Table 1: Models of ANC during COVID-19 pandemic (6)

<table>
<thead>
<tr>
<th>Models of care</th>
<th>Specific Considerations</th>
<th>Common considerations</th>
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| **Home visiting**    | Plan home visits based on risk management for woman and personnel involved  
If COVID-19 risk identified during or after home visiting, advise patient regarding the use of PPE and other procedures (self-quarantine) to minimize the risk of transmission  
Prior to entering the woman’s home, assess the clinical status and social circumstances for both woman and any support persons at home  
Use standard home visiting risk assessment tools  
If risk of transmission or safety concerns identified, postpone the home visit  
Maintain physical (social) distancing (1.5 meter from the woman) during the visit where possible | Assessment for danger signs in pregnancy  
Antenatal education  
Psychosocial screening  
Routine ultrasound  
Vaccination  
Screening tests  
Supply of Iron; Folic Acid; Calcium; and other context-specific recommended supplements |
| **Self-quarantine/isolation** | If face-to-face contact throughout self-isolation/quarantine is important, use droplet, contact and standard precautions.  
Resume scheduled healthcare when self-quarantine/isolation complete  
Provide data concerning infection prevention and management practices which will stop prevent transmission of COVID-19  
Ventilate rooms by opening windows | 

| **Community clinics** | Consider appointment scheduling to avoid groups of patients waiting  
Advise women to arrive on time (not early) for appointment  
Advise to call ahead and present for care at hospital as advised by doctor or midwife | 

| **Hybrid** | Assess needs as well as history taking and explanation for physical examination process on the day prior to visit by phone or video call (VC)  
For hospital visits, advise patients to wait outside the building until to be called in (e.g. in personal car or safe social distance in grounds)  
Limit face to face visits to 15 minutes just for physical examination  
Do the follow-up after visit using phone or VC | 


| Schedule face-to-face visit for cares that needs physical association /care (e.g. vaccination) |   |   |