



An Roinn Sláinte
Department of Health

Department of Health

Annual Report 2024



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INTRODUCTION BY MINISTER FOR HEALTH, JENNIFER CARROLL MACNEILL

This Department of Health Annual Report for 2024 marks a year of resilience, innovation, and continued progress towards our mission of improving the health and wellbeing of everyone in Ireland, amidst the backdrop of our growing and ageing population.

The transformation of our health service has been accelerated with the establishment of the six new Health Regions. This new structure will strengthen governance and improve the quality of care, integrating health and social care services, supporting service planning tailored to the needs of each specific region. Alongside these reforms, we have prioritised the modernisation of our health infrastructure, the integration of digital health solutions and the development of a skilled, future-ready workforce.

Major capital projects were progressed, including the National Children's Hospital, completion of key infrastructure such as the South Dublin Surgical Hub, and continued investment in modernising healthcare facilities across the country. Additional acute hospital and community beds, increased capacity to meet growing healthcare needs and improved patient access to care.

The Waiting List Action Plan set out a programme of work to deliver a reduction in the number of patients on waiting lists and the time they spend waiting to access care.

We strengthened community care through the addition of new Primary Care Centres, the rollout of Enhanced Community Care networks, expanded Community Intervention Teams and Community Specialist Teams for Older Persons and Chronic Disease Management, delivering integrated, person-centred care closer to home.

Our commitment to prevention and health promotion is reflected in new initiatives under Healthy Ireland, the expansion of screening and vaccination programmes and the enactment of the Tobacco (Amendment) Act, which will increase the age at which cigarettes can be bought from 18 to 21. This has the potential to save many lives into the future. We further enhanced women's health services, including specialist services for menopause, fertility and expanded free contraception to all women up to 35 years of age.

We advanced a whole-of-government approach to mental health, launching Ireland's first National Mental Health Promotion Plan and expanding community-based supports, ensuring that positive mental health and accessible services are at the heart of our vision for a healthier Ireland.

I extend my sincere gratitude to all those working in our health and social care services and to the staff in the Department of Health. Your dedication, professionalism and compassion have been central to our achievements this year. Together, we will continue to deliver on our vision of a fair, high-quality, and compassionate health service for all.



Jennifer Carroll MacNeill T.D.
Minister for Health

OVERVIEW

This annual report for the Department of Health outlines the main achievements made during 2024 to deliver on our mission and fulfil our role. This report is set out across five chapters, each reflecting one of the five strategic priorities in the Department of Health's [Statement of Strategy 2023-2025](#).

The Department's Mission

The mission of the Department of Health is to improve the health and wellbeing of people in Ireland by:

- Supporting people to lead **healthy and independent lives**.
- Ensuring the delivery of **high quality and safe health and social care**.
- Creating a more responsive, integrated and **people-centred health and social care** service.
- Promoting **effective and efficient management** of the health and social care service and ensuring best value from health system resources.

Role of the Department

The Department serves the public and supports the Minister for Health, Ministers of State and Government by:

- Providing **leadership and policy direction** for the health sector to improve health outcomes.
- Undertaking **governance and performance oversight** to ensure accountable and high-quality services.
- **Collaborating to achieve health priorities** and contribute to wider social and economic goals.
- Creating an **organisational environment** where high performance is achieved, collaborative working is valued, and the knowledge and skills of staff are developed and deployed.

Strategic Priorities

The five priorities in the Department's Statement of Strategy 2023-2025 are:

1. Pandemic Preparedness and the promotion of public health.
2. Expand and integrate care in the community.
3. Make access to healthcare fairer and faster.
4. Improve oversight and partnership in the sector.
5. Become an organisation fit for the future.

CHAPTER 1

PANDEMIC PREPAREDNESS AND THE PROMOTION OF PUBLIC HEALTH

Promotion of Public Health

The Department introduced a range of initiatives throughout the year to support population health planning, illness prevention and the promotion of health and wellbeing.

We continued to address challenges posed by our growing and ageing population and increasing levels of chronic disease, implementing some reforms required to allow the people of Ireland to live longer and healthier lives.

HEALTHY IRELAND

- Work was completed on the drafting of a new National Physical Activity Framework and Action Plan, which will be published following Government approval. Support for physical activity continued in 2024 through the continued promotion of the Active School Flag programme and key initiatives, delivered through Sport Ireland, to support walking, running, cycling, and swimming, research, monitoring and evaluation of sport and physical activity.
- New [National Physical Activity and Sedentary Guidelines for Ireland](#) were published, based on the most recent evidence confirming that regular physical activity has benefits for everyone. The Guidelines include key messages for public and professional audiences designed to support and enable more people to be more active, more often.
- Healthy Ireland supported over 140 GAA clubs and county grounds with signage to go Smoke and Vape Free.
- The Healthy Ireland Walking Tracks initiative was extended to two new sporting organisations, the IRFU and FAI, in 2024. Both organisations shared in a €1 million fund designed to make pitch-side walking track facilities more accessible to everyone in the community. Forty-three clubs will benefit from this funding.
- Funding was provided in 2024 for improvements to outdoor swimming facilities which enables more people to participate in this activity. This included developing and enhancing changing facilities and procuring equipment to assist people with disabilities.

