



Annual Report 2006

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Our Mission

To improve the health and well-being of people in Ireland.

Our Role

To support the Minister and the Government by

- advising on the strategic development of the health system including policy and legislation;
- supporting their parliamentary, statutory and international functions;
- evaluating the performance of the health and social services; and
- working with other sectors to enhance people's health and well-being.

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Foreword by the Minister

I welcome this Annual Report which sets out the progress made in 2006 in implementing the Department's *Statement of Strategy 2005-2007*.



Reforming the Irish health care system represents an enormous challenge. It involves one quarter of all Government expenditure, over 100,000 staff and the delivery of a vast range of services for very large numbers of people across the

country. As is the case worldwide, we have to deal with increasing demands on our health and personal social services, advances in medicine and technology, and demographic and societal changes. However, significant progress is being made towards achieving a health system which consistently provides high quality, cost effective and accessible services to all who need them.

During 2006, there was a measurable increase in the services provided to older people in their homes and a new policy was announced which aims to make residential nursing home care for older people accessible, affordable and uniform. Extra funding was provided to support implementation of the new mental health policy, *A Vision for Change*, which will be the basis for the future development of the mental health services. A disability plan was published for the health sector in accordance with the Disability Act 2005. There were also demonstrable improvements in A&E Services and the roll out of primary care teams continued.

The Health Bill 2006 was published which provides for the establishment of the Health Information and Quality Authority incorporating a new and independent inspectorate and registration authority for residential

services. Regulations were introduced to provide for a new complaints system which will help ensure high and uniform standards of complaints management throughout the public health system.

Since becoming Minister for Health and Children in September 2004, I have come to appreciate the range and complexity of issues being addressed by my Department. Together with my colleagues, Ministers of State Brian Lenihan, T.D., Tim O'Malley T.D., and Seán Power, T.D., I would like to thank the Secretary General and all the staff of the Department for their support and commitment throughout the year.

A handwritten signature in black ink, reading 'Mary Harney', written in a cursive style.

Mary Harney, T.D.

Minister for Health and Children

Introduction by Secretary General

I am pleased to introduce this Annual Report on the Department's *Statement of Strategy 2005-2007*. This year's report outlines progress made by the Department on a range of varied issues and also provides an overview of the role of the Department.



During 2006, considerable progress was made on implementing all the Department's high level objectives. Operational functions continued to be transferred from the Department to the Health Service Executive,

enabling the Department to focus on developing policy and legislation. Significant policy documents were developed in the areas of mental health, disability, cancer control and services for older people. Important legislative frameworks were put in place to help protect the interests of service users and support practitioners in working to the highest standards.

Like any Government Department, a key priority is to support the Minister and Ministers of State in their parliamentary work. In 2006, the level of Oireachtas business continued to be very high with the Department answering nearly 6,000 Parliamentary Questions - 13% more than the previous year.

A major challenge facing the Department is the need to join up the health system with other Government Departments and other sectors of the public service. Better health and social outcomes can often be determined as much, or more, by action taken by other Departments. Clear examples are housing, education, fiscal and social welfare policy. The Department continues to work with colleagues in other Departments to progress such cross-sectoral issues. We also continue

to work closely with colleagues in Northern Ireland to maximise the scope for all-Ireland co-operation and to support the Minister in her dealings with other countries and with international organisations.

I would like to acknowledge the dedication and hard work of the staff in the Department and to thank them for their contribution towards achieving our objectives in 2006. I am confident that with their commitment and support, we will continue to meet the new challenges we face going forward.

A handwritten signature in black ink that reads "Michael Scanlan". The signature is written in a cursive, flowing style.

Michael Scanlan
Secretary General

Role of the Department

In brief, the Department is responsible for advising the Minister on the overall organisational, legislative, policy and financial accountability framework for the health sector, while the Health Service Executive (HSE) is responsible for the management and delivery of health and personal social services within the resources made available by the Government.

It is, of course, essential that the Department and the HSE work closely together in order to achieve the shared objective of improving the health and well-being of all the people in Ireland.

Key Priorities

The Department's key priorities are:

- To put in place a system of performance management which allows the Minister to assess the performance of the health system, particularly the HSE, in relation to service and financial outputs, value for money, adherence to governance and accountability standards, quality, equity, access, consistency and outcomes;
- To provide a legislative and regulatory framework that helps protect the interests of service users and supports practitioners in working to the highest standards;
- To provide policy analysis and advice on expenditure acquisition and allocation issues; service development, prioritisation and integration; overall IR, HR and workforce planning issues; and medium and long-term planning issues;
- To work with colleagues in other Government departments and the social partners to ensure that the aim of improving health and social well-being is advanced as appropriate in other parts of the public service;
- To support the Minister and Ministers of State in discharging their parliamentary and statutory functions;
- To meet our obligations in relation to North-South issues, the European Union (EU), the World Health Organisation (WHO), Organisation for Economic Cooperation and Development (OECD) and other international bodies; and

- To ensure we have the internal capacity, in terms of structures, people and systems, to meet our key priorities.

Resources

The approved staff complement for the Department is 653. Some 120 staff are assigned to the Adoption Board, the General Register Office, the Office of the Ombudsman for Children, the Social Services Inspectorate and the recently established Appeals Unit dealing with repayment of nursing home charges. The approved staff complement for the core Department is, therefore, just under 530. This includes nearly 70 staff in the Office of the Minister for Children and some 50 staff working in the Offices of the Minister and the three Ministers of State.

