

Health Proposals

On *Your* side

Sinn Féin Alternative Budget 2018





Current Expenditure

Health

The health of the nation is Sinn Féin's number one priority. We are determined to address the most serious issues in the health service while also reducing health costs for people.

The issues affecting our health service are severe; health has suffered from decades of underinvestment and an over reliance on expensive outsourcing and agency staff. The problems in our health service reached crisis point following the financial crash and subsequent austerity years due to funding cuts and recruitment moratoriums.

Trolley numbers have reached their worst ever recorded levels while waiting lists have also reached record levels highs, both spiralling further out of control as each month passes. The government have proved time and again that they have no real plan to address this, evidenced by the fact that one in every seven people in the state are on a hospital waiting list.

We are also still yet to make any significant steps towards primary and community care. Primary care centres have been built around the country but many do not have additional staff to operate them, while some areas, both rural and urban, are without a GP.

All the while, our nurses, doctors, health professionals and support staff are under such pressure daily that the system is demoralising them and huge numbers are continuing to leave to work abroad.

Sinn Féin has a plan to begin to address these problems. We have a plan to transform our public health system into the system of choice for patients and staff alike.

Support for Older People - Cost €72.65 million

Home care delivered in the home is the preferred form of care for most older people and their families. Indeed, the vast majority of older people want to live independently in their home for as long as possible, so long as it is medically sound.

We are dedicated to the provision of healthcare services and social care services with equal access for all, based on need and to the greatest extent that resources allow. This right is especially relevant for older people and the provision of support for older people.

Sinn Féin is committed to ensuring that our older people can live with the dignity and respect they deserve. Therefore, we see it as fundamentally important that older people can live independently for as long as possible.

- Increase home help hours by 20% i.e. more than two million additional hours - €50.3 million
- Increase homecare packages by 15% i.e. almost 2,500 additional packages - €22.35 million

Increase Maternity Resources - Cost €15.78 million in 2018 (full year cost €21.03 million)

Ireland had the highest per capita birth rate of all 28 EU Member States in 2016. Despite this, the sector has been underfunded over the last 20 years and Ireland is lagging behind international standards.

Maternity care has been left in crisis, and a series of scandals has undermined confidence in the sector. Added to this is the fact that our maternity services are severely understaffed, lacking both midwives and obstetricians.

- Increase the number of nurses and midwives by 250 - €9.77 million
- Increase the number of obstetricians/gynaecologists by 47 - €6.01 million

Emergency Department & Trolley Crisis - Cost €153 million

Emergency Department (ED) services have been at crisis point for some time; the number of people left on trolleys is at the highest ever recorded since the Irish Nurses and Midwives Organisation started collating such figures through the 'Trolley Watch' survey.

The trolley crisis is a symptom of the malaise that is endemic across the wider health system. There were 862 less hospital beds in 2015 than in 2008.

However, this is not just a bed problem; there are insufficient staff in the acute hospital system, insufficient exit packages and home care options, as well as a lack of nursing home beds to cater for those who cannot be cared for in their home.

The average annual running cost for one bed is €306k, which is inclusive of staffing, theatres, laboratories, non-clinical staffing, and other running costs. It is a fully absorbed cost.

- 500 additional hospital beds - €153 million

Address High Cost of Prescription Charges and Medicines

- Cost €30.3 million

The overwhelming body of evidence shows that charges for drugs can lead to higher costs on the health budget in the medium to longer term, not to mention the serious strain and ill-effects they can have on the health of those who need medications. Prescription charges for medical card holders were originally introduced under the Fianna Fáil-led Government and were subsequently increased by Fine Gael during their last term in Government. While charges were reduced in the last Budget, it is not enough, we would seek to reduce them further and work towards their abolition.

- Reduce prescription charge by €1 per prescription - €25.2 million
- Lower the Drug Payment Scheme monthly limit from €144 to €132 - €5.1 million

Increase Investment in Dental Care - Cost €10.47 million (full year cost €17.227 million)

There has been a drastic scaling back across the main fields of public-funded dental provision including the Dental Treatment Benefit Scheme (DTBS) and the Public Dental Service (PDS). These shortsighted cuts resulted in an increase in the use of more complicated and expensive emergency treatments as a direct result of the removal of opportunities for prevention and early intervention. This situation has undoubtedly led to a significant deterioration in public dental health.

- Reintroduce Protracted Periodontal Treatment (gum cleaning) and a six-monthly scale and polish on the DTBS - €7.03 million
- Directly recruit 105 PDS staff, including dentists, orthodontists and dental nurses - €3.44 million

Increase Ambulance Cover - Cost - €11.26 million

Many communities across the State experience long and dangerous waiting times for ambulances. We cannot have a postcode lottery when it comes to provision of ambulances. The National Ambulance Service (NAS) is a key public service and the government must guarantee basic levels of care across the State.

The NAS Capacity Review Report showed that capacity needs to be increased to meet demands. It pointed to the need for increased resources in terms of personnel, vehicles, and technology.

