

‘Sláintecare’ – a Pathway to Universal Healthcare in Ireland



What is Sláintecare?

Sláintecare is a **vision** for a new health service in Ireland detailed in the report from the Oireachtas Committee on the Future of Healthcare published on 30 May 2017.

It is the first time there has been **political consensus** on a health reform plan for the next ten years and cross party support on delivering a universal health system in Ireland.

What are the main components of Sláintecare?

Sláintecare will provide:

- Entitlement for all Irish residents to all health and social care
- No charge to access GP, primary or hospital care and reduced charges for drugs
- Care provided at the lowest level of complexity, often outside of hospital, in an integrated way
- eHealth as key tool for developing a universal health system and integrated care
- Strong focus on public health and health promotion
- Waiting times guarantees with a maximum:
 - 4 hour wait time for Emergency Departments
 - 10 days for a diagnostics test
 - 10 weeks for an outpatient appointment
 - 12 weeks for an inpatient procedure.
- Private care phased out of public hospitals
- Significant expansion of access to diagnostics in the community
- Earlier and better access to mental health services
- An expanded workforce including allied health professionals, nurses and doctors. The importance of addressing recruitment and retention issues of all healthcare staff and the development of integrated workforce planning is emphasised in the report
- A new HSE Board, to be established promptly
- Accountability and clinical governance, to be legislated for
- A National Health Fund set up to ring-fence funding for a transitional fund and expansion of entitlements

The report sets out **specific costings** for the expansion of entitlements and system development and **timelines for implementation**, recommending the establishment of an **Implementation Office** to drive the reform.

How long will it take to do this?

The report is for a ten-year period but many of the key actions will be implemented during the first six years.

How much will it cost?

The expansion of entitlements detailed in the report will cost an additional **€2.8 billion by year ten, with a one-off transitional fund of €3 billion** required over the first six years for infrastructure investment, expansion of training capacity and the timely implementation of the eHealth strategy.

Why now?

When a new government was established in May 2016, the Programme for Partnership Government 2016 committed to set up a parliamentary committee to agree cross party consensus on the future of health reform. The Oireachtas Committee on the Future of Healthcare was established in July 2016.

The terms of reference of the Oireachtas Committee on the Future of Healthcare included the need for **political consensus on a ten-year plan** for health reform which was to establish ‘**a universal, single-tier health services where patients are treated on the basis of health need not ability to pay**’, as well as ‘reorienting the health service on a phased basis towards integrated primary and community care, consistent with the highest quality of patient safety’.

How did the Oireachtas Committee come to their conclusions?

The Committee met between June 2016 and May 2017. They invited written submissions from interested representative bodies, individuals and groups. **167 submissions were received from public and private healthcare providers, managers, frontline staff, unions, academics, advocacy and voluntary agencies, industry and interested individuals.**

The committee held 22 public hearings between July 2016 and January 2017. A secretariat from the Houses of the Oireachtas provided administrative and health policy support to the Committee, while a small team from the Centre for Health Policy and Management in the School of Medicine in Trinity College Dublin facilitated three expert-led workshops with the Committee in November and December 2016 and provided technical support until May 2017.

The Committee drafted their report in closed sessions between February and May 2017, all the time seeking to achieve consensus on matters.

What happens now?

A new government was formed in Ireland on 14 June 2017 when the Taoiseach (prime minister) Enda Kenny resigned and a new one (Leo Varadkar) took over. **Simon Harris remained the health minister in the cabinet reshuffle on 14 June 2017 and has been tasked with ‘preparing a detailed response to the report including proposed measures and timelines responding to the report’.**

More information

There was a Daíl debate on Sláintecare on 22 June 2017 – see here for link to [video](#) and [transcript](#).

The full Sláintecare report can be found [here](#) and more information about the committee [here](#).



Over a five-year period, a health card (Carta Sláinte) will be introduced so that everyone is entitled to access to a range comprehensive services including:

- ❖ **Public health/preventative care**, including health promotion activities, screening and family planning, supports for self-management of health
- ❖ **Community diagnostics**
- ❖ **Primary care**, general practice and chronic disease management
- ❖ **Outpatient care** (general & specialised), shifting emphasis to the community
- ❖ **Hospital day case, ambulatory urgent day care treatment and assessment, inpatient, pre-emergency and emergency care**
- ❖ **Rehabilitation**
- ❖ **Drugs**
- ❖ **Access to medical devices and appliances**
- ❖ **Allied professional care**
- ❖ **Dental, ophthalmic and aural care**
- ❖ **Mental healthcare**, counselling and drug addiction services
- ❖ **Maternity care**, including IVF
- ❖ **Long-term care**, including home care supports
- ❖ **Social care**
- ❖ **Palliative care**