The total provisional outturn for the Department in 2006 under Vote 39 was in the region of €363 million. However, the bulk of this, some €205 million, was allocated to more than 20 agencies such as the National Treatment Purchase Fund, Health Research Board, Irish Medicines Board, BreastCheck, Mental Health Commission, Food Safety Authority of Ireland, Health Information and Quality Authority, the Office of Tobacco Control, and the Office of the Ombudsman for Children. The allocation also included over €92 million for compensation payments for people affected by Hepatitis C, statutory and non-statutory inquiries and legal fees, and payments to the State Claims Agency. The balance of some €66 million represented the Department's Administrative Budget and a number

of other elements. The Office of the Minister for Children has its own Vote, Vote 41, which amounted to approximately €347 million in 2006. Most of this funding was allocated to the new early childcare payment (€281 million).

Developments in 2006

While the HSE is responsible for operational matters, the Minister remains politically accountable for the performance of the health services. The Department has to ensure there are appropriate systems in place to help the Minister assess and account for the performance of the health system. During 2006, the Department worked with the HSE to improve the format and content of its National Service Plan. This now outlines more clearly what services are being provided in return for the considerable investment by taxpayers. It also includes material dealing with quality, value for money, consistency, social inclusion and health outcomes.

Legislation is a core function of any Department. The Health (Repayment Scheme) Act, the Irish Medicines Board (Miscellaneous Provisions) Act and the Hepatitis C Compensation Tribunal (Amendment) Act were enacted in 2006 and the Health Bill and the new Medical Practitioners Bill were published. During 2006, over 40 Statutory Instruments were enacted by the Minister and Ministers of State, 12 of which transposed important EU directives into Irish law, and one of which set up a statutory complaints procedure under the Health Act 2004.

Policy development and advice is another key area for the Department. During 2006, a number of important policy documents were developed and published including:

- the *Health Sectoral Plan on Disability* as part of the Government's overall Disability Strategy;
- a new policy for the mental health services, *A Vision for Change*;
- the second national cancer strategy, *A Strategy for Cancer Control in Ireland 2006*;

- a new nursing home support scheme, *A Fair Deal on Long-Term Nursing Care*.

The Department also dealt with many other policy and service development issues, often in collaboration with the HSE, including:

- advising and assisting the Minister during the negotiation of the annual estimates and budget allocations;
- the negotiation of the health aspects of the new national partnership programme, *Towards 2016*;
- a major new agreement negotiated with pharmaceutical manufacturers;
- contractual negotiations with medical consultants;
- progressing the development of the new national paediatric hospital; and
- the risk equalisation scheme for private health insurance, which was commenced by the Minister with effect from January 1 2006.

Like any Government Department, one of our key priorities is to support the Minister and Ministers of State in their parliamentary work. During 2006, the Department dealt with some 6,000 Parliamentary Questions and 140 Dáil and Seanad Adjournment debates. Over 5,000 Ministerial representations were received and staff from the Department attended various Oireachtas Committee meetings, either with the Minister or to give evidence themselves.

Another important priority was to support the Minister in her dealings with other countries and with international organisations such as the EU, WHO and OECD. We also continued to play an important role in supporting North-South co-operation on health issues.

The organisation plan for the Department is at Appendix 3.

The background is a gradient of teal and blue. It features several large, overlapping, semi-transparent circles in various shades of teal. In the lower half, there are several sets of thin, white, curved lines that sweep across the page, creating a sense of motion and depth. The overall aesthetic is clean, modern, and professional.

High Level Objectives

High Level Objective 1

High Performance

Ensure that the organisational structures, legal and accountability frameworks and management capacity (systems and people) are in place so that health and personal social services are:

- **planned and delivered efficiently and effectively on the basis of the best available evidence; and**
- **monitored and evaluated on the basis of this evidence.**

Health Structures Reform

Establishment of the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) was established on an interim basis during 2005.

Dr. Tracey Cooper was appointed as the first Chief Executive of HIQA in June 2006.

The Health Bill 2006, which is a central part of the health reform programme, was published in December 2006.

The Bill provides for:

- the establishment of HIQA on a statutory basis; and
- the establishment of the Social Services Inspectorate (SSI) within HIQA with a remit to inspect and register all residential services for children, people with disabilities and older people.

The Bill sets out HIQA's functions as:

- setting and monitoring standards on safety and quality in health and personal social services provided by, or on behalf of, the Health Service Executive (HSE) and advising the Minister and the HSE on the level of compliance with those standards;
- carrying out reviews to ensure the best outcomes for resources available to the HSE;
- carrying out assessments of health technologies;
- evaluating information on health and social services and the health and welfare of the population and advising the Minister and the HSE on deficiencies identified;

- setting information standards and monitoring compliance with those standards; and
- undertaking investigations as to the safety, quality and standards of services where there is serious risk to the health or welfare of a person receiving services.

Note: The Health Act 2007 was enacted in April 2007.

Visit www.hiqa.ie for more information.

Listening to People

Regulations to implement the statutory complaints process provided for in Part 9 of the Health Act 2004 were published in December. The Regulations, which apply from January 1 2007, set out the procedures for complaints to the HSE and service providers in relation to health and personal social services. The new complaints system is designed to ensure high and uniform standards of complaints management throughout the public health system and was drawn up following extensive public consultation during 2005 and 2006.