In addition, the **Healthy Ireland evidence base** is a key element in providing guidance to policy makers in terms of planning for the future and responding to threats to public health.

- The annual **Healthy Ireland Survey** gives an up-to-date snapshot of the health of the nation across a range of health behaviours and attitudes and helps monitor progress against key policy targets; the most recent Wave was launched on 3rd December, 2024.
- The **Health Behaviour in School-Aged Children Study** is an international collaboration, led by the WHO. The 2022 HBSC Study involved 51 countries; the Irish Report was published in May, 2024 and is available on the University of Galway website.

TOBACCO AND ALCOHOL CONTROL

The Tobacco (Amendment) Act 2024 was enacted in November. It will increase the minimum legal age of sale of tobacco products to 21 from 1 February 2028.

ORAL HEALTH

- Ireland hosted the first global Oral Health Side Event since 2007 at the 77th World Health Assembly in Geneva. Over 100 senior global health leaders in person and 400 online attended. The focus was the [WHO Global Oral Health Action Plan \(2023-2030\)](#), and planning for the first ever [Global Oral Health Meeting](#) , Bangkok 2024 where the [Bangkok Declaration](#) was adopted and Ireland joined the Global coalition.
- The Department of Health worked closely with the Department of the Environment, Climate and Communications to develop the agreed text for the European Council regarding a phase out of dental amalgam (mercury) and the subsequent [legislative changes](#) required under the new [European Legislation](#).

SCREENING SERVICES

- A two-year action plan to support work to improve equity in our screening programmes was published. The goal is to continuously improve the approach to make screening more equitable. The action plan is guided by the Equity Strategic Framework 2023-2027 and focuses on addressing five priority areas, research and data; education and training; partnerships; access and inclusivity; and communication. A digital portal is available on the HSE/National Screening Service (NSS) website, and the equity toolkit was updated.
- A modernised patient database system was introduced to the BreastCheck programme - AIRE (Assessment, Information, Record & Evaluation). This new system is simplifying and streamlining workflows, allowing BreastCheck teams to focus more on direct patient care. With AIRE, the HSE/NSS can access real-time data to track each screening participant's journey and address any gaps identified in service delivery. The development of AIRE is in line with the HSE's Digital Health Strategy, which aims to improve health services for both patients and staff, making them more modern and easier to access.
- In the Diabetic Retina Screening programme, additional eye screenings to women with diabetes who become pregnant were rolled out, following a pilot supported by a grant from the Women's Health Fund. 19 national maternity hospitals to offer this service. Women who have diabetes at the time they become pregnant are referred to the Diabetic RetinaScreen programme by their maternity service as part of their initial assessment, or by their diabetes nurse or hospital doctor. Women can attend their appointments locally in community-based settings, across a network of over 140 screening locations. The screening is free and if treatment is required, it is also free. In 2024, 512 women received additional screenings as part of this initiative. Approximately 30% of these women had not been registered for the Diabetic RetinaScreen programme previously.
- In 2024, the Department of Health, together with NSS started work on a 'Better Letters' initiative for the BowelScreen programme. The aim of the project is to use behavioural insights to affect bowel screening uptake by redesigning and testing behaviourally informed correspondence.

EuCanScreen

- A four-year EU4Health-funded EUCanScreen Joint Action project was established in response to the 2022 European Council Recommendation on Cancer Screening. The project commenced in June 2024, with DoH having responsibility for coordinating Irish inputs.
- EUCanScreen aims to support the implementation of Europe's Beating Cancer Plan and to ensure the sustainable implementation of high-quality screening for breast, cervical and colorectal cancers and to implement the recently recommended screening programmes for lung, prostate and gastric cancers. By guaranteeing equal access of eligible EU citizens to screening programmes, this Joint Action will ultimately reduce cancer inequalities across Europe.

National Screening Advisory Committee

- The National Screening Advisory Committee's (NSAC) third Call for Submissions for proposals on the introduction of new screening programmes or changes to existing screening programmes in Ireland, was completed in March 2024.
- In 2024, NSAC established two subgroups, for newborn and cancer screening, to provide additional expertise to support the Committee's decision-making processes.
- €1.4m of new development funding was allocated in 2024 to support the expansion of the NBS Programme to add the group of Severe Combined Immunodeficiency (SCID) conditions and screening for Spinal Muscular Atrophy (SMA) in infants to the NBS Programme, as approved by Minister Donnelly in 2023. The HSE is advancing work on the introduction of screening for SMA and SCID.

CERVICAL CANCER ELIMINATION

- Ireland publicly committed to the World Health Organization's (WHO) global initiative to eliminate cervical cancer in January 2023 – one of the first countries in the world to do so. Ireland's target date for eliminating cervical cancer (2040) was announced in November 2023. Following this the Cervical Cancer Elimination Partnership, including NGO and Patient Advocacy Groups, launched its 5-year (2025-2030) action plan at the Global Day of Action on 15 November 2024, aiming to make cervical cancer rare worldwide.
- Ireland is on track to eliminate cervical cancer by 2040. This ambitious yet achievable goal is founded on a cohesive, evidence-based strategy that combines HPV vaccination, primary HPV screening, effective early treatment, and a strong commitment to equity and public trust.

