



CARE WHILE PREGNANT

WHAT WOMEN SAID ABOUT THEIR EXPERIENCE OF MATERNITY CARE	LISTENING, RESPONDING & IMPROVING	TIMESCALE
HEALTH INFORMATION AND SUPPORT: Women experienced a high level of health information, professional support and autonomy in decision-making from their midwife.	The National Women and Infants Health Programme will work jointly with Community Services to: <ol style="list-style-type: none"> 1. Develop a communication plan to promote the service to women, GP's, acute maternity services and midwives. 2. Integrate the existing evidence based service in to the acute services setting as set out in the National Maternity Strategy. 3. Continue to deliver a dynamic and safe service that is responsive and flexible to healthcare reform and the needs of women and babies. 	Work ongoing and will continue 2020-2022
	WHAT THIS MEANS FOR WOMEN <ul style="list-style-type: none"> • Women will receive standardised information about the option to home birth from their GP and acute maternity services health professionals. • Women will have improved equity of access to safe home birth services. • Women will experience streamlined integrated care and flow of clinical information as required. 	



LABOUR AND BIRTH

WHAT WOMEN SAID ABOUT THEIR EXPERIENCE OF MATERNITY CARE	LISTENING, RESPONDING & IMPROVING	TIMESCALE
TRUST: Women reported exceptionally positive experiences and trust in continuity of midwifery care provided during labour and birth.	The National Women and Infants Health Programme will work jointly with Community Services to: <ol style="list-style-type: none"> 1. Sustain care provided to women in labour and delivery by continuing and enhancing the professional development of midwives. 2. Continue to listen and respond to women through the promotion of 'Your Service, Your Say' and the HSE Home Birth Service survey. 	Work ongoing and will continue 2020-2022
	WHAT THIS MEANS FOR WOMEN <ul style="list-style-type: none"> • Women will continue to be provided with safe quality evidence-based maternity care. • Women's voices will be consistently listened to by a responsive service and their feedback acted upon when service improvement is required. 	



SUPPORT WITH FEEDING AFTER BIRTH

WHAT WOMEN SAID ABOUT THEIR EXPERIENCE OF MATERNITY CARE	LISTENING, RESPONDING & IMPROVING	TIMESCALE
SUPPORT: Women experienced respect and support for their choice of feeding from their midwife.	The National Women and Infants Health Programme will work jointly with Community Services to: <ol style="list-style-type: none"> 1. Sustain respectful and collaborative care provided to women in infant feeding by continuing and enhancing the professional development of midwives. 2. Continue implementation of the WHO/UNICEF Baby Friendly Initiative to protect, promote and support breastfeeding amongst home birth women. 	Work ongoing and will continue through to 2022
	WHAT THIS MEANS FOR WOMEN <ul style="list-style-type: none"> • Women will continue to be provided with evidence based clinical care within a service that values women's choice, works in partnership with them and promotes breastfeeding initiation and support. 	



CARE IN THE HOME AFTER BIRTH

WHAT WOMEN SAID ABOUT THEIR EXPERIENCE OF MATERNITY CARE	LISTENING, RESPONDING & IMPROVING	TIMESCALE
<p>SUPPORT: Women expressed a high level of professional support and involvement in decision-making with their midwife.</p>	<p>The National Women and Infants Health Programme will work jointly with Community Services to:</p> <ol style="list-style-type: none"> 1. Continue the provision of accessible, timely and respectful care to women. 2. Engage with the Department of Health and key stakeholders in Community Care for the standardised provision of postnatal care to women and their babies opting for a home birth. 3. Build the professional capacity and service capability for community midwives. 4. Integrate the existing service into the acute services setting as set out in the National Maternity Strategy. 	Work ongoing and will continue 2020- 2022
	<p>WHAT THIS MEANS FOR WOMEN</p> <ul style="list-style-type: none"> • Women and their babies will continue to receive safe evidence-based postnatal care at home. • Women will have choice in maternal and infant care in the immediate postnatal period and up to six weeks postpartum. • Women and babies will have full access to the schedule of care as set out by the Maternity and Infant Scheme. 	



OVERALL EXPERIENCE

WHAT WOMEN SAID ABOUT THEIR EXPERIENCE OF MATERNITY CARE	LISTENING, RESPONDING & IMPROVING	TIMESCALE
<p>PARTNERSHIP: Women experienced exceptional levels of empowerment and partnership in decision making plus confidence and trust in their midwife.</p> <p>DIGNITY & RESPECT: Women consistently experienced dignity and respect at all stages of maternity care.</p>	<p>The National Women and Infants Health Programme will work jointly with Community Services to improve women's overall experience of homebirth care by implementing the quality improvement initiatives set out below:</p> <ol style="list-style-type: none"> 1. Specific clinical skills-based education programmes for midwives working in the home. 2. A communication plan to explain and promote the service to women, GPs, acute maternity and public health nursing services. 3. Safe, seamless integration of the service to the acute services setting whereby care to women and babies is uninterrupted and supported. 4. Establishment of a Clinical Advisory Group to augment existing clinical oversight and clinical support within the service. 5. Review of the existing policies, procedures and guidelines and continued acknowledgment of the need to respond to changes within national and international maternity policies and guidelines. 6. Expansion of midwifery peer review meetings throughout the country to promote a learning environment and enhance midwifery networks between community and acute-led services. 7. Continued use of HSE policies and guidelines as a benchmark for clinical audit of the service and be responsive to recommendations. 8. Promote the role of independent Advocacy Services as an assistance to women providing feedback. 9. Continue to acknowledge and support midwives as lone workers in the community through the implementation of the HSE Lone Working Policy (2018). 10. Continued promotion of and support for a woman centred Model of Care. 	Work commenced in 2020 and ongoing
	<p>WHAT THIS MEANS FOR WOMEN</p> <ul style="list-style-type: none"> • Women are cared for by midwives who are supported in clinical practice. • Women have access to streamlined maternity services with seamless transfer of clinical information between community and maternity services leading to greater safety in care. • Women receive care within a service underpinned by robust clinical governance structures. • Women are supported to provide service feedback and are listened and responded to. 	