The statutory framework for complaints has three main elements:

- complaints to be investigated by a Complaints Officer appointed by the HSE or service provider, as appropriate;
- provision for the complainant to request a review of any recommendation made by a Complaints Officer; and
- reviews to be carried out by a Review Officer appointed by the HSE or a person to whom the HSE has assigned its review functions.

The Department held a *National Health Consultative Forum* in October; this was the first Forum to be convened under Part 8 of the Health Act 2004. Approximately 350 Forum members were appointed under Ministerial Order including representatives of the health services, voluntary and professional bodies, patient and client groups, trade unions and other Government Departments. The theme of the Forum was *How can we achieve a collaborative partnership between policy makers, providers, users and local communities? What can we learn from other sectors?*

Reform of Key Contractual Relationships

A joint HSE/Department team negotiated new agreements with pharmaceutical manufacturers which set out the pricing and supply of medicines for the Irish health service.

The agreements will provide increased value for money for the State and the consumer by reducing the price of existing drugs and medicines coming off patent, and by using a wider basket of countries for pricing new drugs coming on the market. Over the period of the agreements, which run to 2010, it is expected to achieve savings of the order of €300 million across the GMS and community drugs schemes, and in the cost of drugs to hospitals, through off-patent price cuts of 35% for drugs with substitutable alternatives.

Legislation on Professional Registration

Medical Practitioners Bill

In July, the Heads of a Medical Practitioners Bill were approved by Government and published. Subsequently, 58 submissions from interested parties were received and analysed by officials. This process informed the legal drafting of the Bill which was completed in December.

Amongst the key areas being addressed are registration processes, the maintenance of professional standards

and competence of medical practitioners, changes to fitness to practice procedures and new arrangements for supervising the education and training of medical practitioners at basic and specialist level.

Note: The Medical Practitioners Act 2007 was enacted in April 2007.

Pharmacy Bill

In May, the Government approved the draft Heads and General Scheme of a Pharmacy Bill which will increase competition and raise standards in the pharmacy sector.

Note: The Pharmacy Act 2007 was enacted in April 2007.

Nurse and Midwives Prescribing

During 2006, the Department carried out a comprehensive public consultation on the extension of prescriptive authority to nurses and midwives; over 120 submissions were received from a wide range of stakeholders. The legislative framework to allow for the extension of prescriptive authority to nurses and midwives was provided for in the Irish Medicines Board (Miscellaneous Provisions) Act 2006. A Resource and Implementation Group was established in November to advise the Department on the drafting of regulations to support the introduction of new prescribing arrangements.

Education and Training

A €200 million Government initiative for major reform of medical education and training, from undergraduate level through to postgraduate specialist training, was announced in 2006. A joint Department of Education and Science and Department of Health and Children Steering Group was established to oversee the introduction of the new programme. At undergraduate level, the reforms will include a more than doubling of the number of medical places for Irish and EU students over a four year period from 305 to 725, the introduction of a new graduate entry programme for medicine from 2007 as part of the overall expansion of places, and the development of a new aptitude test for selection for

graduate entry to medicine. There will also be a range of improvements at postgraduate level.

Health Information Systems

As part of the implementation of the Health Service Reform Programme a number of data collection activities are being transferred from the Department to the HSE. In 2006, the Annual Census of Personnel was transferred to the Executive.

The Health Statistics Report, 2005 was published. The report provides a compendium of information covering health services, health status and health determinants as well as data on financing. In addition a report on key health statistics was completed.

At international level, the Department contributed to various health information developments including the World Health Organization (WHO) Health for All database, the European Community Health Indicators (EHCI) project, and the EU online public health portal.

Human Tissue and Cells

The European Communities (Quality and Safety of Human Tissues and Cells) Regulations 2006 (Statutory Instrument No.156 of 2006) were signed into law on April 7 2006. The Regulations lay down standards of quality and safety for human tissues and cells intended for human applications, in order to ensure a high level of protection of human health. They set out the information which must be given to donors before they consent to donation and deal with requirements for procurement, traceability, donor selection, evaluation and testing criteria, storage and packaging and the import and export of tissues and cells.

Health Insurance

Having considered the recommendation and the supporting evidence submitted by the Health Insurance Authority, and subsequent representations submitted by insurers, the Minister for Health and Children determined that risk equalisation would commence from January 1 2006.

This decision was challenged by BUPA, the second largest provider of private health insurance in Ireland. In November, following a lengthy court case covering a range of complex issues, the High Court found in favour of the Government's right to regulate the private health insurance market and to maintain a system of risk equalisation. Risk equalisation aims to encourage competition between insurers and to protect the principle of community rating across the market which means that everyone pays the same premium regardless of age, gender or health profile. In December, BUPA announced its decision to leave the Irish health insurance market.

High Level Objective 2

Responsive and Appropriate Care

To support the health system in developing the capacity - infrastructure, technology, systems and people - to deliver timely and appropriate services within available resources; and

To provide key policy guidance to ensure high quality care is being delivered in the appropriate setting with a focus on patients, clients and their families.