VACCINATION PROGRAMMES

A respiratory syncytial virus (RSV) infant immunisation pathfinder programme was introduced in 2024. The programme began in September 2024 with the aim to ease the burden that RSV places on the healthcare service by reducing the number of illnesses and hospitalisations among young children. Ireland is one of only a very small number of countries worldwide to introduce an immunisation programme for infants against RSV to date.

Both Urgent and Emergency Care (UEC) Operational plans (23/24 and 24/25) that were active during 2024 had specific actions promoting the uptake of influenza and COVID-19 vaccinations to improve compliance for all target groups including Healthcare Workers. The UEC Plan 24/25 additionally sought to promote uptake of immunisation catch-up programmes, particularly for measles.

MENTAL HEALTH

The negative impacts of the pandemic on population mental health, especially for those already experiencing inequities, underscored the urgent need to invest in a population level approach to mental health. Ireland's first National Mental Health Promotion Plan, Pathways to Wellbeing was launched on Friday 13th December 2024. The aim of Pathways to Wellbeing is to promote positive mental health for everyone and to deliver actions across government which improve people's mental health and wellbeing through both universal supports for all, with targeted supports addressing the needs of those most at risk of experiencing mental health difficulties.

Implementation will be driven by Healthy Ireland with the support of the Department of Health, who will oversee the cross-sectoral engagement and delivery of agreed objectives and actions set out in the plan. This will require the establishment of appropriate governance and implementation structures.

OBESITY, DIET AND NUTRITION

- Vitamin D resources were disseminated to all pharmacies and HSE settings.
- The Sugar Sweetened Drinks Tax review was published September 2024, which found that both policy objectives of the tax are being met: a notable reduction in sugar consumption and accelerated product reformulation.
- Approval was secured to prepare a national breastfeeding strategy, and a breastfeeding steering group was established to oversee the development of this strategy.
- Approval was secured to establish folic acid steering groups in 2025. The aim of the groups will be to support the development of a new overarching strategy to reduce the incidence of NTDs in Ireland based on the recommendations from the DOH 2019 report.

WORKPLACE WELLBEING

- To drive the implementation of the Healthy Workplace Framework, an external provider was recruited, following a tender process, to support 40 workplaces become a Healthy Workplace over a 12–18-month period.
- The first national survey of worker health and wellbeing was completed in 2024.

SEXUAL HEALTH

- In 2024, the **free contraception scheme** was extended to women aged up to and including 35, from July 1st. Almost 2,400 GPs and 2,050 pharmacies in all regions of the country are contracted to provide services and products under the scheme, which can be accessed across Ireland. Approximately €48 million was allocated to support the scheme in 2024.
- The **National Condom Distribution Service** distributed just over 1.2 million free condoms and just under 800,000 sachets of lubricant to public STI clinics, community partners

working with key high-risk groups and 3rd level campuses in 2024. Free condoms are also now available with orders from the free home STI testing service.

- The Department expanded the national HIV Pre-Exposure Prophylaxis (PrEP) and free home STI testing schemes in 2024 and secured funding for further expansion in 2025.
- Funding was secured for male pelvic cancer survivorship and rehabilitation programmes in both Cork University Hospital and St James's Hospital.

FOOD SAFETY AND ENVIRONMENTAL HEALTH

In 2024, the Department continued to engage at EU level, across Government Departments and with Official Agencies, ensuring food safety and environmental health remains a priority in the development of National and EU policy. This ensures that the Department can play its part in protecting the well-being of citizens along with helping to maintain Ireland's reputation as a leader in food safety.

- The Department in conjunction with the HSE's National Environmental Health Service (NEHS), worked with other Government Departments and Agencies on the development of a new permanent Border Control Post (BCP) at Rosslare Europort (Terminal 7). The construction of this BCP will facilitate the State to efficiently handle the volume of consignments importing from or exporting to the UK, post Brexit.
- The Department led a cross-departmental/agency steering group and two working groups, which progressed the transfer of the Local Authority Veterinary Services (LAVS) to the Department of Agriculture, Food and the Marine (DAFM). The Government agreed to the transfer of the LAVS to DAFM, effective from 1st January 2025. This will result in a more efficient and effective single State Veterinary Service.
- A legislative programme is developed annually by the Department and revised quarterly in consultation with the HSE, NEHS, and the Food Safety Authority of Ireland. In 2024, the Department introduced 11 Statutory Instruments and processed 35 EU Food Regulations.
- The Department monitors and reviews the implementation and enforcement of the Public Health Sunbeds legislation by the HSE's NEHS.
- The Department has established a Steering Group and is establishing a number of Working Groups to support the development of a new overarching Strategy to reduce the incidence of Neural Tube Defects (NTDs) in Ireland through effective surveillance and increased intake of Folic Acid in women who may become pregnant.

HSE CAPITAL PLAN

In 2024 the HSE Capital Plan continued to focus on the experience of patients, staff and everyone who engages with the HSE. Modern infrastructure and equipment are crucial components for the provision of a safe and quality health service, contributing to a positive patient experience, staff wellbeing, and the promotion of public health. The funding allocated for 2024 progressed and delivered, a range of acute and community projects across the country, including increased capacity in the health system and supporting Sláintecare delivery and pathways to universal healthcare.

