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30<sup>th</sup> November 2021

Deputy Bacik,  
Dáil Éireann,  
Leinster House  
Dublin 2

**PQ56117/21: To ask the Minister for Health the status of the operation of the maternity and infant scheme; and the position regarding the provision of adequate post-natal support services for women and babies.**

Dear Deputy Bacik,

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 Maternity and Infant Care Scheme provides for a shared model of care between GP's and Hospital Obstetricians. This agreed programme of care to all expectant mothers ordinarily resident in Ireland, entitles and encourages women to receive their antenatal care as part of this shared model. Under this Scheme, GPs are contracted to provide a schedule of consultation to the expectant mother and baby (universal) during the pre and postnatal stages. This forms part of a combined obstetric model of care involving the expectant mothers Obstetrician/Midwife.

On the woman's/mother's first pregnancy the GP provides an initial examination, if possible before 12 weeks, and a further 5 examinations during the pregnancy, which are alternated with visits to the maternity unit/hospital. The schedule of visits may be changed by the mother's GP and/or hospital obstetrician, depending on their individual situation. For subsequent pregnancies the mother will have an initial examination and a further 6 examinations (see appendix 1).

If the mother has a significant illness, e.g. diabetes or hypertension, they may have up to 5 additional visits to the GP. Care for other illnesses which the mother may have at this time, but which are not related to their pregnancy, is not covered by the Scheme.

Mothers are entitled to free in-patient and out-patient public hospital services in respect of the pregnancy and the birth and are not liable for any of the standard in-patient hospital charges.

<https://www.hse.ie/eng/services/list/3/maternity/combinedcare.html>

After the birth, the GP will examine the baby at 2 weeks and both mother and baby at 6 weeks.

(ii) within two weeks of birth

This visit enables the general practitioner to check on the mother's health status, to review the hospital care experience and to discuss any difficulties in the management of the baby. It also provides the opportunity of meeting the baby; to establish a programme for monitoring growth and development (percentile measurements); to review screening status; and to discuss immunisation options.

(ii) six weeks after the birth

A post-natal examination of the mother should be carried out by the general practitioner during this visit. The Report of the Department of Health Cervical Screening Committee advises that post-natal smears are not recommended in the asymptomatic woman.

The visit provides an opportunity to discuss family planning and issues that may have arisen during the pregnancy e.g. rubella immunisation.

This visit also enables the general practitioner to review the general health of the baby; to conduct another developmental examination; to review feeding practice and the overall management of the baby and to finalise immunisation plans. Following this visit, the general practitioner should forward health information on the baby (e.g. percentile measurements and developmental status) to the Senior Area Medical Officer in the Health Service Executive. It is particularly important that information on any abnormalities be supplied to the Health Service Executive (Senior Area Medical Officer).

After the birth of the baby, the public health nurse will visit mother and baby in their home to give advice and support.

<https://www.hse.ie/eng/about/who/gmscontracts/the-maternity-and-infant-care-scheme-m-i-contract/mother-and-infant-contract.pdf>

I trust this clarifies the matter.

Yours sincerely,



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

## Appendix 1

### Schedule of Visits

Table 1 describes the broad outline of the schedule of visits provided for in the Scheme.

Table 1

#### Maternity and infant Care Scheme: Schedule of Visits

| Number of Weeks of Pregnancy                                      | Visit to General Practitioner            | Visit to Chosen Maternity Unit/Hospital |
|---|--|---|
| Before 12 weeks (preferably as soon as possible after conception) | *  |   |
| Before 20 weeks   |  | *                                       |
| 24  | *  |   |
| 28  | *<br>(Except in case of first pregnancy) | *<br>(In case of first pregnancy)       |
| 30  | *  |   |
| 32  |  | *                                       |
| 34  | *  |   |
| 36  |  | *                                       |
| 37  | *  |   |
| 38  |  | *                                       |
| 39  | *  |   |
| 40  |  | *                                       |
| Birth of the Baby   |  |   |
| 2 Weeks after birth (for baby)                                    | *  |   |
| 6 Weeks after birth (for mother and baby)                         | *  |   |