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24th November 2022

Deputy Nolan
Dáil Éireann,
Leinster House
Dublin 2

PQ Ref 56021/22: To ask the Minister for Health the policies and procedures in place in relation to the treatment of the remains of unborn children whose lives are ended under sections 9, 10 and 11 of the Health (Regulation of Termination of Pregnancy) Act 2018; and if he will make a statement on the matter.

Dear Deputy Nolan.

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.

A central principle of the Health Service Executive and all service providers is that all products of conception are dealt with respectfully regardless of the circumstances e.g. termination, miscarriage etc. All patients presenting for termination service in the acute hospital sector are clearly informed of the options available on individual hospital sites (incineration and/or hospital burial and/or private burial) and informed consent is received in each individual case.

In relation to terminations undertaken in the early stages of pregnancies within the acute sector, the products of conception are ordinarily managed in line with existing processes in place for the management of early miscarriages.

Terminations undertaken in the latter stages of pregnancies in hospitals as provided for under the Act in relation to fatal fetal anomalies, will in many circumstances result in the patient seeking to undertake personal arrangements for example burial, or alternatively the hospital arranging burial in its designated plot.

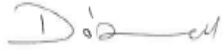
Where a woman has not made a decision about the pregnancy remains within a locally specified and pre-notified period, the hospital responsible for the woman's care will arrange in line with hospital healthcare risk waste disposal policies.

Hospital disposal policies are in place to ensure that pregnancy remains are treated with respect regardless of the circumstances of the loss or termination, and that women are informed that there are handling options available to them. Hospital staff and practitioners should be aware of their unit's guidelines and should explain the options available for disposal of the pregnancy remains. This will be done in a sensitive manner.

Under the Human Tissue Bill, there is no distinction between the disposal of pregnancy remains and the disposal of other tissue from a living person. Pregnancy remains are regarded as the tissue of the woman. A National Contract is in place for the Provision of Hazardous Healthcare Risk Waste Services to the Public Sector. The contract duration is 96 months, running from the 2nd of April 2019 to the 1st of April 2027.

I trust this clarifies the matter.

Yours sincerely,



Davinia O'Donnell, General Manager, National Women and Infants Health Programme