



Annual Report *2009*

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Government of Ireland 2010

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Foreword by the Minister for Health and Children



I welcome this Annual Report which sets out the progress made in 2009 in implementing the Department's new Statement of Strategy for the period 2008 – 2010.

The economic backdrop against which health and personal social services are delivered remain very challenging and we are facing severe resource pressures for some time to come. Targeting and the efficient use of the resources that are available is thus of paramount importance.

Those who work in the health sector are extraordinarily dedicated, professional, and hard working. We face huge challenges, particularly in continuing to deliver the best quality services possible in the most effective and efficient way. Indeed, the entire Public Service must now find ways of doing more with less but with goodwill and a willingness to work together we can give the people of Ireland the service that they expect and deserve.

A handwritten signature in black ink, which appears to read 'Mary Harney'.

Mary Harney, T.D.
Minister for Health and Children

Introduction by Secretary General



I am pleased to introduce this Annual Report on the second year of the Department's Statement of Strategy 2008 – 2010.

We are in difficult economic times but demands for our services continue at a very high level. Delivering what is needed will take all of our creativity, commitment, and tenacity in the years ahead. We will work with all of the agencies in our sector to make sure that the public is served. It is our responsibility to craft advice and policies which protect service delivery and standards to the maximum extent possible in these difficult times, and which prepare us to benefit when circumstances improve.

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 2009.

Many of the High Level Objectives of the Department are directly linked to the effective organisation and delivery of services by the HSE and this underlines the need for a close and co-operative working relationship between the two organisations. On behalf of my colleagues in the Department, I would like to thank the Chief Executive Officer, Professor Brendan Drumm, his senior management team and all staff within the HSE for their commitment and assistance in providing improved health outcomes for the people of Ireland during the last year.

Michael Scanlan

Michael Scanlan
Secretary General

PART 1 – CORPORATE INFORMATION

1. MISSION STATEMENT

To improve the health and well-being of people in Ireland in a manner that promotes better health for everyone, fair access, responsive and appropriate care delivery, and high performance.

2. MANDATE

The Minister for Health and Children is politically accountable for developing and articulating Government policy on health and personal social services, and for the overall performance of the health service. Our mandate is to support the Minister and the Ministers of State by advising on policy development and implementation, evaluating the performance of existing policies and service delivery, preparing legislation, and working with other Government Departments, the social partners and international organisations.

Our **functions** include:-

- To develop policy across the full spectrum of health and personal social services, with a focus on quality, equity, access based on need and consistency, and to support implementation of Government policy.
- To negotiate and report on the Health group of votes and analyse financial and service outturns, including value for money and adherence to governance and accountability standards.
- To ensure compliance with Government policies on public service pay and industrial relations, employment control, and modernisation.
- To undertake medium and long-term planning, including workforce planning.
- 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 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 effectively across the public service.
- To develop and refine a system of performance evaluation which helps the Minister to assess the performance of the health system.
- To support the Minister and Ministers of State in fulfilling their parliamentary duties.
- To ensure the fullest possible involvement by Ireland in the work of the European Union, the World Health Organisation and other international bodies in the area of health and children; to progress closest possible co-operation with Northern Ireland.
- To ensure we have the internal capacity, in terms of structures, people, systems etc., to equip us to meet our objectives.

3. THE STRUCTURE OF THE DEPARTMENT OF HEALTH & CHILDREN

3.1 Staff numbers

At the end of December 2009, there was a total of 487 staff employed in the overall Department a decrease of 9% over those employed at the end of 2008.

- 436 were employed in the core Department, including the Offices of the Minister for Children and Youth Affairs, the Office for Older People and the Office for Disability and Mental Health.
- 51 staff were employed across the Adoption Board, the Office of the Ombudsman for Children, the Disability Appeals Office and the Health Repayment Scheme Appeals Office.

24 staff joined the Department as a result of a number of agency rationalisations taking place in the health sector. In addition, youth affairs responsibilities transferred from the Department of Education and Science and the Department of Community, Rural & Gaeltacht Affairs to this Department.

66 staff left the Department under various schemes such as the Incentivised Early Retirement Scheme, the Incentivised Career Break Scheme, normal age related retirement and redeployment or transfer to other Departments

This turnover of staff led to significant challenges both in terms of dealing with loss of organisational knowledge and supporting the integration of new staff.

3.2 Divisions of the Department of Health & Children in 2009 (See App 3)

The Department is organised on a divisional basis with one member of the Management Advisory Committee (MAC) responsible for each division.

Office of the Minister for Children and Youth Affairs (OMCYA). The OMCYA has merged functions from the Department of Health & Children with the Early Years policy function of the Department of Education & Skills and the Youth Justice policy function of the Department of Justice & Law Reform to provide a joined-up Government approach to the development of policy and the delivery of services for children and young people.

Office for Disability and Mental Health. The Office for Disability & Mental Health was established to bring about a more coherent and integrated approach to policy and service delivery for people with disabilities and mental health difficulties. Its work includes developing mechanisms for increased co-operation, co-ordination and collaboration across Government Departments and State agencies, with a particular focus on the interaction between the health system and education, employment and housing services pertaining to the client group.

Office for Older People. The Office for Older People was established to support the Minister for Older People in exercising her responsibilities within the Departments of Health & Children, Social Protection, and Environment, Heritage & Local Government. Its remit is to facilitate the development of operational plans by Government Departments clearly setting out objectives relating to older people.

Primary Care and Food Division.

The Division's role is to promote the development of primary care services, to secure enhanced value for money in the GMS, community drug schemes, dental and optical schemes, and to ensure implementation of legislation and policies in relation to food safety, tobacco control, medicine and cosmetics safety, pharmacy services, medical devices, control of illegal drugs and environmental health.

Acute Hospitals, Cancer and Associated Services.

The Division develops policy for, and evaluates the provision of acute hospital services, cancer services and services relating to blood and human tissue. The overall policy goal is to ensure that treatment is provided in a safe, accessible manner in appropriate locations and that targets for levels of service are achieved.

Chief Medical Officer, incl Patient Safety, Health Protection & Promotion and Social Inclusion.

The Chief Medical Officer's Division provides expert medical and policy advice and assistance to the Minister, Ministers of State and Department and also has responsibility for patient safety & quality, health protection & promotion and social inclusion.

Eligibility, Health Insurance & Resource Allocation.

The role of the Division is to lead on the strategic development of policies relating to Eligibility, Resource Allocation and Financing, Private Health Insurance and Clinical Indemnity.

Finance, Performance Evaluation, Information & Research.

The role of the Division includes planning, negotiating and evaluating the annual Health Estimates (over €15 billion revenue and capital) including direct responsibility for the day to day management of the Votes of the Department and the OMCYA (€740 million).

National HR and Workforce Planning Division.

This Division deals with Government policy on public service pay and conditions, and employment levels and manages major industrial relations issues.

Parliamentary and Corporate Affairs Division.

This Division manages the delivery of the Department's parliamentary affairs, human resources, staff training and development, corporate services, FoI, ICT, records management and communications functions as well as providing legal advice to the Ministers and the Department.

3.3 Parliamentary Functions

- Replies were prepared for 5,797 Parliamentary Questions (PQs) of which 3,179 (55%) were referred for answer to other bodies, mainly the Health Service Executive (HSE).
- 243 responses were prepared for Dáil Adjournments
- 90 responses were prepared for Seanad Adjournments.