Acute Hospital Services

New Paediatric Hospital

In February, the Government endorsed a decision of the Health Service Executive (HSE) that the new National Paediatric Hospital would be located on a site to be made available by the Mater Hospital. A Joint HSE/Department group was established to advance the development of the new hospital.

Post Mortem Practice and Procedures

Dr. Deirdre Madden's report on Post Mortem Practice and Procedures, mainly in paediatric hospitals, was published by the Department in January.

Subsequently, a Working Group was set up to examine how the recommendations in that Report should be applied to post mortems carried out on babies who died before or during birth, and on minors and adults. The Working Group submitted its report to the Minister in November. The Department has commenced work on scoping the legislation that was recommended in both reports. There was continued oversight of the HSE's implementation of other recommendations in the reports.

Lourdes Hospital Inquiry

The Report of the Lourdes Hospital Inquiry was published in February. The Inquiry, which was chaired by Judge Maureen Harding Clark, was established by the Government following a decision by the Medical Council to remove a consultant

Obstetrician/Gynaecologist at Our Lady of Lourdes Hospital, Drogheda from the Register of Medical Practitioners on grounds of professional misconduct. The Inquiry involved an examination of the practice of peripartum hysterectomy at Our Lady of Lourdes Hospital.

Arising from the findings of the Report, the Government asked Judge Clark to advise on an appropriate scheme of redress for those affected. This work continued during 2006 with the support of the Department. The implementation of the Inquiry findings generally is being progressed by the HSE.

Cancer Services

National Cancer Strategy

The second National Cancer Strategy, *A Strategy for Cancer Control in Ireland 2006*, was published by the Minister in June. The Strategy makes recommendations in relation to the organisation, governance, quality assurance and accreditation of all aspects of cancer care including prevention, screening, diagnosis, treatment, supportive and palliative care.

National Cancer Screening Service

During 2006 the Department developed proposals to set up a National Cancer Screening Service which would amalgamate BreastCheck and the Irish Cervical Screening Programme. The Service was established on January 1 2007. The Service will also advise in relation to other cancer screening programmes, initially colorectal cancer screening.

National Plan for Radiation Oncology

The Department continued to work closely with the HSE in implementing the national plan for the development of radiation oncology services agreed by Government in July 2005.

Persons Infected by Blood or Blood Products

The Hepatitis C Compensation Tribunal (Amendment) Act 2006 was enacted in July. It provides for the establishment of an insurance scheme to address difficulties experienced by persons infected with Hepatitis C and HIV, through the administration within the State of blood and blood products, in arranging mortgage protection and life assurance.

Haemochromatosis Working Group

A Working Group was set up in March to examine the nature and extent of Haemochromatosis in Ireland and to advise the Minister on actions needed to address the problems resulting from this condition.

The Group's report, which was published in June, outlines the need for screening and awareness programmes and for supports for people with the disorder. It also recommends the use of blood from patients with Haemochromatosis by the Irish Blood Transfusion Service.

Services for Older People

The €150 million investment package for services for older people and palliative care allocated in Budget 2005 provided additional resources of €110 million in 2006. This funding reflected a new emphasis on home and day care services and delivered more than 3,000 home care packages and over one million additional home help hours in 2006.

The Health (Nursing Homes) (Amendment) Bill was published in March. This legislation will ensure that the existing subvention scheme for private nursing home

care is grounded in primary legislation and will help the HSE to implement the scheme on a standardised basis across the country. Funding of €6.35 million was allocated for the first full year of the Nursing Home Subvention Scheme in 1994. In 2006, total funding is €160 million, including an additional €20 million allocated in the 2006 Budget for the scheme.

The Health (Repayment Scheme) Act 2006, which provides a legal framework for the repayment of those wrongly charged for publicly funded long stay residential care, came into effect on June 30 2006. The repayment scheme and information campaign was launched by the HSE and the scheme administrator in August.

The *Fair Deal on Long-Term Nursing Home Care* policy, which will come into operation from January 1 2008, was announced in December. This policy aims to make residential nursing home care for older people accessible, affordable and uniform. Under the *Fair Deal* policy, care costs will be clear from the outset and contributions will be based on individual means and assets. Contributions will always be less than disposable income and the State will take on the task of negotiating the best prices with private providers.

Strategy for Diabetes

The National Diabetes Working Group, which included representatives from the Department, service providers and the Diabetes Federation of Ireland, published policy guidance recommendations in 2006. Their report sets out a model for diabetes care together with a range of preventative and therapeutic services which diabetes patients should expect to receive. The report recommended:

- the development of population and high risk approaches to prevent diabetes;
- the development of podiatry services as a priority issue to prevent foot care complications;
- the introduction of a diabetic retinopathy screening programme to prevent eye disease;

- the development of a diabetes register;
- the setting out of a model of high quality care which would describe what children and adults with diabetes should expect to receive throughout their lifetime;
- the prioritisation of diabetes services in the National Service Plan of the HSE;
- the development of a “shared care” model of care which is developed jointly between primary care and specialist services; and
- a planning and service delivery framework, incorporating diabetes service development groups which have management responsibilities for planning and delivering services.

The report is now being implemented by the HSE. Diabetes has been acknowledged as a priority issue and the HSE National Service Plan for 2006 indicated that current policy guidelines are to be translated into specific action plans.