Significant funding was used to prioritise patient safety and to deal with risk, including replacing equipment, replacing the ambulance fleet and carrying out infrastructure upgrades, all of which contribute to pandemic preparedness and the promotion of public health.

HOUSING FIRST

In 2024, approximately 250 additional Housing First tenancies were created to reach the milestone of over 1,000 tenancies. Housing First addresses the housing and health needs of people who have experienced long-term homelessness by providing access to permanent housing without any preconditions around addiction or mental health treatment and provides integrated wrap-around health and tenancy supports. The Department provided €1m in Budget 2024 to support wrap-around health services to Housing First tenancies.

USHER'S ISLAND

In 2024, Usher's Island Health and Addiction Care Facility for homeless adults with chronic health needs officially began operations. The facility provides tailored health, addiction and social care for adults who are homeless in the Dublin region. The Department provided €4.9m in Budget 2025 for the operational costs. The first 51 beds are expected to deliver 700 treatment episodes per year. A further 49 beds will be opened incrementally. The service will provide integrated care pathways with the main Dublin hospitals, as well as with Health Service Executive inclusion health services.



It is anticipated the facility will improve equity of access, reduce the number of Emergency Department presentations among the target population, and relieve bed usage in acute hospitals. It will also support people to exit from homelessness into independent accommodation through Housing First, transitional housing and social housing. From a public health perspective, the facility will decrease population health risks, provide early intervention and prevention of disease and promote a better working environment for staff.

SUPERVISED INJECTING FACILITY

On average, approximately 350 people die from drug overdose every year and those who inject drugs, often in public areas, are a high-risk group. To reduce drug overdose and prevent other health harms, the Department of Health has introduced legislation and provided funding for the establishment of supervised injecting facilities.

In December 2024, the Dept of Health granted a licence under the Misuse of Drugs (Supervised Injecting Facilities) Act 2017 for Ireland's first Medically Supervised Injecting Facility (MSIF), operated by Merchants Quay Ireland in Dublin city centre. The MSIF provides a dedicated safe place in Dublin City for people who inject drugs, prioritising their health and social needs and supporting them to engage with healthcare services.

As well as removing drug use from public spaces and reducing associated litter problems, it ensures that people who inject drugs have access to immediate medical intervention. This minimises the pressure on emergency services, including ambulance services and an Garda Síochána, by preventing overdoses or overdose-induced deaths. The licence is for a pilot period of 18 months and is subject to evaluation.

Pandemic Preparedness

The Department continues to use the lessons learned from the response to the COVID-19 pandemic and other public health emergencies to strengthen our capacity to prepare for, prevent and respond to future pandemics, epidemics and other public health threats, and to protect the health of the population.

NATIONAL EMERGENCY MANAGEMENT

- In September 2024, the Report of the Emerging Health Threats Function Expert Working Group was published and included recommendations on four workstreams for strengthening health threat preparedness: Health Protection and Preparedness, Collaborative Surveillance, Community Protection and Research and Evidence Synthesis. These recommendations will inform revised governance arrangements at departmental and cross-departmental levels and strategic health threat preparedness planning.
- The Department continued to contribute to the Government Taskforce for Emergency Planning (GTF) for planning and response to national health threats emergencies and emergencies with a public health impact, ranging from storms and wildfires to cyber-attack and radiation spills, and participated in emergency simulation exercises in 2024.
- In December 2024, in response to WHO request for assistance to the humanitarian crisis in Gaza, the Department facilitated the medical evacuation out of Egypt of 8 paediatric patients and their 19 carers and family members, through the EU Union Civil Protection Mechanism (UCPM) for treatment in Ireland.

EU & INTERNATIONAL PREPAREDNESS

- The Department continues to be supportive of various European Commission measures to strengthen the European Union's Health Security including enhanced mandates for the European Centre for Disease Prevention and Control and European Medicines Agency, engagement with the Health Emergency Preparedness and Response Authority (DG HERA), and the implementation of the Serious Cross-Border Threats to Health Regulation (2022) and ongoing engagement with the Health Security Committee.
- The Department represented Ireland in the negotiation of a package of strategic amendments to the International Health Regulations (2005) (IHR), which were adopted by consensus at the Seventy-seventh World Health Assembly (WHA77) on 1 June 2024. The adoption of these amendments will significantly bolster Ireland's ability to detect and respond to future outbreaks, including pandemics, by strengthening national capacities and international coordination on disease surveillance, information sharing and health risk response, recognising that preparedness is a collective endeavour. Work has now commenced on preparing legislation to give effect to the IHR amendments, and it is expected that a Bill will be laid before the Oireachtas in 2026.
- The Department represented Ireland in the negotiation of the WHO Pandemic Agreement (WHO CA+) and significant progress was made in 2024 with a view to presenting this instrument for consideration and adoption to the Seventy-eight World Health Assembly (WHA78) in 2025. This historic agreement aims to foster a whole-of-government, whole-of-society approach to emerging international health threats, in particular pandemic emergencies, through the strengthening of national, regional and international prevention, preparedness and response capacities.