- The Minister/Ministers of State received 7,705 representations.
- The Department issued 139 Press Releases and held 49 Press Conferences.
- The Press and Communications Office received 20,459 emails and approx 6,000 phone calls.
- 212 Freedom of Information requests were received.

4. ORGANISATIONAL REVIEW PROGRAMME

In 2009, at the request of the Department of Health & Children, a review of the Department was carried out under the Organisational Review Programme (ORP).

The ORP is a public service modernisation initiative under the auspices of the Department of the Taoiseach. It involves assessing the capacity of individual Government Departments and major Offices to meet their challenges over the coming years. It is essentially a management tool which can be used by Departments to help them improve their performance.

The process involved extensive consultation with staff of the Department and with agencies and stakeholders and a root and branch review of the Department. On completion of the report, the Department will produce an Action Plan designed to address any shortcomings identified in the report which will then go to Government prior to publication along with the reports and Action Plans for a number of other Departments.

5. SIGNIFICANT ISSUES IN 2009

During the course of 2009, the Department of Health & Children dealt with several significant issues and introduced several new measures including:-

5.1. Influenza A (H1N1) Pandemic 2009



Background

A public health alert was received from the World Health Organisation (WHO) on Friday, 24th April 2009 indicating that human cases of influenza type A (H1N1) virus infection had been identified in the US and in Mexico. The Department activated the National Plan for pandemic influenza and the plan was accompanied by a Guidance Report developed by the Pandemic Influenza Expert Group which was further updated in April 2009. The WHO pandemic alert level was raised to phase 6 on 11 June¹. Measures taken included:-

- Provision of antiviral stockpiles for approximately 50% of the population.
- A public information campaign including the distribution to every house in the country of a leaflet containing practical information on what to do to protect against infection, posters and leaflets placed in public facilities, TV and Radio advertisements.
- "At risk" groups were prioritised and were the first to be offered vaccine. Their vaccination commenced on 2nd November with the vaccination of Health Care Workers followed by pre school children from 6 months upwards and school children up to the age of 18. The vaccination of over 65s began in early December and the vaccination programme continued into 2010.

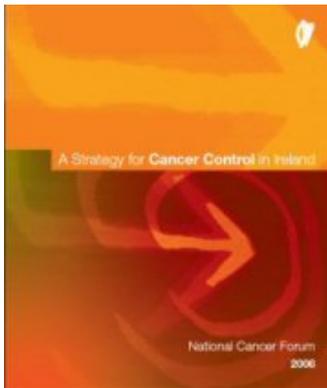
¹ In August, 2010 the WHO announced we are moving into post-pandemic period.

- The HSE was authorised to purchase additional ventilators, dialysis units and ancillary requirements for ICU to meet projected requirements. This additional equipment roughly doubled our adult and paediatric ICU capacity.

Situation at end 2009

- The reported Influenza Like Illness (ILI rate) for the week ending Sunday 27th December 2009 (week 52, 2009), was 21.2 per 100,000 population compared to week 43 (19th - 25th October 2009) in which the ILI rate reached its peak of 210.9 per 100,000.
- At 27th December 2009 a total of 4,521 laboratory confirmed cases of pandemic (H1N1) 2009 had been reported in Ireland.
- Children and young adults were the most affected groups with 80.2% of cases being less than 35 years of age. 1,034 cases of confirmed pandemic (H1N1) 2009 had been hospitalised and 87 admitted to ICU.
- There were 22 deaths reported in confirmed cases of pandemic (H1N1) during 2009.

5.2 National Cancer Control Programme (NCCP)



During 2009 the National Cancer Control Programme was advanced significantly with the completion or progression of a number of key measures with the input of the Department through:-

- Supporting the transfer of breast cancer services to 8 specialist centres by 1 December, 2009.
- Supporting and monitoring the reconfiguration of services for other site specific cancers (lung, prostate, brain tumours, rectal) in keeping with best international practice.
- The performance management of services through the Performance Indicators process and monitoring of Health Information and Quality Authority's (HIQA) audit process of the 8 specialist centres.

5.3 The Nursing Home Support Scheme - A Fair Deal



The Nursing Homes Support Scheme, A Fair Deal, a scheme of financial support for people in need of nursing home care commenced in October 2009. The central principle of the Scheme is that each person makes a contribution towards their care costs based on their ability to pay. The balance of cost is met by the State regardless of whether the person chooses a public, private or voluntary nursing home. This reflects the fundamental purpose of the scheme which is:

- to equalise State support for public and private nursing home residents,
- to render long-term nursing home care affordable and anxiety-free, and
- to ensure that no-one has to sell their home during their lifetime to pay for their care.

See http://www.dohc.ie/issues/fair_deal/ for further information.

5.4 New system of Regulation, Registration and Inspection of Nursing Homes



A Regulatory Impact Analysis (RIA) on the proposed Regulations and the Standards was completed in 2009. This included an *“Assessment of costs of the National Quality Standards for residential care setting for older people in Ireland.”* The RIA and Assessment were published in July 2009. (http://www.dohc.ie/issues/nursing_home_inspection/costs-assessment.pdf)

New Care and Welfare Regulations for all nursing homes were drafted and brought into force on 1 July, 2009 underpinning the National Quality Standards for Residential Care Settings for Older People in Ireland which were approved by the Minister in February, 2009. The Health Information and Quality Authority (HIQA) commenced registration and inspections of all nursing homes on 1 July against the Regulations and Standards.

PART 2 - HIGH LEVEL OBJECTIVES

The Department has set seven “High Level Objectives”, below, which are the strategic pillars on which the Departments Statement of Strategy 2008-2010 is based. The rest of this report is structured around these objectives.

1. Policy and Corporate Support

To provide policy, performance, legislative, planning and governance support to the Minister which helps to ensure that high quality and effective health and social services are delivered within available resources and in accordance with Government policies in a way which gives people fair access to services and other supports which meet their needs.

2. Children and Families

To promote and protect the health and well-being of children and families.

3. Primary Care

To ensure the provision of a broad spectrum of integrated, locally-based accessible services as the first point of contact for people with the health system which, combined with improvements in income, employment, education and housing, will deliver significant health improvements and reduce health disparities over the longer term.

4. Cancer Control

To reduce cancer incidence, morbidity and mortality relative to other EU countries and to support the provision of quality assured cancer services by the Health Service Executive (HSE).

5. Acute Hospitals

To ensure that patients who need acute care can access it as rapidly as possible, in the most appropriate setting at local, regional, or national level, that they receive safe care, and that the outcomes are the optimum that can be achieved for such patients.

6. Disability and Mental Health

To help people with disabilities to achieve their full potential including living as independently as possible. To promote mental health and provide appropriate support to and interventions for people with mental health problems.

7. Care of Older People

To enhance the quality of life of older people and to support them in their homes and communities for as long as possible and, where this is not possible, to provide them with access to appropriate residential accommodation.

HIGH LEVEL OBJECTIVE 1: POLICY AND CORPORATE SUPPORT

Objective - To provide policy, performance, legislative, planning and governance support to the Minister which helps to ensure that high quality and effective health and social services are delivered within available resources and in accordance with Government policies in a way which gives people fair access to services and other supports which meet their needs.

