

## Aim

Ireland's health system response to COVID-19 offers a distinctive opportunity to advance understanding of government efforts to reform amidst a global pandemic. Our aim was to outline how key policy and budgetary decisions articulated during different stages of the COVID-19 pandemic sought and were enacted to bolster health system resilience through enhanced delivery and accelerated reform.

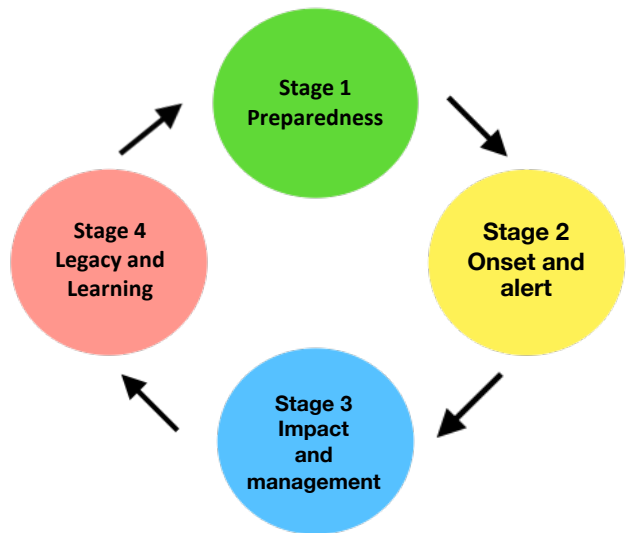
## Key Messages

- The shock of the pandemic created opportunities for Ireland to implement long-term efforts to build healthcare system resilience and support long-term reform
- Implementing change requires a consistent and focused approach to policymaking, funding of initiatives and innovation amongst policymakers, healthcare workers and management.
- Advancing reform is a sign of transformative health system resilience.
- Sustainable radical change can create a positive legacy for health system resilience.

## What did we do?

**RESTORE** in collaboration with **FOUNDATIONS**, two HRB-funded research projects, conducted an analysis of key government, health-related policy and budgetary documents. Together, we examined whether and how the Irish government's pandemic response contributed to health system reform and increased resilience including delivering universal healthcare.

Health system resilience refers to a system's ability to endure shocks throughout the 4-phase lifecycle (see below)



### Wave 1: March to July 2020:

**Public health** messaging for individuals and communities was introduced with an emphasis on community action to prevent the spread of COVID-19.

**Universal free care** at the point of delivery.

**Additional extra funding** was provided for 1) COVID-19 response measures e.g. contract tracing 2) building health system resilience.

### Wave 1 legacy and preparing for wave 2: July to September 2020:

**Strong alignment** with Sláintecare across government, Department of Health and HSE policy documents;  
-The health section in the Programme for Government is entitled 'universal health care'.  
-HSE document specifies how service reintroduction represents an opportunity to reform and deliver elements of Sláintecare.  
- Programme for Government document mentions universalism only once in the health section.

**Massively increased funding** was put into the health system to handle 1) responsiveness 2) to build resilience 3) begin resumption of non-COVID care.

### Wave 2: October to December 2020:

**Health budget allocation** focuses on greater access to (1) primary care (2) COVID-19-related services and staff protection e.g. Personal Protective Equipment (PPE) (3) additional beds and community services (4) new models of providing care e.g. telehealth and new schemes to reduce long waiting times (Fig.1)

HSE investments in primary care and community services are costed and there are several references to 'alignment' with Sláintecare priorities.

### Wave 3: January to May 2021:

HSE and government documents aim for **strategic and permanent reform** in line with Sláintecare.

'Healthy Ireland Strategy Action Plan' is embedded in Sláintecare emphasising a **reduction in health inequalities**.

The public health consultant contract was agreed and the new Sláintecare public-only Consultant Contract was released.

Building upon positive changes made during COVID-19 to enhance reform and build a **constructive legacy**.

### Box 1. Ireland's key innovations

The government response reflected priorities in the Sláintecare reform plan, notably the universal nature of COVID-19 public health and health system response;

- Expanded health budget aimed at resilience, responsiveness in health systems and resumption of non-COVID care.
- Introduced free COVID-19 care.
- Introduced Public Health Consultant Contracts—emphasising population health planning.
- Widespread telemedicine practices adopted.
- Opened new critical care beds
- Significantly increased Sláintecare funding during the pandemic.

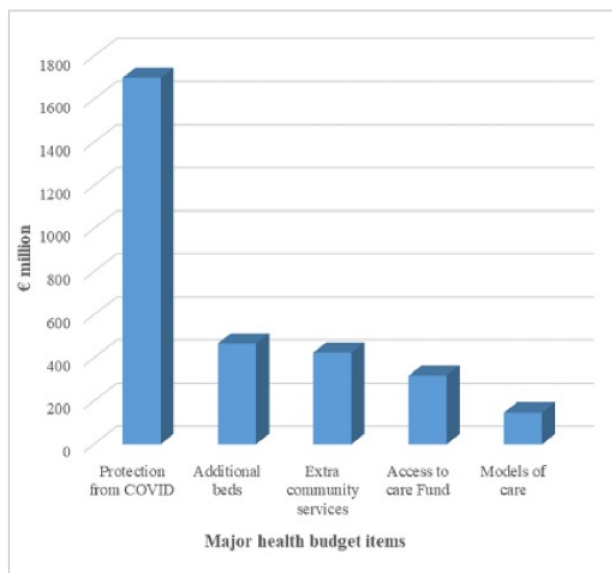


Figure 1. Irish Health budget, October 2021-2022 — Major proposed budget items (€ million)

### Recommendations

**Recognise**—the potential for change that a shock can bring.

**Utilise**—existing health resources through engagement with the public and private health sectors, provide learning, increase the flexibility of care and pursue innovation opportunities.

**Monitor**—the extent to which new policies and enhanced budgets continue to translate into on-the-ground change.

**Coordinate**— policy, funding and innovation to implement changes made, build capacity and continue innovation into the future.

**Sustain**—reform through strong leadership and coordination. Governments that can sustain reform will be in a better position in the present and into the future.

### Conclusion

The Irish government positively utilised the shock of COVID-19 to develop new policies aligned with Sláintecare's goals and progress Ireland's plans towards universal healthcare. Ireland's response to existing demands for care and new demands in the context of COVID-19 has been rapid and agile. Moreover, developing reform amid a crisis through enhanced investments, activities and strategies for delivering universal access to health care is a sign of transformative health system resilience.

This research was a collaboration between the [FOUNDATIONS](#) and [RESTORE](#) projects. Together they aim to learn from the Irish health system's response to COVID-19 and to inform health reform implementation, evaluate and enhance the resilience of the Irish health system to recover from austerity, improve health system performance and deliver effective reform, in the shape of Sláintecare.

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### Further resources

*Building health system resilience through policy development in response to COVID-19 in Ireland: From shock to reform.* Burke, S, Parker, S, Fleming, P, Barry, S, Thomas, S. *Lancet Regional Health*: 2021.

[FOUNDATIONS](#) website

[RESTORE](#) website

HSE internal communications 'Assessing Ireland's health system resilience during the first 18 months of COVID-19' [Webinar discussing this paper \(Discussed from 17min-34min\)](#)