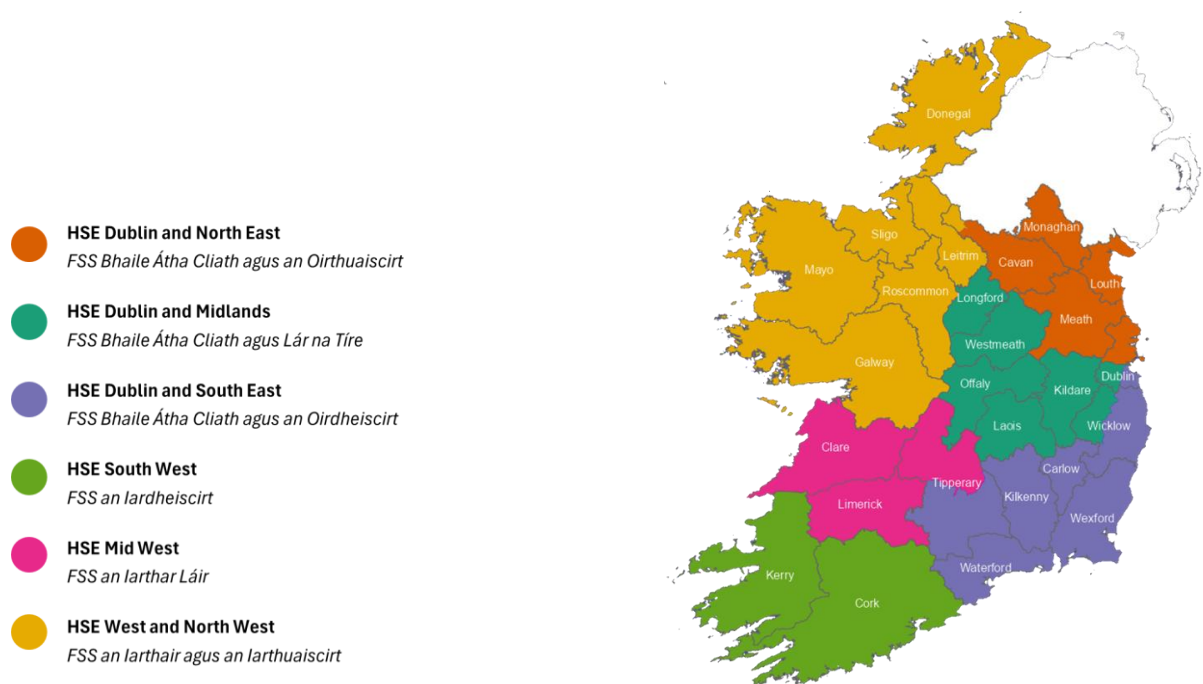
CHAPTER 2

EXPAND AND INTEGRATE CARE IN THE COMMUNITY

A key priority for the Department is to make it easier for people to access the care they need closer to home. The Department is committed to improving the health and social care services available in the community, enhancing integration and reducing dependency on acute hospital care.

HEALTH REGIONS

- The six new HSE Health Regions came into effect in March 2024, each led by a Regional Executive Officer (REO). All six REOs were in place by 15 April, and from June, operational responsibility moved from the HSE Centre to the Health Regions. The REOs are now responsible for the planning and coordinated delivery of integrated care for their respective populations.
- From October 2024, the Health Region management structure replaced previous Community Healthcare Organisation (CHO) and Hospital Group structures. Responsibility and accountability transferred from CHO and Hospital Group Senior Management Teams to the new regional Executive Management Teams (EMTs).
- The number of Healthcare Areas – the sub-regional geographies which will deliver integrated acute and community services – was agreed. There will be 20 Healthcare Areas, and the recruitment of the Healthcare Area Managers commenced.
- The Department established an Expert Group on Population Based Resource Allocation (PBRA) in March 2024 tasked with examining and developing the approach and methodology applicable to population-based service funding. The Expert Group met on a number of occasions during 2024.



PRIMARY CARE

Primary Care is an integral component of Sláintecare. The Department continued to deliver on its commitment to expand capacity and reform service delivery within the Primary Care sector, driving the shift in the model of healthcare away from the acute hospital system, and supporting more comprehensive care for people within their local communities. Progress toward this goal in 2024 includes:

- Continued significant investment in the Enhanced Community Care (ECC) Programme facilitated the continued provision of additional services in the community through the established full target of 96 Community Healthcare Networks (CHNs), and through consultant-led Community Specialist Teams (CSTs). A total of 53 Community Specialist Teams are now operational and providing services to patients nationwide, consisting of 26 for CSTs for Older Persons and 27 CSTs for Chronic Disease Management.
- Construction completed on 3 ECC Hubs: Our Lady's Hospice, Harolds Cross, Cavan and Mallow.
- Over 2,800 healthcare workers have been recruited to the Enhanced Community Care (ECC) Programme.
- Continued funding of the GP Direct Access to Community Diagnostics (GPACD) scheme which delivered over 470,000 diagnostic tests (280,000 radiology scans and 190,000 CDM tests) during the year.
- Continued expansion and augmentation of Community Intervention Teams (CIT) providing services nationwide, with a total of 23 teams in place, and over 100,000 referrals accepted and treated by this service in 2024.
- Continued delivery of Primary Care Centres (PCCs) across the country, with five new PCCs opening in 2024, bringing the total number of operational centres to 179 across the country as at the end of the year.