Violence Against Women

Sexual Assault Treatment Services – A National Review, was launched in June 2006. It was commissioned by the National Steering Committee on Violence Against Women. The Review Committee, chaired by a senior official from the Department, consisted of senior practitioners from all the relevant agencies. The recommendations will lead to a more comprehensive rape and sexual assault treatment service, which is more easily accessible, provides appropriate privacy and is compassionate and empathetic to the victim while maintaining expertise and standards in service delivery. Significant funding was announced at the end of 2006.

High Level Objective 3

Fair Access

To provide a policy and legal framework which ensures equity for public patients and enables all patients and clients to access the services they need.

Eligibility For Healthcare

Eligibility Legislation

Work is underway in the Department on a new legislative framework to provide for clear statutory provisions on eligibility and entitlement for health and personal social services. The aim is to produce a clear set of statutory provisions that ensure equity and transparency and to bring the system up to date with developments in service delivery and technology that have occurred since the Health Act 1970.

Medical Cards

The GP Visit Card was announced as a new initiative in 2005 to assist those who did not qualify for a medical card on income grounds but for whom the cost of visiting a GP was often prohibitively high. During 2006, the basic income guideline for the GP Visit Card increased from 25 per cent to 50 per cent above the medical card income guideline. By the end of 2006, over 51,000 people had been issued GP Visit Cards.

Waiting Lists and Waiting Times

The National Treatment Purchase Fund (NTPF) arranged treatment for just under 17,000 patients in 2006, bringing the total treated since its establishment to over 58,000.

Visit www.ntpf.ie for more information.

Services for People with a Disability

The Sectoral Plan of the Department of Health and Children, which was developed through an extensive consultation process with all relevant stakeholders, was published in July. The plan sets out the actions which the Department of Health and Children, the Health Service Executive (HSE) and 27 statutory bodies will take to meet their obligations under the Disability Act 2005. It represents

a commitment at all levels of the health service to access and equity of service for people with disabilities and is an important opportunity to ensure that the needs of people with disabilities are considered in all health policy planning and service delivery processes. Recent budgets have provided substantial additional investment in services for people with a disability as part of the Government's Multi Annual Investment Programme 2005-2009.

The Health Sectoral Plan is the first step in a complex process to establish a baseline for access to health services and for service delivery and standards. The Department of Health and Children and the HSE will undertake an annual review of progress in each of the first three years. It is expected that, following each review, further actions will be identified and specific timeframes agreed with the HSE and the other bodies responsible for service planning and delivery.

One of the most important aspects of the Health Sectoral Plan is the arrangements for commencing Part 2 of the Disability Act 2005, under which people with a disability are entitled to an assessment of needs and a formal statement of services. Part 2 will commence for children aged under five years with effect from June 1 2007. A cross-sectoral team comprising the Department of Health and Children, Department of Education and Science, Health Service Executive and the National Council for Special Education meets on a regular basis and continues to address issues arising in relation to the implementation of Part 2 of the Disability Act 2005 and the Education of Persons with Special Educational Needs Act 2004. The Team is jointly chaired by both Departments and was promised in the Health Sectoral Plan.

A sub group of the cross-sectoral team was established, chaired by the Department of Health and Children with strong participation from relevant stakeholders, to develop standards to guide the assessment of need across both health and education settings.

High Level Objective 4

Better Health for Everyone

To provide a policy and legal framework for the protection and promotion of health and well-being which gives active support to improving quality of life and targets inequalities in health.

Health Protection

Pandemic Influenza Planning

Improving our preparedness to manage pandemic influenza is a high priority. The Department and the Health Service Executive (HSE) worked closely on pandemic influenza planning throughout 2006.

- Work was advanced on a high level plan to inform the public about pandemic influenza, to explain what the Government and the health services are doing to prepare for a possible pandemic, and to give information on what members of the public need to do if there is a pandemic;
- The Pandemic Influenza Expert Group met regularly to develop clinical guidance and public health advice for health professionals and others involved in pandemic influenza preparedness and response;
- A Standing Inter-Departmental Committee on Public Health Emergency Planning was established in February. This committee is addressing issues which go beyond the health aspects of pandemic influenza such as border controls and suspension of travel, travel advices, school closures, suspension of other gatherings and possible security issues; and
- The National Public Health Emergency Team met for the first time in October. This is the forum for managing the interface between the Department and the HSE during the planning and response phases of a public health emergency.

Health Promotion

While health promotion campaigns and other operational functions have been transferred to the HSE,

the Department continues to lead the development of strategic policies. In 2006, progress was made in the following areas:

- **Sexual Health**
The Irish Study of Sexual Health and Relationships was published in October. Commissioned jointly with the Crisis Pregnancy Agency, this is the first major study of its kind in this country; its findings will inform policy and service development in sexual health related areas into the future;
- **Sudden Cardiac Death**
The Task Force on Sudden Cardiac Death produced its report *Reducing the Risk: A Strategic Approach* in March. The report provides recommendations relating to the prevention of sudden cardiac death, the detection of those at high risk, risk assessment of those engaged in sports and exercise, equipment and training programmes to improve the outcome in those suffering from sudden cardiac collapse and the establishment of appropriate surveillance systems. Responsibility for the implementation of the report has been assigned to the HSE. Progress is monitored by the Department;
- **Alcohol**
A Report entitled *Working Together to Reduce the Harms Caused by Alcohol Misuse* was produced by a Working Group established under the Sustaining Progress Special Initiative on Alcohol and Drugs Misuse. The Group agreed a programme of actions to deliver targeted results in relation to underage drinking, binge drinking and drink driving. In November, an Implementation Group, comprising of key stakeholders in Government Departments and Agencies and the Social Partners, was established to monitor and report on progress on the report's implementation;