Performance Evaluation Function - HSE Accountability Framework

- The Department worked with the HSE on its National Service Plan 2009 leading to submission of an improved Plan with subsequent approval by the Minister of the Plan within legislative timelines.
- Monitoring of the HSE National Service Plan 2009 was improved.
- An analysis of the first bi-annual report on the HSE Corporate Plan 2008-2011 was completed and a process of ensuring improved bi-annual reports instigated with HSE.
- The development of Service Level Agreements and Grant Aid Agreements between the HSE and non-statutory service providers was progressed and monitored.
- An improved Annual Output Statement for the Health Group of Votes for 2009 was approved and presented to the Select Committee in June 2009.

Value for Money and Policy Reviews (VFM&PR)

- The VFM&PR of the Efficiency and Effectiveness of Long Stay Residential Care for Adults in the Mental Health Services was completed and published (2006-08 cycle).
- The VFM&PR of Allocation and Utilisation of Funding in Acute Services in the Southern Hospitals Group was completed (2006-2008 cycle).
- An Interim Report on the VFM&PR of the Economic Cost and Charges Associated with Private and Semi-Private Treatment Services in Public Hospitals was completed.
- An Interim Report and phase I of a consultation process was completed in respect of the VFM&PR of Disability Services.

Resource Allocation

In April 2009 the Expert Group on Resource Allocation and Financing in the Health sector was established to examine how the existing system of resource allocation within the Irish public health service can be improved to support better the aims of the health reform programme.¹

Employment Control

- A new Employment Control Framework for 2009 was developed with the Department of Finance. Data on employment in the public health service was monitored against the employment ceiling.
- Measures were taken to ensure that public health service employment levels reflected existing Government policy on the prioritisation of certain services and to

¹ Published in July 2010. See http://www.dohc.ie/publications/resource_allocation_financing_health_sector.html

assist in the reorientation of health employment to services delivered in primary and community care.

By the end of the year, employment in the public health service was below that of the employment ceiling- 109,753 which was down from 111,025 at December, 2008.

Workforce Planning

- The report by the Expert Group on Future Skills Needs (EGFSN) and FÁS (Skills and Labour Market Research Unit) — *A Quantitative Tool for Workforce Planning in Healthcare* was published in June 2009.
- The next phase of strengthening workforce planning will be supported by *An Integrated Workforce Planning Strategy for the Health Services — 2009–2012* which was published in November 2009.

Medical HR

- Implementation of the new work arrangements provided for under Consultant Contract 2008 commenced.
- In May 2009 public health specialists accepted Labour Relations Commission proposals for the establishment of an interim out-of-hours service.
- In June, NCHDs accepted Labour Court recommendation 19559 which provided for more flexible working patterns including a core working day of 8.00am to 9.00pm, Monday to Friday, 8.00am to 7.00pm at weekends; and the operation of 5/7 day working from July 2009.

Nursing and Midwifery and Support Staff HR

- The Government approved the drafting of the new Nurses and Midwives Bill in 2009, to replace the Nurses Act 1985.
- Additional functions were assigned to An Bord Altranais in respect of the regulation of Advanced Practise.
- A Review of Practice Development in Nursing and Midwifery in the Republic of Ireland was conducted to identify how nursing and midwifery practice in Ireland compares with the international evidence. From this review a strategic framework for practice development was drawn up which will contribute to the transformation agenda for the health service.
- A '*Research Strategy for Nursing and Midwifery in Ireland 2003-2008; Review of Attainments*' was completed and showed that the Research Strategy for Nursing and Midwifery in Ireland (DoHC, 2003) has laid a solid foundation from which nurses and midwives can make their contribution to health research as it moves forward.
- The Commission to examine how a 35 hour working week can be achieved for Nurses and Midwives completed its final report in March 2009.

Health Promotion

- A National Men's Health Strategy was published.
- An inter-sectoral group was established to monitor implementation of the recommendations of the National Taskforce on Obesity (2005). It issued a report in April detailing progress on each of the recommendations.

- The Department also published a series of sub-reports from the National Health and Lifestyle Survey (SLAN 07) relating to Smoking, Alcohol, Mental Health, Injuries and a comparison of health and lifestyles in Ireland and Northern Ireland.
- A Steering Group was established to develop the alcohol section of a National Substance Misuse Strategy.
- National Guidelines on Physical Activity were developed jointly with the HSE and launched in June 2009.

North/South and European Union

North-South Co-operation in Nursing

- An Inaugural Cancer Care Research workshop was held to maximise the potential to increase capacity and capability of nursing in cancer research by identifying training and development needs. It is planned to have an annual learning event to showcase continuing development of the nursing contribution to cancer research activity across the island of Ireland.
- Four telesynergy events were held in 2009 and they alternated between speakers from the NCI, Belfast and Dublin.

Research, EU and International



Announcing the EU INTERREG IVA €30m funding for the cross border health programme, from left to right: Michael McGimpsey, MLA, Minister for Health, Social Services and Public Safety in Northern Ireland, Mary Harney TD, Minister for Health and Children and Adrian McNamee, Managing Authority Director, Special EU Programmes Body.

- North South Feasibility Study completed and submitted to Ministers.
- North South Ministerial commitments successfully completed.
- Interreg IIIA, an EU funded cross border Programme, completed.
- Interreg IVA Programme arrangements agreed and Programme commenced.
- Action Plan for Health Research published.
- WHO/EB and WHA commitments completed.

EU Engagement

- During 2009, the Department continued to proactively participate in all relevant negotiations to ensure that Ireland's interests were represented at EU level. This included negotiations which led to the adoption of Council Conclusions on the A(H1N1) infection, patient safety, (including the prevention and control of healthcare-associated infections), innovative incentives for effective antibiotics, safe and efficient healthcare through eHealth and alcohol.
- In addition, in 2009 new Regulations dealing with treatment in EU states were finalised. The Department continued its engagement with the HSE and the Department of Social and Family Affairs with regards to the implementation of the

regulations and the development of a system for the electronic exchange of data (EESSI).

- The Department fulfilled its obligations under EU Scrutiny legislation including the submission of the Department's "*Annual Report of Developments in EU policy in the area of public health*" and two six-monthly reports to Oireachtas Joint Committee on European Scrutiny. In addition, 16 Information Notes on health related issues were submitted by the Department to the Oireachtas Joint Committee.
- 14 Directives were transposed and notified by this Department in 2009 covering the areas of food safety, medicines, tobacco control and blood policy.

Quality and Patient Safety

Report of Commission on Patient Safety and Quality Assurance

- A Steering Group to drive implementation of the Commission's recommendations was established in June 2009.
- Work on preparing the necessary legislation to introduce a licensing regime for all public and private healthcare providers was progressed during 2009 with a view to submitting draft Heads of legislation to the Minister in 2010.

Health Information Bill

- In June 2009, the Government approved the drafting of a Health Information Bill to be published in 2010. This will establish a statutory framework to support the use of personal health information and will aim to enhance patient care and safety with proper regard for the privacy, confidentiality and security of such information.
- A policy working group was established to consider further issues surrounding the introduction of an identifier suitable for the health system.

