

Clár Sláinte Náisiúnta do Mhná & do Naíonáin Feidhmeannacht na Seirbhíse Sláinte, Aonad 7A, Áras Dargan,An Ceantar Theas, Baile Átha Cliath 8 T: 076 695 9991

National Women and Infants Health Programme Health Service Executive, Unit 7A, The Dargan Building, Heuston South Quarter, Dublin 8 T: 076 695 9991

12<sup>th</sup> October 2020

Deputy Cairns, Dáil Éireann, Leinster House Dublin 2

PQ Ref 26227/20 To ask the Minister for Health if his Department or the HSE responded to the call by an association in March 2020 to examine and assess the amount of antenatal care that can be provided by midwives antenatally in community halls, centres and hotels or in the home; if so, if the results of the assessment will be provided; 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 matter and the following outlines the position.

Care of pregnant women has continued throughout the Covid-19 pandemic, with maternity services focusing on providing that care in as safe a manner as possible for women, their babies and the staff of services. Similar to all other services in health, challenges have presented over the last number of months. To manage and address these, a number of initiatives have been introduced in 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.

A core delivery mechanism of maternity services during the pandemic was to provide additional antenatal clinics in the community away from the acute maternity services sites with the objective of reducing footfall through maternity services. This increased delivery of care in the community built upon the foundations already in place in maternity services regarding the midwifery delivered supported care pathway as recommended in the National Maternity Strategy. Within maternity services, it is now estimated that approximately 30% of women are now receiving antenatal care in the community. These women will have been assessed as being low risk and as such are clinically appropriate for this care package.

In tandem with increased antenatal care being provided in the community, maternity services have also targeted the expansion of early transfer home services after birth, thereby enabling women to return safely to their homes with their babies and be provided with midwifery care in the safety of their own homes.

This expansion in community based services would have been developed and delivered at local level, with the safety of women and their babies being central to all decisions and changes made.

I trust this clarifies the matter.

Yours sincerely,

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

