

**Social
Democrats**

Alternative Budget

2019

Health - Committed to Sláintecare



#AffordableLives

Health – Committed to Sláintecare

The Sláintecare report was agreed by an all-party Committee and launched in May 2017, following original proposals from the Social Democrats for the development of a single-tier universal health system. The Social Democrats are proud to have led that process. It is the first time that there was cross-party agreement on the way forward for our health services.

This is not insignificant. It meant that for the first time, our health service could be planned and delivered across a medium time-frame without fear of a significant disruption because of a change in Government.

Sláintecare sets out a road-map to transition away from an emergency-led approach to health-care to focus instead on community care, prevention, and equal access for all. It will be a health system comparable to modern European systems and based on need and not on ability to pay.

Implementing Sláintecare

But follow through from Government has been very slow. No specific budget was set aside in 2018 and only a very small number of reforms envisaged by Sláintecare have been delivered so far. If the pace of change in the first year since Sláintecare was agreed is anything to go by, then we will have to wait a very long time for the health service to change.

In the meantime, we had a truly dreadful year for our health services with the cervical check controversy, several high profile resignations, and of course, record waiting lists – now reaching in excess of a million people.

There has never been a better time to fully commit to the model of care outlined in Sláintecare. It's simply a question of whether or not the current Government is genuinely committed to it.

Fully commit Year 1 Funding for Sláintecare

The Social Democrats are calling for Budget 2019 to fully commit to all of the Year 1 proposals set out in Sláintecare. In addition to increases projected in the Government accounts and the National Development Plan and already accounted for in the Fiscal Space calculations, we estimate this will cost about **€350 million in 2019 in extra current funding**. We are also calling on the Government to finally commit to the creation of a **transition fund for Sláintecare, starting with €500m in 2019**. This will fund eHealth, new primary care centres, community diagnostics, new training places and increased hospital bed capacity.

This investment would allow the public to experience the first improvements in their health service as a result of this reform programme. It would mean the following:

- The removal of **hospital inpatient charges**
- A significant reduction in **prescription charges**
- The phased extension of **free GP Care** including the roll-out of the **chronic care programmes** such as for Asthma.
- Massive investment in **new primary care staff**, including public health nurses, speech and language therapists, physiotherapists, general nursing, dieticians and occupational therapists
- Investment in **Primary Care Centres and Urgent Care Centres** with diagnostic facilities
- Improvements in **Dental Care**
- Improved funding for **mental health**, including counselling, community programmes, and adult mental health teams.
- Improvements to **homecare and palliative care**
- Delivery of, for instance, acquired brain injury case managers and greater resources for community eye-care

Additional Healthcare Priorities

In addition to the above measures the Social Democrats would set aside funding for each of these areas:

- extra funding for **addiction services** to begin the restoration of Drug and Alcohol Task Force funding to pre-austerity levels, to create an emerging needs fund, and to deal with the developing crack cocaine epidemic (€15m).
- extra funding for **community eye-care** in addition to Sláintecare commitments to allow for the full roll-out of the recommendations of the Primary Care Eye Services Review Group report (€17m)
- improvements in a range of supports for **people with disabilities** (set out in full in our section on disability) including extra personal assistant hours, an assistive technology passport and the recruitment of extra psychologists for the NEPS programme. We would also set aside funding to recruit staff to allow for the full monitoring of the United Nations Convention on the Rights of People with Disabilities (UNCRPD)
- improved funding for **housing adaptation grants** (€10m)
- investment in **neurological services** (€7.5m)
- improved services for **persons with dementia** (€12m)
- a reduction in the **cost of medication** through reform measures
- extra funding, in addition to that set aside in the Sláintecare programme, to bring an end to **home-care waiting lists** (€20m)
- funding for **improved maternity and abortion services**, an **affordable contraceptives** and **period poverty initiative**, and an **improved sexual health strategy** (€50m)
- funding to ease the means test for a medical card for persons aged 66 years to 69 years (€10m)