Protected Disclosures of Information (S.I.s Nos. 27 and 268 of 2009)

During 2009 the Minister commenced the provisions of the Health Act 2007 which facilitate employees to disclose matters of concern to them about safety or certain other aspects of publicly provided health and personal social services to an authorised person.

This is known as 'protected disclosure' and provides the individual making the disclosure with statutory protection against penalisation in their employment and against civil liability.

This procedure applies to all employees of the HSE and agencies funded by the HSE as well as bodies established under the Health (Corporate Bodies) Act 1961, e.g. the Health Research Board, National Treatment Purchase Fund and others.

Protection of the community-rated private health insurance market

The Minister decided that a comprehensive strategy and set of actions be prepared to address issues in the private health insurance market in the context of the Government's core policy objective of community rating. At end 2009, a range of measures were in preparation for submission to Government.¹

Internal Governance

- An information specialist was appointed and the research function of the OMCYA was expanded to provide research support to the whole Department.

¹ See <http://www.dohc.ie/press/releases/2010/20100527.html> for details announced on 27th May, 2010.

- The Adoption Board scanning and indexing project (indexing all domestic adoption files) continued with a view to giving staff access to the scanned files and in addition, business continuity and security in relation to the data.
- A security handbook and intranet web site was completed. Other security initiatives were the installation of endpoint encryption. A risk management assessment was undertaken for core ICT services. A range of new security products were procured.
- Significant ICT support for the CCSS/ECCE scheme operated by OMYCA was undertaken including a payment and data collection scheme system. An electronic funds transfer (EFT) system was installed for Accounts.
- Two agencies, the National Council on Ageing and Older People and the Women's Health Council were subsumed into the Department and one agency, the Post Graduate Medical and Dental Board was subsumed into the HSE in 2009. A significant amount of work was also undertaken throughout 2009 to ensure that an additional agency will be subsumed into the Department in 2010 and a further three into the HSE in 2010.

Legislation

Four Acts were enacted in 2009:

- The Nursing Homes Support Scheme Act 2009 provided the legislative basis for the 'Fair Deal' scheme.
- The Public Health (Tobacco) (Amendment) Act 2009 introduced graphic warnings on tobacco products.
- The Health Insurance (Miscellaneous Provisions) Act 2009 provided for a cost subsidy between younger and older insured persons by means of tax credits to ensure that the burden of the cost of health services is shared by all insured persons and that the old can have access to health insurance cover.
- The Health (Miscellaneous Provisions) Act 2009 provided for the rationalisation of a number of health agencies and for a number of miscellaneous amendments.

68 Statutory Instruments were prepared in 2009 and are listed in Appendix 1.¹

¹ Acts and Statutory Instruments can be downloaded at <http://www.irishstatutebook.ie/home.html>

HIGH LEVEL OBJECTIVE 2: CHILDREN AND FAMILIES

Objective:- To promote and protect the health and well-being of children and families.

Policy/Legislative Framework

- Adoption Bill 2009 was published in January 2009. The Bill gives the force of law to the Convention on the Protection of Children and Co-operation in respect of Intercountry Adoption. The Bill repeals the Adoption Acts 1952 – 1998 and establishes the Adoption Authority of Ireland with additional functions and powers.
- Child Care (Amendment) Bill, 2009 was published in September 2009. It provides for the High Court to have statutory jurisdiction to hear applications by the HSE for special care orders. The Bill also provides that special care units will be inspected under the Health Act 2007 and for dissolution of the Children Acts Advisory Board.

Childcare

- The National Childcare Investment Programme 2006-2010 (NCIP) continued to support the development of a quality infrastructure for childcare.
- The Community Childcare Subvention Scheme (CCSS), which has an allocation of approximately €160m over the three year period 2008-2010, continued to support community-based childcare providers, enabling them to charge reduced childcare fees to some 20,000 disadvantaged parents.
- The Early Childcare Supplement was abolished at the end of 2009 and was replaced by a new initiative which will provide a free pre-school year in early childhood care and education (ECCE) from January 2010.

National Children's Strategy Implementation Group (NCSIG) and Children's Services Committees

- The roll-out and expansion of the multi-agency Children's Services Committee initiative at local level was a particular priority for the NCSIG through the formation of new Committees in Longford/Westmeath, Kerry, Meath, Kildare, Fingal and Carlow. The existing Committees in South Dublin, Dublin City, Limerick City and Donegal continued to implement their work plans and review progress made.
- A Toolkit was published in June 2009 to assist those interested in setting up a Committee within their county area.

Youth Services

- The operational remit of the OMCYA was expanded with effect from 1 January 2009 to include responsibility for youth affairs matters. €68m was provided in 2009 to support the delivery of a range of youth work programmes and youth services for all young people, including those from disadvantaged communities, by the voluntary youth work sector.
- A framework and implementation strategy was commenced during the year for the national roll out, in 2010, of the National Quality Standards Framework for Youth Work.

- The Young Peoples Facilities and Services Fund was extended to include financial support for four new towns (Athlone, Dundalk, Wexford and Arklow) bringing the total number of areas being funded to 22.
- Resolution on a new EU cooperation framework for youth (2010-2018) was negotiated and agreed.

Prevention and Early Intervention Programme

- Oversight and management of the Prevention and Early Intervention Programme was maintained by the OMCYA during 2009. By the year end, the vast majority of programme activities across all project sites had commenced.
- Evaluation frameworks for two of the project sites were completed and significantly advanced in the third with the support of the international panel of experts, the OMCYA and The Atlantic Philanthropies.

Development of National Play and Recreation Policies

- A National Play Day on 5th July was promoted to increase public awareness of the benefits of play for children's development.
- A National Recreation Day was also promoted on 26 September to raise awareness of the importance of recreation for young people.
- The development of a framework for Youth Café provision, for implementation in 2010, was a key area of activity during the year.¹

Research on Children's Lives

- Strategic and operational oversight of Growing Up in Ireland: the National Longitudinal Study of Children was undertaken.
- Public Consultation for National Data and Research Strategy on Children's Lives completed.
- Two studies funded under the National Children's Strategy Research Programme were published:-
 - Children's Research and Ethical Review.
 - Middle Childhood Study: Socio-Demographic Patterns in the Health Behaviours, Risk Behaviours, Health Outcomes and Social Contexts of Young People's Health.
- Three new PhD fellowships under the Research Scholarship Programme were awarded.

Children and Young People's Participation

- A support team for children and young people's participation in decision-making was established.
- Implementation of two-year plan for the effective development of Comhairle na nÓg was commenced.

¹ Published in 2010. See http://www.omc.gov.ie/documents/publications/Youth_Cafe_Best_Practice_Guide.pdf

- Comhairle na nÓg Development Fund 2008-2009 was independently evaluated indicating significant improvements in the operation of Comhairle na nÓg in many parts of the country.
- *Teenage Mental Health - What Helps and What Hurts: A Report of Consultations with Teenagers* was published.
- Co-operated with the National Office for Suicide Prevention and young people from Dáil na nÓg, OMCYA Youth Forum and other organisations, in developing a mental health TV advert and online awareness campaign aimed at teenagers.
- Consultations with children and young people on the development of the National Paediatric Hospital were completed.
- Dáil na nÓg annual event, held in Croke Park in February 2009, successfully managed.
- OMCYA Children and Young People's Forum conducted surveys and met with key policy-makers and stakeholders on the issues of homophobic bullying, mental health and seeking child fares on public transport for under 18s.

