unplanned pregnancy. This service continued to operate as normal during the coronavirus situation. HSE-funded face-to-face unplanned pregnancy counselling services moved their services to phone or remote support. They continued to provide the same level of service throughout the Covid pandemic.

Contraception Services

Pharmacists continued to provide women with their usual contraception prescription. If a prescription was due for renewal, and the patient was not in a position to get a new prescription from their GP, their pharmacist may have provided additional supplies of the contraception, if it was safe and appropriate to do so.

Emergency hormonal contraception can be taken up to 5 days after unprotected sex. It was possible to get emergency (hormonal) contraception without prescription from your local pharmacy as usual. Pharmacies continued to stay open during the coronavirus outbreak and emergency contraception consultations with pharmacist continued. Consultations were carried out over the phone in some instances prior to attendance at pharmacy to collect the prescription to reduce time spent in pharmacy.

Termination of Pregnancy Services

Termination of pregnancy services continued uninterrupted in primary care settings during the COVID emergency. The HSE's National Women and Infants Health Programme collaborated with the Department of Health to develop a revised Model of Care to enable remote consultation and provision of care for women who were self-isolating.

Termination of pregnancy services also continued without interruption in secondary care settings. Hospitals continued to provide medical termination services for women who were unsuitable for early medical abortion at home and units that provided surgical termination continued to do so. All maternity units provided care for women with complications from early medical abortion. Terminations for maternal life and health reasons and for pregnancies affected by fatal fetal abnormalities continued as normal throughout this period.

I trust this provides the clarification sought.

Yours sincerely,



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