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11th October 2022

Deputy Cairns,
Dáil Éireann,
Leinster House
Dublin 2

PQ 47342/22: To ask the Minister for Health his views on establishing midwife-led clinics for community-based maternity services in areas of the country more than 30 minutes from a maternity hospital and unit.

Dear Deputy Cairns,

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 component of the National Maternity Strategy was the further development and enhancement of the midwifery supported care pathway for women presenting to our maternity service who are clinical identified as being of normal risk. NWIHP have worked closely with all 19 maternity services to enable this further development, with all 19 services now having in place a structured midwifery provided supported care pathway for women as part of their antenatal care journey. Services continue to develop the postnatal component of this care, with maternity sites and services continuing to develop and deploy early transfer home schemes and as of 2022, the formal development of postnatal hubs.

In developing this pathway, NWIHP and the maternity services have sought in so far as possible and feasible to develop midwifery provided clinics off the site of acute maternity services, and locate them in the community. A baseline assessment undertaken by NWIHP in 2020, indicated that at that time, maternity services were providing 91 off site midwifery led and delivered antenatal clinics per week across 59 locations in the community.

In terms of these clinics, which focus on antenatal and postnatal care, the issue of distance from a hospital does not present itself as a safety perspective, as women do not deliver in these clinics. Rather women are monitored and managed in a planned scheduled manner prior to the birth and after the birth – so the need for rapid transport to an acute maternity service, for potentially life savings intervention for either the mother and/or baby during a birthing episode, does not need to be taken into consideration.

I trust this clarifies the matter.

Yours sincerely,



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