Child Welfare

- Implementation Plan prepared in response to the recommendations of the Commission to Inquire into Child Abuse and approved by Government. Additional funding of €15 million approved to commence implementation of the Plan.
- Revised Children First Guidelines were prepared,
- Facilitated discussions on a revised HSE Audit Questionnaire for issue to Catholic dioceses and Religious Orders,
- Policy was devised and sent to HSE for implementation on the placement of children of 12 years and under in residential care.
- North/South co-operation progressed in respect of child welfare and protection issues.

Palliative Care-Policy on Children's Palliative Care

- Palliative care for children with life-limiting conditions – A National Policy' was finalised and was adopted by Government on the 15th December 2009.

HIGH LEVEL OBJECTIVE 3: PRIMARY CARE

Objective:- *To ensure the provision of a broad spectrum of integrated, locally-based accessible services as the first point of contact for people with the health system which, combined with improvements in income, employment, education and housing, will deliver significant health improvements and reduce health disparities over the longer term.*

Primary Care Teams

- The development of Primary Care Teams continued during the year with 222 Primary Care Teams operating at the end of December 2009. This represents an increase of 129 Teams since the end of 2008.
- The HSE had a further 185 Teams in development.
- 2,794 staff are working in these Teams.

Medical Cards and GP Visit Cards

At the end of 2009:-

- 1,478,560 (an increase of 126,440 since 2008) were covered by a medical card.
- 98,325 (an increase of 12,779 since 2008) were covered by the GP Visit Card.

meaning that 35.36% of the population had free access to GP services under the General Medical Services (GMS) Scheme.

General Medical Services (GMS) Scheme.

- In September 2009, the Minister for Health and Children approved certain changes to the entry provisions for General Practitioners (GPs) to the General Medical Services (GMS) Scheme. Retirement provisions for GPs providing services under the GMS Scheme were also extended. Further details are available at <http://www.dohc.ie/press/releases/2009/20090930.html>

General Practitioner (GP) Out-of-Hours Co-operatives

- GP out-of-hours co-operatives are now in place in all HSE areas, providing coverage in all, or in part of all, counties. There were 920,132 contacts with GP out-of-hours services in 2009.

Cost of Drugs and Medicines

- A number of reforms were introduced in 2009 to increase value for money from pharmaceutical expenditure. The wholesale mark-up payable on drugs supplied under the GMS and community drugs schemes was reduced from 17.66% to 10%. The retail mark-up payable to pharmacists under the Drugs Payment Scheme and the Long Term Illness Scheme was reduced from 50% to 20%.

Food and Medicines

- Contributed to reviews of Irish food safety system.
- Contributed to EU working groups on Food, Medicines, Medical Devices, Pharmaceuticals, Tobacco and Protection of Animals used for Scientific Purposes.

- Commenced further provisions of the Public Health (Tobacco) Acts 2002 & 2004 in July, (http://www.dohc.ie/publications/pdf/tobacco_products_guidance.pdf?direct=1)
- Introduced primary legislation to implement EU Decision on the use of graphic warnings on tobacco products.
- Additional research was sourced and meetings held with interested parties with a view to introducing sunbed legislation.
- 13 pieces of food legislation processed (6 Directives, 6 Regulations and 1 Decision).
- 11 pieces of medicines/medical devices legislation processed (9 Directives, 1 Regulation, 1 National Reg).
- 7 pieces of tobacco legislation finalised (1 Act, 6 S.I.s).
- Issued 279 licences to conduct animal experiments.

Dental Services

- As part of the process of developing a National Oral Health Policy, an analysis and evaluation of the public dental service and a report on probity assurance within the DTSS were completed. See http://www.dohc.ie/publications/probity_assurance.html.

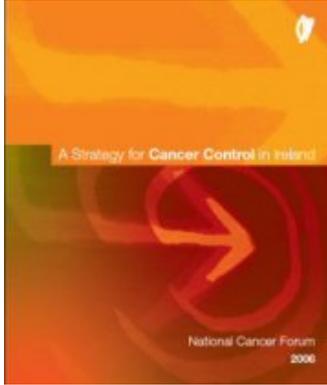
Financial Emergency Measures in the Public Interest Act 2009 (FEMPI)

During 2009, the Minister for Health & Children made a number of Regulations under the Financial Emergency Measures in the Public Interest Act 2009 (FEMPI) to reduce the fees and allowances payable to certain health professionals.

HIGH LEVEL OBJECTIVE 4: CANCER CONTROL

Objective:- To reduce cancer incidence, morbidity and mortality relative to other EU countries and to support the provision of quality assured cancer services by the Health Service Executive (HSE).

National Cancer Control Programme (NCCP)



During 2009 the National Cancer Control Programme was advanced significantly with the completion or progression of a number of key measures with the input of the Department through:-

- Supporting the transfer of breast cancer services to 8 specialist centres by 1 December, 2009.
- Supporting and monitoring the reconfiguration of services for other site specific cancers (lung, prostate, brain tumours, rectal) in keeping with best international practice.
- The performance management of services through the Performance Indicators process and monitoring of Health Information and Quality Authority's (HIQA) audit process of the 8 specialist centres.

National Plan for Radiation Oncology (NPRO)

- Commenced the construction of Phase 1 of the Plan at St James's and Beaumont Hospitals.
- Agreed the steps towards commencement of Phase 2 Public Private Partnership (PPP) and Public Sector Benchmarking (PSB) process.
- Took initial steps to prepare for subsuming St Luke's Hospital into the HSE.
- Commenced the assessment, in conjunction with the NCCP, of the business case for radiation oncology services at Altnagelvin Hospital in Derry, which will include capacity to cater for patients from Donegal.

National Cancer Screening Service (NCSS)

- Monitored the activities of the NCSS in compliance with governance requirements.
- Monitored the roll-out of BreastCheck and CervicalCheck.
- In consultation with HIQA and NCSS, developed a model for commencement of a national colorectal screening programme.

National Cancer Registry

- Monitored the activities of the National Cancer Registry, in compliance with governance requirements.
- Participated in the group that devised the Clinical Dataset for the National Cancer Control Programme.
- Facilitated the reconfiguration of the NCR Board to prepare for transfer to HSE.

Cancer Consortium/Research

- Continued to support the Ireland-Northern Ireland – National Cancer Institute (US) Cancer Consortium.
- Oversaw the external independent review (co-ordinated by the HRB) of the activities of the All Ireland Cooperative Oncology Research Group (ICORG).

HIGH LEVEL OBJECTIVE 5: ACUTE HOSPITALS

Objective:- *To ensure that patients who need acute care can access it as rapidly as possible, in the most appropriate setting at local, regional, or national level, that they receive safe care, and that the outcomes are the optimum that can be achieved for such patients.*

Reconfiguration of Acute Hospital Services

- The Department continued to support the work of the HSE on the development and implementation of plans for reconfiguration of acute services in a number of regions: the North-East, Mid-West, South and South-East. This process is driven primarily by patient safety considerations and involves concentrating complex care in hospitals that have sufficient patient volume to produce good outcomes. At the same time, much of the less complex care, especially in day surgery, medicine, diagnostics and outpatient services, can and will be provided in smaller hospitals.