The continued infrastructural provision of Primary Care Centres provides accommodation for a range of services, including community mental health services. In 2024 five Primary Care Centres became operational:

- Clondalkin, (Boot Road) Dublin
- Kilbeggan, Westmeath
- Kilbarrack, Dublin
- Dunfanaghy/ Falcarragh, Donegal
- Newcastle West, Limerick

OLDER PERSONS SERVICES

The Health (Miscellaneous Provisions) (No.2) Act 2024 was signed into law on 17 July 2024, and commenced, in the main, on 23 September 2024. The Act provides for new enforcement powers for the Chief Inspector of Social Services in HIQA to provide additional safeguards for residents of residential care centres and for the collection of key data from nursing homes to allow for more integrated national planning across the sector.

The Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) (Amendment) Regulations 2025 provide for enhanced requirements for nursing homes.

Under the 2024 Capital Plan, Funding of €10 million was allocated on a once-off basis towards capital improvements for community facilities for Older People day centres and meals on wheels locations.

The funding was made available to approximately 400 grant-funded community organisations, at up to €25,000 per facility, which had an existing funding arrangement with the HSE to provide relevant services. To allow additional service providers to avail of this funding, the timeframe for applications for this funding has been extended to the end of Quarter 1 of 2025. Eligible service providers have been advised accordingly.

A new funding programme was established to facilitate registered nurses working in private nursing homes to obtain a postgraduate diploma qualification in Gerontological Nursing. Over 200 nurses enrolled on programmes in the 2024/25 academic year.

National Adult Palliative Care Policy

A new National Adult Palliative Care Policy was published in September 2024. The policy takes account of the projected increase in Ireland's older population and the corresponding increase in the number of people with life-limiting conditions requiring palliative care. The vision of the policy is universal palliative care. Everyone who needs palliative care is able to access person-centred and effective services. The policy aligns with Sláintecare principles. There are 25 recommendations with associated actions that require implementation. The life cycle of the policy is seven years.

Redesignation of Four Adult Hospices

In January 2024, four adult hospices (Marymount, Milford, Galway, and St. Francis Dublin) moved from section 39 to section 38 status. This means that all adult hospices in the country are now fully State funded. It provides financial and staffing sustainability to ensure that these providers of adult specialist palliative care services can continue their vital work.

Commission on Care for Older People

The Government established an independent Commission on Care for Older People, the inaugural meeting of which was held on 21st March 2024. The Commission is charged with examining the provision of health and social care services and supports for older people and with making recommendations to the Government for their strategic development. A cross-departmental group will be established under the auspices of the Commission to consider whether the supports for positive ageing across the life-course are fit-for-purpose and to develop a costed implementation plan for options to optimise these supports.

National Rollout of Healthy Age Friendly Homes Programme

The Healthy Age Friendly Homes Programme (HAFH) expanded from nine pilot sites to all 31 local authorities nationwide, supporting up to 10,500 older people per year. HAFH is an innovative support coordination service to help older people live healthier and independent lives in their own homes for longer by providing supports across the domains of health, housing, community and social supports, assistive technologies, climate/warmer homes, and finance.

The World Health Organisation cites the approach taken by the programme as a best practice example for the provision of person-centred integrated care for older people.

Expansion of Dementia Supports

2024 saw the further expansion of dementia supports in the community with the opening of activity clubs for people with young onset dementia in seven locations. The provision of dementia day care at home also increased, providing an alternative for people who are not able to attend a dementia day care centre.

Family Carer Needs Assessment Pilot

The final evaluation report of the HSE pilot of the interRAI Family Carer Needs Assessment was published in March 2024. The pilot examined the role of the family carer, how caring affects them, how much care they can realistically provide while still allowing for involvement in other activities, and the types of support family carers need to support them in their caring role and how these can be met.

HOME SUPPORT

The 2024 Budget provided funding of €730 million for Home Support provision. In the 2025 Budget an additional €121.9 million was provided for Home Support to contribute towards a range of statutory obligations on employers relating to sick pay, pension auto-enrolment and increased employment permit threshold for non-EU workers, and to deliver 24.3 million hours of home support (including complex home support).

The Health (Amendment) (Licensing of Professional Home Support Providers) Bill will regulate home support services in Ireland. Specifically, it will establish a licensing system for providers of home support services, under which it will be an offence to operate a service without a license. On 14 May 2024, the General Scheme was approved by Government and has been published on the Department of Health website along with the Regulatory Impact Analysis. Department Officials met with the Joint Oireachtas Committee for pre-legislative scrutiny on 19th June 2024. The General Scheme has now been referred to the Office of Parliamentary Counsel for final drafting.

23,761,280 Home Support hours were delivered throughout 2024, which is 8% in excess of the target (22m hours) and also shows an increase of 7.4% in activity when compared to the 2023 year-end position.

NURSING HOMES

The 2024 Nursing Home Resident Safety Improvement (RSI) Scheme provided €10m funding to improve infection prevention and fire safety in private and voluntary nursing homes.

Under this scheme, up to €25,000 was available to each qualifying nursing home for eligible works carried out from 1st January 2020 to 15th November 2024 to improve compliance with the standards published by the Health Information and Quality Authority (HIQA) under Regulation 27 (Protection against infection) and Regulation 28 (Fire precautions).