Social Inclusion

The Department took the lead in relation to a range of actions to promote social inclusion, including:

- a co-ordinated health input into the negotiations leading to agreement on *Towards 2016*;
- developing improved targets in key areas of health inequality within the *National Action Plan on Social Inclusion*;
- supporting the further development of drug treatment services for under 18s by the HSE and the initial mapping by the HSE of important components of its addiction services;
- taking a leading role in the development of a rehabilitation pillar under the National Drugs Strategy; contributing to a HSE Working Group on residential addiction treatment needs; establishing a Working Group to consider Alcohol and Drug Strategy synergies;
- finalising legislation to ban magic mushrooms; and
- advancing work on abolishing an outdated regulatory framework for the drug Dexedrine and on devolving licensing authority for controlled drugs to the Irish Medicines Board.

Children

The Government announced an expanded role for the Minister for Children in December 2005. The effect of the decision was to provide for the bringing together of a range of policy matters related to children under within the Office of the Minister for Children (OMC). The OMC focuses on harmonising policy issues that affect children in areas such as early childhood care and education, youth justice, child welfare and protection, children and young people's participation, research on children and young people and cross-cutting initiatives for children.

The OMC supports the Minister for Children in:

- implementing the National Children's Strategy (2000 – 2010);

- implementing the National Childcare Investment Programme (2006 – 2010);
- developing policy on child welfare and child protection; and
- implementing the Children Act (2001).

The OMC also maintains a general strategic oversight of bodies with responsibility for developing and delivering services for children. A key objective is to bring about more effective implementation of services and interventions for children at local level through cross-Departmental and cross-Agency working.

The OMC is a cross-cutting Government office located in the Department of Health and Children. Staff working on childcare (from the Department of Justice, Equality and Law Reform), on child welfare and child protection (from the Department of Health and Children) and from the National Children's Office have amalgamated to form the OMC. In addition, staff working in the areas of youth justice in the Department of Justice, Equality and Law Reform and education for early years in the Department of Education and Science, will be co-located in the OMC, to provide a joined-up approach to the delivery of services for children.

Further details are available in the Annual Report of the Office of the Minister for Children for 2006.

Mental Health

Mental Health Policy

A Vision for Change - The Report of the Expert Group on Mental Health Policy was published in January. The report makes recommendations on how the mental health services should be managed and organised in the future and has been accepted by the Government as the basis for the future development of the mental health services.

The report proposes a holistic view of mental illness and recommends an integrated multidisciplinary approach to addressing the biological, psychological and social factors that contribute to mental health problems.

It recommends a person-centred treatment approach which addresses each of these elements through an integrated care plan, which reflects best practice and, most importantly, involves both service users and their carers. It also recommends the reorganisation of the current mental health catchment areas, as well as the closure of all the remaining mental hospitals and the re-investment of resources realised in the mental health services.

In May, the Government agreed that a new Central Mental Hospital be developed at Thornton Hall, Co. Dublin and that the cost of developing the hospital would be met from the proceeds of the sale of the existing site in Dundrum, Dublin. A project team, which includes representation from the Department, has been appointed by the HSE to progress the development.

Mental Health Tribunals

The Mental Health Act 2001 brings Irish law into conformity with the European Convention for the Protection of Human Rights and Fundamental Freedoms, particularly in relation to involuntary admissions. During 2006, the final provisions of the Act were commenced and the new Mental Health Tribunals provided for in Part 2 of the Act were established. The purpose of the Mental Health Tribunals is to review the cases of persons who have been involuntarily detained.

Assisted Human Reproduction

In 2006, the Department began work on the development of an appropriate regulatory framework for Assisted Human Reproduction services in Ireland. This work is to involve consideration of a wide range of issues including, when available, the response of the Oireachtas Joint Committee on Health and Children to the *Report of the Commission on Assisted Human Reproduction*.

High Level Objective 5

Supporting Wider Government Programmes and International Health Policy

To support the implementation of Government programmes and policies beyond the health sector and to help meet Ireland's health-related commitments at European and international level.

Supporting Government Programmes

Internal Modernisation

The Department continues to support implementation of the Government's modernisation programme to ensure that we deliver a quality service to our internal and external customers and stakeholders.

In 2006, this included:

- Further restructuring of the Department to better align it with its new role and strategic priorities;
- Providing a comprehensive training and development programme to support our business objectives and enhance our staff's capabilities. The equivalent of 3.9% of the Department's payroll was spent on these initiatives in 2006;
- Producing a *HR Manager's Handbook* to assist managers at all levels in managing staff appropriately;
- Promoting diversity by providing work placements under the Traveller's Initiative and under the Willing, Able and Mentoring (WAM) programme for disabled graduates;
- Exceeding the strategic targets aimed at achieving a greater gender balance at the Assistant Principal and Principal Officer grades;
- Implementing the Department's mobility policy; in 2006 approximately 50% of Principal Officers were reassigned;
- Preparing a Scheme under the Official Languages Act 2003, which will provide for services to be provided through Irish;
- Introducing a range of new guides for staff, including *Supporting the Minister/Ministers of*

State in Oireachtas Matters, Good Practice in Preparing Submissions and a Departmental Procurement Policy and a Corporate Procurement Plan;

- Improving the Department's overall ICT infrastructure, including putting in place a Departmental briefing system and a risk management system and improving the intranet so that staff can access their pay slips and flexi time records on line; and
- Strengthening and developing the partnership process within the Department through regular meetings of the Partnership Committee and its sub-committees.