- Recruit 140 advanced paramedics - €10.6 million
- Purchase and equip three new ambulances for each HSE region - €2.64 million (capital spend GFCF)

Prioritising Disability Services - Cost €53.48 million (full year cost – €61.67 million)

Disability is a societal issue, affecting people of all ages and their families, both directly and indirectly. We want to see a society in which all citizens, including those with disabilities, can play a full and independent part in all aspects of life, relying, as far as possible, on mainstream services for health, education and employment but with the support of tailored disability services where necessary.

- Employ 600 additional front line staff including speech and language therapists, occupational therapists, physios and psychologists - €24.57 million
- 500,000 additional personal assistance hours - €12.5 million
- Invest in neuro rehab teams and transitional services - €3.41 million
- Increase respite care services by 20% - €13 million

GP Care - Cost €5.39 million (full year cost €6.42 million)

General Practitioners are the cornerstone of our primary care services and we must ensure that we have a supply of GPs for the whole of the State. This means not only training more GPs but also making the profession more accessible and attractive through lifting the burdens created by self-employment and directly employing GPs.

Such measures would ensure that our primary care centres are fully and appropriately staffed so that we can deliver a wide and full range of care in our communities, taking pressure off the acute hospital system. It would also allow for the prioritisation of rural areas that are struggling to attract GPs and urban areas where services are overstretched in the deployment of the new salaried posts.

- Increase the annual GP training intake to 200 for 2018 - €2.3 million
- Introduce 25 salaried GP posts plus practice nurses and medical secretaries - €3.09 million

Mental Health Total Cost - €51.23 million

Decades of mismanagement and underfunding of mental health services have left us with a service which does not meet the needs of the people who depend on it.

In 2017, Mental Health accounted for just 6.4% of the overall health budget and saw a paltry increase of just 1.8% on its 2016 spend, well below what was necessary to implement reforms and barely enough to maintain the previous year's performance.

Bed numbers have dropped by 85% in 30 years, while staffing levels have dropped on average by 20%. There is 800 less staff than before the economic crash and only 53% of Child and Adolescent Mental Health posts are filled.

Ireland has the 4th highest teen suicide rate in the EU/OECD and cases of self harm were 9% higher in 2015 when compared to 2007.

Severely distressed and at risk people are left with no choice but turn to A&E's and Garda Stations as no 24/7 service exists.

For decades, mental health funding has been too low. Funding levels must see a significant annual increase until it reaches a minimum of 8.24% of overall health spending as recommended in A Vision for Change (AVfC).

This funding would provide for increases in staff levels in line with AVfC recommendations and work to achieve the development of 24/7 crisis interventions services and increased access to primary care counselling services.

Towards 24/7 Crisis Intervention Services - €20 million

Community mental health services need to gradually switch from the current Monday to Friday daytime hours to a model which is flexible to the needs of those who depend on it. This requires the services to move to a seven day week roster with a Community Mental Health professional available through the weekend to support those in distress due to mental health issues. Additional crisis houses must also be established. Priority should be placed on delivery in areas with higher rates of suicide and self-harm.

Establish 12 additional Child and Adolescent Mental Health (CAMHS) Teams - €8.91 million in 2018 (full year cost €11.88 million)

There are, as of July 2017, over 2,400 children and young people awaiting assessment by CAMHS. While many may have been better served by a functioning primary care counselling service, they have nowhere else to go.

A Vision for Change recommended 2 teams per 100,000 head of population which would mean at least 95 based on current population figures. At present, there are only 67.

30 Additional Mental Health and Intellectual Disability Nurse positions - €1.49 million (full year cost €1.98 million)

To provide additional support to those who have a mental health issue and intellectual disability to ensure they receive the best care for their specific needs. These roles assist in early identification of developing problems, as well as advice and liaison services. This helps to avoid crises and protect the independence of the person.

Deliver more CAMHS beds

There is an urgent need to reopen the 11 CAMHS beds in Cherry Orchard Hospital that were closed in 2017 and increase the number of CAMHS beds overall as recommended by A Vision for Change. Urgent government action is required to reopen those beds and to maximise CAMHS bed capacity in existing units within guidelines for staffing and safe and good practice.

Triple the budget for counselling in primary care - €7.5 million

Early intervention through Primary Care is key to successful mental health outcomes. This is not only better for the patient who is treated in their community but is much more cost effective for the service if hospitalisation or long term care is avoided.

Fund counselling and other mental health services for people currently in Direct Provision - €1 million

Provide additional hours through primary care in areas with Direct Provision Centres for people who have experienced trauma before and during seeking refuge in Ireland.

Five Additional Suicide Crisis Assessment Nurses - €0.33 million

A 60% increase in the number of posts for Nurses working with general settings and A&E to find appropriate treatment for those at risk of suicide.

Prioritising addiction and dual-diagnosis - €12 million

Addiction is a public health issue. The problem of addiction requires effective strategies designed to reduce social, community and individual harm. It is a problem that has particularly affected marginalised communities experiencing wide spread social and economic deprivation. Drugs, alcohol and gambling addiction adversely affects all aspects of a community's life. Most significantly, drugs addiction has resulted in the death of thousands of people across the country.

Despite this, over the last number of years, there has been a reduction in the expenditure and allocations directly attributable to drugs programmes. The resulting cumulative cuts have had a negative impact on service provision. There now needs to be significant investment to restore existing services or develop new services particularly aimed at reducing harm caused by drug use and which will safeguard the health of drug users.