396 nursing homes claimed approximately €9.5 million under this scheme with 85% of applicants availing of the full €25,000. It is promising to note improved levels of compliance amongst RSI scheme recipients with regulations targeted by the scheme.

Nursing Home Support Scheme (NHSS)

- The NHSS Budget spend in 2024 was €1.78 billion inclusive of client contributions. At year end, this supported 24,002 clients in Long Term Residential Care in the Nursing Home sector.
- The budget allowed a 4-week funding period to be maintained throughout 2024.

SLÁINTECARE HEALTHY COMMUNITIES PROGRAMME

The Sláintecare Healthy Communities programme (SHCP) provides health and wellbeing supports in 20 areas experiencing high deprivation rates; funding was secured to provide for an additional four areas in 2025.

COMMUNITY NURSING UNITS

In 2024 progress was maintained on the programme of investment in public residential care, whilst recognising the requirement for HIQA regulatory compliance. Overall, Capital Plan 2024 constructed 135 Community Nursing Unit (CNU) bed spaces to meet HIQA requirements across the country.

URGENT AND EMERGENCY CARE (UEC)

The Urgent and Emergency Care Operational plans contain numerous actions aimed at integrating care delivery:

- All regional areas to prepare for and introduce integrated operational hubs and action teams on site.
- All acute sites and community areas sought to utilise all available bed capacity across sites, utilising weekly community bed capacity report to inform and assist timely and safe discharges from acute hospitals as part of integrated operations.
- Ensure the transfer of clinically appropriate patients from acute hospital beds (model 3 and 4 hospitals) to sub-acute beds in alternative care settings, including model 2 hospitals and community facilities.
- Two virtual wards were opened, one each in UH Limerick and St Vincent's UH, initially with a complement of 10 beds each. Both wards were fully scaled up to the planned full capacity of 25 beds each, bringing to 50 the number of patients that were able to receive appropriate care while remaining in their own setting.

NURSING AND MIDWIFERY

Framework for Safe Nurse Staffing and Skill Mix

The Framework for Safe Nurse Staffing and Skill Mix provides an evidence-based flexible approach to determine the number of registered nurses and healthcare assistants (HCAs) required to provide quality care based on patient need.

- 2024 focused on Phase 3 of this ongoing programme of work to develop a Framework in Long Term Residential Care (Phase 3i) and community care settings (phase 3ii). This phase

is focused on determining safe nurse staffing levels and skill mix within long-term residential care (LTRC) settings for older people in Ireland.

- Significant progress was made with Phase 3i in 2024 with the conclusion of the research associated with this phase. This has resulted in a final research evaluation report presented to the national Taskforce which will inform policy development.
- In relation to Phase 3ii, significant preparatory work progressed to determine an appropriate model of community nursing to deliver Sláintecare following a review of the international evidence and consultations with several countries.

CANCER SERVICES

In 2024, the National Cancer Control Programme (NCCP) and the Irish Institute of Pharmacy launched its Cancer Care Hub, an interim measure in the NCCP's Cancer Care Champion programme. This hub is an online information resource intended to support all pharmacists and community pharmacists in providing optimal care for cancer patients.

Funding was provided to the NCCP's Alliance of Community Cancer Support Centres and Services, to support the provision of survivorship supports to cancer patients and their families in the community. Community Cancer Support Centres are partners in the delivery of survivorship supports under the Psycho-oncology Model of Care. Those centres in, and applying to be in the Alliance, recognise the importance of evidence-based survivorship supports in line with the NCCP's Best Practice Guidance.

Ireland now has over 220,000 people living after receiving a cancer diagnosis. This is an almost 50% increase over seven years ago, when the National Cancer Strategy was published, illustrating the success of the Strategy.

MENTAL HEALTH

In 2024 additional funding was allocated to counselling services, including Suicide Bereavement Counselling, and the Traveller Counselling Service to allow the service to cover a greater area of the country.

A new multi-agency Community Access Support Team (CAST) pilot project between an Garda Síochána and the HSE was launched in Limerick in October 2024. This is a new initiative for Ireland, and supported by the Department of Health and the Department of Justice, the pilot comprises of intervention, prevention and outreach with the potential to yield a better outcome for persons experiencing a mental health crisis or situational trauma.

Crisis Resolution Teams continued to expand in 2024, with 5 learning sites now established, providing rapid assessment and intensive support to people who are in a mental health crisis as an alternative to hospital admission.

The Mental Health National Clinical Programmes continued to expand and rollout more teams nationwide, including additional teams and staffing for Eating Disorders, Early Intervention in Psychosis, ADHD in Adults and Dual Diagnosis.

Mental Health services capital progress in 2024 included planning for a new mental health Capital Programme, with a focus on upgrading existing facilities and continued implementation of Mental Health Commission recommendations in existing units. Fit for purpose infrastructure completed in 2024 included:

- Replacement accommodation for residents of Springmount, Dungarvan Community Hospital, Waterford
- Eating Disorder Specialist Hub on the Mount Carmel Campus, Dublin
- Continuation of the national anti-ligature programme of works.

ORAL HEALTH

The National Oral Health Policy (NOHP) aligns with Sláintecare and outlines the long-term vision for substantive reform of oral healthcare services: oral healthcare will be embedded within primary care, integrated with general healthcare, and oriented around prevention. In 2024, the implementation plan for phase 1 covering 2025-2027 was drafted. Targeted consultation with external stakeholders on the draft plan was held in July and August 2024.