Workforce Strategy and Policy Development

Pay costs represent the single biggest element of the health sector budget. Increases in pay rates are essentially determined under the national partnership process. Accordingly, the management of employee numbers represents the best way of managing overall pay costs. During 2006, the Department developed and agreed with the Department of Finance a new employment management framework for the HSE which will, among other things, establish clearer links between service developments, funding and employment.

Supporting International Commitments

International Level

A key role of the Department is to support the Minister in her dealings with other countries and with international organisations such as the Council

of Europe, the World Health Organisation (WHO) and the Organisation for Economic Cooperation and Development (OECD). During 2006, the Department continued to ensure that Ireland fulfilled its international obligations and provided input into the formulation of policy in the EU and other appropriate international fora.

During 2006, key activities included:

- Fulfilling the Department's role in relation to Oireachtas Scrutiny of EU Affairs by submitting information notes on 15 EU legislative proposals;
 - Transposing 12 Directives into Irish law;
 - Participating in the annual meeting of the World Health Assembly, at which a number of important topics were discussed including strengthening pandemic influenza preparedness and response, HIV/AIDS and the draft global strategy on prevention and control of sexually transmitted infections; and
 - Adopting the Employment, Social Policy, Health and Consumer Affairs Council conclusions on promotion of healthy lifestyles, Common Values and Principles in EU Health Systems, Health in All Policies, the EU Strategy to reduce alcohol-related harm and reaching political agreement on the 2nd Programme of Community action in the field of health.
- drawing up an *All-Island Suicide Prevention Action Plan* by the National Office for Suicide Prevention (NOSP) and representatives of the DHSSPS;
 - working with the Institute of Public Health to develop information, policy and practice relating to poverty and health on an all-island basis;
 - continuing to promote awareness and knowledge of food safety issues on an all-island basis through the work of Safefood - the Food Safety Promotion Board;
 - facilitating the completion of a Service Level Agreement for the referral of about 50 radiation oncology patients annually from Donegal to Belfast City Hospital; it was also agreed that the number will be increased if there is sufficient demand from patients in Donegal; and
 - the signing of a new Memorandum of Understanding which reaffirms the commitment of the Government and the authorities in Northern Ireland and the United States of America to supporting the work of the All Ireland-National Cancer Institute Cancer Consortium.

North South Co-operation

During 2006, the Department continued to work with colleagues in Northern Ireland. Activities included:

- continuing co-operation on the health agenda areas initiated under the North South Ministerial Council including Accident and Emergency Services, High Technology Equipment and Health Promotion;
- working with the Health Service Executive (HSE) and the Department of Health, Social Services and Public Safety (DHSSPS) in Northern Ireland on infectious disease emergency planning, with particular emphasis on pandemic influenza;

Appendix 1

Legislation enacted in 2006

Irish Medicines Board (Miscellaneous Provisions) Act 2006

The Hepatitis C Compensation Tribunal (Amendment) Act 2006

The Health (Repayment Scheme) Act 2006

- S.I. 12 of 2006 Registration of Marriages (Ireland) Act 1863 (Section 8) (Limerick) Order 2005
- S.I. 53 of 2006 Misuse of Drugs (Amendment) Regulations 2006
- S.I. 54 of 2006 Misuse of Drugs (Exemption) (Amendment) Order 2006
- S.I. 55 of 2006 Misuse of Drugs Act 1977 (Controlled Drugs) (Declaration) Order 2006
- S.I. 64 of 2006 European Communities (Cosmetic Products) (Amendment No.2) Regulations 2006
- S.I. 144 of 2006 European Communities (Sampling Methods and Methods of Analysis for the Official Control of the Levels of Certain Contaminants in Foodstuffs) Regulations 2006
- S.I. 158 of 2006 European Communities (Quality and Safety of Human Tissues and Cells) Regulation 2006
- S.I. 245 of 2006 Appointment of Special Adviser (Minister for Health and Children) Order 2006
- S.I. 303 of 2006 Appointment of Special Adviser (Minister of State at the Department of Health and Children) Order, 2006
- S.I. 306 of 2006 Irish Medicines Board (Miscellaneous Provisions) Act 2006 (Commencement) Order 2006
- S.I. 307 of 2006 Health (Country of Origin of Beef) Regulations 2006
- S.I. 320 of 2006 Food Safety Authority of Ireland Act 1998 (Amendment of First and Second Schedules) Order 2006
- S.I. 333 of 2006 Health Act 2004 (National Health Consultative Forum) Order 2006
- S.I. 338 of 2006 Health (Repayment Scheme) Act 2006 (Commencement) Order 2006
- S.I. 369 of 2006 European Communities (Hygiene of Foodstuffs) Regulations 2006
- S.I. 373 of 2006 European Communities (Cosmetic Products) (Amendment No.3) Regulations 2006
- S.I. 374 of 2006 European Communities (Clinical Trials on Medical Products for Human Use) (Amendment No.2) Regulations 2006
- S.I. 411 of 2006 Mental Health Act 2001(Commencement) Order 2006
- S.I. 412 of 2006 European Communities (Sampling Methods and Methods of Analysis for the Official Control of the Levels of Certain Contaminants in Foodstuffs) (No.2) Regulations 2006