Emergency Departments

- The Minister asked the HSE to introduce a new six hour target, from registration to admittance or discharge, for patients attending Emergency Departments.
- To enable Emergency Departments accurately record the total wait time of patients, the HSE began the development of ICT systems to track the movement of patients from registration to admission or discharge. By the end of 2009, 14 hospitals were reporting total wait time.

Performance of Acute Hospital System

- The Department agreed with the HSE new performance targets which require the Executive to achieve higher rates of day surgery, day-of-surgery admission and lower average length of stay.

Acute Hospital Waiting Lists

- The National Treatment Purchase Fund facilitated hospital treatment or outpatient appointments for 28,700 people in 2009 and by year-end had catered for over 164,000th patients since it was set up in 2002. Working with the HSE, the Fund reduced the number of people waiting longer than 12 months for surgery to 719 by the end of the year. At the end of 2009 the median waiting-time for medical and surgical patients was 2.5 months.

Blood and Tissue

- A public consultation on the different types of consent for the donation of organs for transplantation after death took place in early 2009.
- A related public consultation on the draft proposals for human tissue legislation followed which informed the development of legislative proposals.
- The report of the independent audit of retained organs in the State which demonstrated that significant improvements have been made in post-mortem practice in Ireland in recent years, was published in July.
- Age limits in legislation for travel insurance under the Hepatitis C Insurance Scheme were removed.

HIGH LEVEL OBJECTIVE 6: DISABILITY AND MENTAL HEALTH

Objective:- *To help people with disabilities to achieve their full potential including living as independently as possible. To promote mental health and provide appropriate support to and interventions for people with mental health problems.*

Disability

- Report on Health Sectoral Plan finalised and forwarded to the Department of Justice, Equality and Law Reform by statutory deadline of December 2009, to be submitted to Government with five other Departmental sectoral plans in early 2010¹.
- Protocols were finalised between health and education sectors for referral of children under 5 assessed under Disability Act 2005.
- Governance and financial arrangements put in place with Disability Appeals Officer.
- Delegated sanction arrangements for Special Educational Needs cases agreed with Department of Finance.
- Domiciliary Care Allowance transferred to Department of Social and Family Affairs.
- Value for Money Review initiated.
- A Cross Sectoral Team was established to develop an approach between Government Departments and agencies in respect of the employment of people with disabilities including people with mental health difficulties.

Mental Health

- Implementation Plan for 'A Vision for Change' for the period 2009-2013 agreed with the HSE.
- National Lead within the HSE appointed.
- Fourteen Executive Clinical Directors in Psychiatry selected to lead on the development of executive clinical directorates in mental health.
- A Cross-Sectoral Team was established to help improve services for people with mental health difficulties who come into contact with the criminal justice system.
- Participating in the development by the Department of the Environment, Heritage & Local Government of a Housing Strategy for People with Disabilities which will have a particular emphasis on the housing needs of people with mental health difficulties.
- The Departments of Health and Children and Agriculture and Food worked with the HSE to develop a protocol for addressing mental health issues that arise among the farming community.

For further details, see http://www.dohc.ie/publications/vision_for_change_4th_report.html

Child and Adolescent Services

- The number of Community and Adolescent Mental Health Teams (CAMHT) increased from 47 to 55.
- The mental health bed capacity for children and adolescents almost doubled, bringing the total number of in-patient beds to 30. In addition work commenced on

¹ Report submitted in February, 2010. See http://www.dohc.ie/publications/sectoral_plan2009.html

the construction of 2 x 20 bed units at Bessboro, Cork and Merlin Park Hospital, Galway.

Capital

- €25m was provided to the HSE in 2009 from the proceeds of the sales of mental health assets which had been lodged to the Exchequer as extra revenue receipts. This funded mental health capital developments including the new child and adolescent units in Cork and Galway, a Community Nursing Unit in Ballinasloe and a day centre in Clonmel.
- Budget 2010 provided for a multi-annual programme of investment in the mental health capital programme, to be funded from the proceeds of sale of lands.

Legislation

- The Mental Health Act, 2001 was amended so as to ensure the continued operation of the assisted admissions service for seriously ill psychiatric patients, following a judgement in the High Court which presented difficulties in relation to the operation of the service.
- Extensive engagement with the Department of Justice and Law Reform on amendments to the Criminal Law Insanity Act to address operational issues affecting the forensic mental health service.

HIGH LEVEL OBJECTIVE 7: OLDER PEOPLE

Objective:- To enhance the quality of life of older people and to support them in their homes and communities for as long as possible and, where this is not possible, to provide them with access to appropriate residential accommodation.

The Nursing Home Support Scheme - A Fair Deal



The Nursing Homes Support Scheme, A Fair Deal, a scheme of financial support for people in need of nursing home care was signed into law on 1 July 2009 and commenced in October 2009. The central principle of the Scheme is that each person makes a contribution towards their care costs based on their ability to pay. The balance of cost is met by the State regardless of whether the person chooses a public, private or voluntary nursing home. This reflects the fundamental purpose of the scheme which is:

- to equalise State support for public and private nursing home residents,
- to render long-term nursing home care affordable and anxiety-free and
- to ensure that no-one has to sell their home during their lifetime to pay for their care.

See http://www.dohc.ie/issues/fair_deal/ for further information.

New system of Regulation, Registration and Inspection of Nursing Homes



A Regulatory Impact Analysis (RIA) on the proposed Regulations and the Standards was completed in 2009. This included an "Assessment of costs of the National Quality Standards for residential care setting for older people in Ireland." The RIA and Assessment were published in July 2009. (http://www.dohc.ie/issues/nursing_home_inspection/costs-assessment.pdf)

New Care and Welfare Regulations for all nursing homes were drafted and brought into force on 1 July, 2009 underpinning the National Quality Standards for Residential Care Settings for Older People in Ireland which were approved by the Minister in February, 2009. The Health Information and Quality Authority (HIQA) commenced registration and inspections of all nursing homes on 1 July against the Regulations and Standards.

Leas Cross Commission of Investigation

- The Commission to investigate the management, operation and supervision of the former Leas Cross Nursing Home submitted its Final Report in June 2009. The Report was published in July.

Independent Evaluation of Home Care Packages

- The Department commissioned an independent Evaluation of Home Care Packages. This was completed and submitted to the Minister and published in December (see <http://www.dohc.ie/publications/hcp.html>).

National Positive Ageing Strategy

- Work continued to develop a new National Positive Ageing Strategy during 2009. The Strategy will set the direction for future policies, programmes and services for older people in Ireland. 186 submissions were received from a broad range of stakeholders including individuals, representative organisations and agencies.

The Irish Longitudinal Study on Ageing (TILDA)

- This first Irish longitudinal study on ageing, which is being carried out by a TCD-led Consortium, is jointly funded by the Department, the Atlantic Philanthropies and Irish Life and Permanent.
- In 2009, the Office for Older People established a Funders' Group, comprising the three current TILDA funders (with the Central Statistics Office as its adviser) and made significant progress in formalising a Funding Agreement between the Department and TCD.

Elder Abuse

- Independent review of the implementation of *Protecting Our Future* was carried out. See http://www.dohc.ie/publications/protecting_our_future_review2010.html

Sheltered Housing

- As part of the work of the Cross-Departmental Group on Sheltered Housing Options for Older People, the Office for Older People chaired a sub-group to develop a protocol for inter-agency cooperation in the provision of care to older people in sheltered housing.