- S.I. 445 of 2006 Health (Interest Payable on Recoverable Health Charges) Regulations 2006
- S.I. 479 of 2006 Health Act 2004 (National Health Consultative Forum Appointment of Members) Order 2006
- S.I. 505 of 2006 Child Care (Pre-School Services) Regulations 2006
- S.I. 506 of 2006 European Communities (Cosmetic Products) (Amendment No. 4) Regulations 2006
- S.I. 547 of 2006 European Communities (Human Blood & Blood Components Traceability Requirements and Notification of Serious Adverse Reactions and Events) Regulations 2006
- S.I. 550 of 2006 Mental Health Act 2001(Authorised Officer) Regulations 2006
- S.I. 551 of 2006 Mental Health Act 2001 (Approved Centres) Regulations 2006
- S.I. 552 of 2006 European Communities (Quality System for Blood Establishments) Regulations 2006
- S.I. 562 of 2006 European Communities (Human Blood & Blood Components Traceability Requirements and Notification of Serious Adverse Reactions and Events) Regulations 2006
- S.I. 579 of 2006 European Communities (Foodstuffs Intended for Particular Nutritional Uses) Regulations 2006
- S.I. 590 of 2006 Children Act 2001 (Amendment to Part 11) (Commencement) Order 2006
- S.I. 598 of 2006 Maintenance Allowances (Increased Payment) Regulations 2006
- S.I. 604 of 2006 Child Care (Pre-School Services) (No 2) Regulations 2006
- S.I. 617 of 2006 Irish Medicines Board (Fees) Regulations 2006
- S.I. 618 of 2006 Infectious Diseases (Maintenance Allowances) Regulations
- S.I. 621 of 2006 Tallaght Hospital Board (Establishment) Order, 1980 (Revocation) Order, 2006
- S.I. 632 of 2006 National Cancer Screening Services Board (Establishment) Order 2006
- S.I. 633 of 2006 National Breast Screening Board (Revocation and Dissolution) Order 2006
- S.I. 642 of 2006 Nursing Homes (Subvention) (Amendment) Regulations 2006
- S.I. 643 of 2006 Child Care (Pre-School Services) (No 2) (Amendment) Regulations 2006
- S.I. 649 of 2006 Health (Charges for In-Patient Services) (Amendment) Regulations 2006
- S.I. 651 of 2006 Health Act 2004 (Commencement) Order 2006
- S.I. 652 of 2006 Health Act 2004 (Complaints) Regulations 2006

Visit www.dohc.ie/legislation to download 2006 legislation.

Appendix 2

Publications in 2006

Agreement between the Association of Pharmaceutical Manufacturers of Ireland and the Health Service Executive on the supply terms, conditions and prices of medicines supplied to the health services

Agreement between the Irish Pharmaceutical Healthcare Association Ltd. and the Health Service Executive on the supply terms, conditions and prices of medicines supplied to the health services

A Strategy for Cancer Control in Ireland 2006

Community Pharmacy Contractor Agreement for Provision of Community Pharmacy Services Under the Health Act, 1970

Core Functions of the Health Service Report

Cultural male circumcision: report of committee

Department of Health and Children Consolidated Salary Scales effective December 1 2006

Department of Health and Children Business Plan 2006

Diabetes: Prevention and Model for Patient Care

Disability Act 2005: Sectoral Plan for the Department of Health and Children and the Health Services

Department of Health and Children Annual Report 2005

Health Statistics 2005

Long-Stay Activity Report 2004 - Supplementary Report

Lourdes Hospital Inquiry

Medical Education in Ireland: A New Direction (Fottrell Report)

Mid-term Review of the UNGASS Declaration of Commitment on HIV/AIDS

National Childcare Strategy 2006 - 2010: A Guide for Parents

North South Survey of Children's Oral Health 2002

Preparing Ireland's Doctors to meet the Health Needs of the 21st Century (Buttimer Report)

Prevention of transmission of blood-borne diseases in the health-care setting

Public Health Emergency Plan

Quality and Fairness: A Health System for You - Action Plan Progress Report 2005

Reducing the Risk : A Strategic Approach. The Report of the Task Force on Sudden Cardiac Death

Report of Dr Deirdre Madden on Post Mortem Practice and Procedures

Report of the Working Group on Post Mortem Practice

Report of 2005 National Health Strategy Consultative Forum

Report of the Consultation on the Health Act, 2004 (Part 9) - Complaints

Report of the National Working Group on the Regulation of Complementary Therapists

Report of the Working Group on Haemochromatosis

Sexual Assault Treatment Services – A National Review

The Irish Study of Sexual Health and Relationships

Vision for Change: Report of the Expert Group on Mental Health Policy

Working Together To Reduce the Harms Caused By Alcohol Misuse

Visit www.dohc.ie/publications to download copies of 2006 publications.

Appendix 3

Organisation Plan for the Department of Health and Children