The Health (Repayment Scheme) Act 2006

- The Health (Repayment Scheme) Act 2006 provides a legal framework to repay recoverable health charges for publicly funded long term care. Funding of €80m was allocated for the health repayment scheme for 2009 and this allocation was fully utilised. Total expenditure on the scheme up to the end of 2009 was €447m.
 - In 2009, 1,852 offers of repayment were made to the value of €57m;
 - 2,853 repayments were completed to the value of €76m;
 - 1,032 rejection letters issued to applicants who were deemed to be outside the parameters of the scheme and
 - The Health Repayment Scheme Appeals Office, which provides an appeals service to applicants who wish to appeal against the decision of the scheme Administrator, issued 1,464 appeal decisions.

Initiative to Support the Cost of Health Insurance for Older People

In July 2008, the Supreme Court struck down the Risk Equalisation Scheme for health insurance. This led to concerns that older people would effectively face higher health insurance premium costs than younger people. Accordingly, on the joint proposal of the Ministers for Finance and Health and Children, the Government decided to put in place an interim, three-year measure to stabilise the health insurance market which became effective on 1 January, 2009. This was amended to reflect changes in the market in late 2009, to take effect from 1 January, 2010. The resulting legislation is the Health Insurance (Miscellaneous Provisions) Act, 2009.

PART 3 - APPENDICES

APPENDIX 1

Legislation Enacted in 2009¹

- Nursing Homes Support Scheme Act 2009
- Public Health (Tobacco) (Amendment) Act 2009
- Health Insurance (Miscellaneous Provisions) Act 2009
- Health (Miscellaneous Provisions) Act 2009

Statutory Instruments

SI no.

- 1** European Communities (Clinical Trials on Medicinal Products for Human Use) (Amendment) Regulations 2009
- 2** Medicinal Products (Control of Wholesale Distribution) Regulations 2007 (Amendment) Regulations 2009
- 3** Medicinal Products (Control of Placing on the Market) Regulations 2007 (Amendment) Regulations 2009
- 4** Medicinal Products (Control of Manufacture) Regulations 2007 (Amendment) Regulations 2009
- 27** Health Act 2007 (Section 103) (Commencement) Order 2009
- 40** Medical Practitioners Act 2007(Commencement) Order 2009
- 41** Public Health (Tobacco) (Registration) Regulations 2009
- 42** Public Health (Tobacco) (Self Service Vending Machines) Regulations 2009
- 57** Public Health (Tobacco) (Retail Sign) Regulations 2009
- 61** European Communities (Labelling, Presentation and Advertising of Foodstuffs) (Amendment) Regulations 2009
- 63** Misuse of Drugs (Amendment) Regulations 2009
- 67** Irish Medicines Board (Miscellaneous Provisions) Act 2006 (Commencement) Order 2009
- 72** Health Insurance Act 1994 (Registration) (Amendment) Regulations 2009
- 109** European Communities (Active Implantable Medical Devices)(Amendment) Regulations 2009
- 110** European Communities (Medical Devices) (Amendment) Regulations 2009
- 121** Misuse of Drugs Act 1977 (Controlled Drugs) (Declaration) Order 2009
- 122** Misuse of Drugs (Amendment) (No2) Regulations 2009
- 123** Public Health (Tobacco) (Product Information) Regulations 2009
- 124** Voluntary Health Insurance (Amendment) Act 2008 (Appointment) of Date Pursuant to Subsection (5)(b) of section 2 of the Voluntary Health Insurance (Amendment) Act 1996) Order 2009

¹ Acts and Statutory Instruments can be downloaded at <http://www.irishstatutebook.ie/home.html>

- 126** European Communities (Additives, Colour and Sweeteners in Foodstuffs) (Amendment) Regulations 2009
- 171** Health Professionals (Reduction of Payments to Registered Dentists) Regulations 2009
- 172** Health Professionals (Reduction of Payments to Consultant Psychiatrists) Regulations 2009
- 173** Health Professionals (Reduction of Payments in Respect of Services under the National Cervical Screening Programme) Regulations 2009
- 187** European Communities (Dietary Foods for Special Medical Purposes) Regulations 2009
- 191** European Communities (Cosmetic Products) (Amendment) Regulations 2009
- 195** Health Professionals (Reduction of Payments to Ophthalmologists, Optometrists and Dispensing Opticians) Regulations 2009
- 209** European Communities (Infant Formula & Follow On Formula) (Amendment) Regulations 2009
- 212** Health Insurance (Amendment) Act 2001 (Commencement) Order 2009
- 213** VHI (Amendment) Act 2008 (Commencement) Order 2009
- 232** Health and Children (Delegation of Ministerial Functions) (No2) Order 2009
- 236** Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2009
- 237** Health Act 2007 (Commencement) (No. 2) Order 2009
- 242** Public Health (Tobacco) Act 2002 Commencement Order 2009
- 243** Tobacco Products (Control of Advertising, Sponsorship and Sales Promotion) (Amendment) Regulations 2009
- 245** Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2009.
- 246** Health Professionals (Reduction of Payments to Community Pharmacy Contractors) Regulations 2009.
- 256** Nursing Homes Support Scheme Act 2009 (Commencement) (Certain Provisions) Order 2009.
- 262** Health Professionals (Reduction of Payments to General Practitioners) Regulations 2009.
- 268** Health Act 2007 (Commencement) (No. 3) Order 2009
- 277** European Communities (Purity Criteria on Food Additives other than Colours and Sweeteners) Regulations 2009
- 281** Pharmacy Act 2007 (Commencement) Order 2009
- 282** Pharmacy Act 2007 (Section 64(9)) Order 2009
- 288** Health (Miscellaneous Provisions) Act 2009 (Commencement) Order 2009.
- 294** Health Insurance Act 1994 (Information Returns) Regulations 2009.

- 333** Irish Medicines Board (Miscellaneous Provisions) Act 2006 (Commencement) Order, 2009.
- 334** Health (Dental Services for Children) (Amendment) Regulations, 2009
- 342** Voluntary Health Insurance (Amendment) Act 2008 (Appointment of date pursuant to subsection (5)(b) of section 2 of the Voluntary Health Insurance (Amendment) Act 1996) (No. 2) Order 2009.
- 380** European Communities (Hygiene of Foodstuffs) (Amendment) Regulations 2009.
- 381** Nursing Homes Support Scheme Act 2009 (Commencement) (Care Representatives and Regulations) Order 2009.
- 394** Nursing Homes Support Scheme Act 2009 (Commencement) (Specified Forms) Order 2009.
- 401** Health (Miscellaneous Provisions) Act 2009 (Commencement) (No. 2) Order 2009.
- 409** Nursing Homes Support Scheme (Assessment of Capacity Report) Regulations 2009.
- 411** Infectious Diseases (Aircraft) Regulations 2009
- 423** Nursing Homes Support Scheme Act 2009 (Commencement) (Remaining Provisions) Order 2009.
- 436** Nursing Homes Support Scheme (Collection and Recovery of Repayable Amounts) Regulations 2009.
- 437** Nursing Homes Support Scheme (Making and Discharge of Orders) Regulations 2009.
- 442** Medicinal Products (Prescription and Control of Supply) (Amendment) Regulations 2009.
- 461** European Communities (Nutrition Labelling for Foodstuffs) Regulations 2009
- 507** European Communities (Quality and Safety of Human Blood & Blood Components) (Amendment) Regulations 2009
- 536** Health Services (Drugs Payment Scheme) Regulations 2009
- 543** Health (Miscellaneous Provisions) Act 2009 (Commencement) (No. 3) Order 2009.
- 551** Irish Medicines Board (Fees) Regulations 2009
- 552** European Communities (Cosmetic Products) (Amendment) (No2) Regulations 2009
- 553** Medicinal Products (Control of Placing on the Market) Regulations 2007 (Amendment) (No2) Regulations 2009
- 558** European Communities (Control of Drug Precursors) Regulations 2009
- 571** Voluntary Health Insurance (Amendment) Act 2008 (Appointment of date pursuant to subsection (5)(b) of section 2 of the Voluntary Health Insurance (Amendment) Act 1996) (No. 3) Order 2009.
- 572** Voluntary Health Insurance (Amendment) Act 2008 (Commencement) (No2) Order 2009

586 National Treasury Management Agency (Delegation of Functions) Order 2009

APPENDIX 2

Publications in 2009

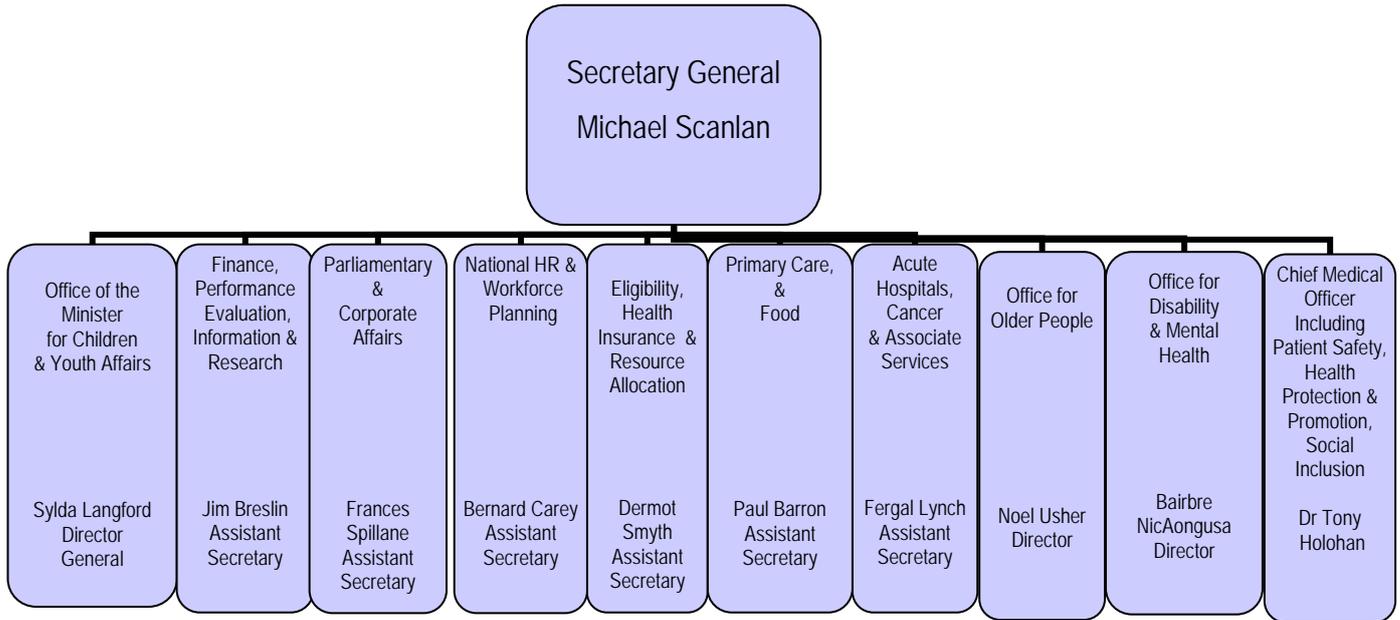
1. 2008 Annual Report of the Alcohol Marketing Communications Monitoring Body
2. Action Plan for Health Research 2009–13
3. An Integrated Work Force Planning Strategy for the Health Services 2009 - 2012
4. Annual Report of the Elder Abuse National Implementation Group (EANIG) 2007/2008
5. Department of Health and Children Corporate Business Plan 2008
6. Department of Health and Children Evaluation of Home Care Packages
7. Department of Health and Children Six Monthly Report to the Oireachtas on Developments in the European Union July-December 2008
8. Department of Health & Children Annual Output Statement 2009 for Health Group of Votes
9. Department of Health and Children Annual Report 2008
10. Economies in Drug Usage in the Irish Healthcare Setting
11. European Schools Survey Project on Alcohol and other drugs (ESPAD)
12. First Quarterly Progress Report of the Implementation Steering Group on recommendations of the Report of the Commission on Patient Safety and Quality Assurance
13. Food and Nutritional Care in Hospitals
14. Guidance for those selling Tobacco Products
15. Health in Ireland, Key Trends 2009
16. Long Stay Activity Report for 2007
17. Long Stay Activity Report for 2008
18. National Disability Strategy Towards 2016 Strategic Document
19. National Implementation Group (NIG) – European Working Time Directive & Non Consultant Hospital Doctors – Final Report December 2008
20. National Men's Health Policy 2008-2013
21. Prompt Payments by Government Departments pursuant to Government Decision No. S29296 of May 2009
22. Report of Inter-sectoral Group on the Implementation of the Recommendations of the National Task Force on Obesity
23. Report of the Vaccine Damage Steering Group
24. Review Of The Circumstances Surrounding The Elapse Of Time In Bringing To Completion The Western Health Board Inquiry Into Allegations Of Abuse In The Brothers Of Charity Services, Galway (Hynes Report)
25. Revised Salary Scales for Medical Consultants with effect from 1 January 2009

26. Slán 2007 Survey of Lifestyle, Attitudes and Nutrition in Ireland. 'One Island – One Lifestyle?'
27. Slán: Alcohol use in Ireland - A profile of drinking patterns and alcohol-related harm
28. Slán: Injuries in Ireland - Findings from National Population Surveys
29. Slán: Mental Health and Social Well-being Report
30. Slán: Smoking Patterns in Ireland: Implications for policy and services
31. Study of certain accounting issues related to the HSE (Considine Report)
32. Teenage Mental Health: What helps and what hurts? Report On The Outcome Of Consultations With Teenagers On Mental Health
33. The Leas Cross Commission
34. The Monageer Inquiry
35. The National Guidelines on Physical Activity for Ireland
36. Third Annual Report of the Independent Monitoring Group for A Vision for Change - the Report of the Expert Group on Mental Health Policy - April 2009
37. Value for Money Report - The Efficiency and Effectiveness of Long-Stay Residential Care for Adults within the Mental Health Services (together with the Response from the Department of Health & Children).

Visit www.dohc.ie/publications to download copies of 2009 publications.

APPENDIX 3

Organisation Charts for the Department of Health and Children (2009)



MAC/Principal Officers and Equivalents 31st December 2009