MEDICINES

Prescriptions are now valid for a maximum of 12 months in certain situations. Prescribers can issue a prescription for 12 months if they believe it is appropriate for their patients.

HEALTH INFORMATION BILL

The Health Information Bill was published in July 2024 and cleared Second Stage in Dáil Éireann in September 2024. The Bill provides a clear legal basis for the establishment of electronic health records for everyone in Ireland and is therefore a vital component for the successful implementation of Digital for Care: A Digital Health Framework for Ireland 2024-2030. The Bill also facilitates appropriate sharing of patient information across healthcare settings. The Bill will support Ireland's obligations and opportunities under the European Health Data Space (EHDS) Regulation.

CAPITAL INFRASTRUCTURE

The Capital allocation for 2024 was €1.234bn, which included ring-fenced funding of €2.5m allocated for Shared Island projects. Supplementary capital funding in the amount of €5.455m was received in respect of Brexit OPW Health Infrastructure projects. This brought the total Capital allocation for 2024 to €1.239bn.

In 2024, Capital Programmatic areas were developed to align with service policies, strategies and priorities. Programmes of focus included acute bed capacity, surgical hubs, primary care, residential beds and mental health.

Acute construction projects of 121 beds completed in 2024:

- 50-bed replacement ward block at Portiuncula University Hospital, Ballinasloe.
- 14 beds of the ward refurbishment at St Luke's Hospital, Kilkenny
- 26 additional beds at Sligo University Hospital
- 9 additional beds at Connolly Hospital Blanchardstown
- 12 additional Oncology and Haematology inpatient beds at the Mater Hospital
- 10 additional beds at Cavan General Hospital.

Capital projects progressed by the capital programme and in accordance with Government Priorities in 2024 included:

- Advancing the National Children's Hospital and progressing the development of the new Elective Hospitals and the National Maternity Hospital.
- Progressing construction of capacity projects across the country including the 96 acute bed ward block at University Hospital Limerick, with additional planning for future capacity requirements at the hospital underway.
- Developing Surgical Hubs in Cork, Galway, Limerick, Dublin (2) and Waterford to address waiting lists.
- Progressing a wide range of capital projects at primary, community and mental health facilities, which will provide modern health accommodation and equipment to improve and expand service provision.
- Investment in infrastructural risk, the Equipment Replacement Programme, in ambulance bases and in maintaining the ambulance fleet continued across the country.
- Continued progress on the replacement/refurbishment of Community Nursing Units in the HIQA compliance programme, with 135 Community Nursing Unit (CNU) beds constructed to meet HIQA requirements:
 - 27 beds at Falcarragh CNU, Donegal
 - 50 beds at St Conlon's CNU, Nenagh, Tipperary
 - 9 beds at St Patrick's Community Hospital Fermoy, Cork
 - 12 beds at St Joseph's Community Hospital, Millstreet, Cork
 - 20 beds at Leopardstown Park Hospital following the reconfiguration of two Nightingale Wards and upgrades to the electrical and heating systems
 - 17 beds at Cherry Orchard, Dublin by addressing infrastructural risk issues relating to fire safety and infection control.
- Progressing the Climate Action and Sustainability capital programme. In 2024 the HSE continued to reduce carbon emissions from healthcare buildings by reducing energy consumed by new and existing buildings and shifting energy sources away from fossil fuels and towards renewable and carbon zero energy sources. Progress in 2024 included:
- Progressing the Deep Energy and Carbon Retrofit, Pilot Pathfinder Programme in partnership with the Sustainable Energy Authority of Ireland (SEAI)
- Developing a scaled-up, costed, Deep Energy and Carbon Retrofit Programme
- Ensuring all facilities are designed to omit fossil fuels and that a clear roadmap exists for all new projects to be net zero carbon to meet obligations for 2030 and 2050
- Progressing an energy shallow retrofit programme which delivers LED lighting, window and insulation upgrades, heat pump installations and Photovoltaic systems.

CHAPTER 3

MAKE ACCESS TO HEALTHCARE FAIRER AND FASTER

The Department is committed to reducing health inequalities and ensuring fairer, more affordable care, with an emphasis on need and not ability to pay. Improving timely access is a key goal, so that those who need it can get the right care, in the right place, at the right time.

ACUTE HOSPITAL WAITING LISTS

The Waiting List Action Plan (WLAP) 2024, launched in March, set out a programme of work to deliver a reduction in the number of patients on waiting lists and the time they spend waiting to access care. To support this plan, the Government allocated €360 million to build on the progress achieved since 2021 through implementation of the Action Plan approach.

The Department worked closely with the HSE and the National Treatment Purchase Fund (NTPF) to develop the specific actions and targets set out in the 2024 plan, which included 19 actions across three themes, namely Delivering Capacity, Reforming Scheduled Care, and Enabling Scheduled Care Reform.

At the end of 2024, there were 673,962 patients on the active hospital scheduled care waiting list, which represents a small increase since the beginning of the year. However, significant progress was made during the year, including reducing the number of patients on the Outpatient waiting list and the number of long waiters (patients waiting over 12 months). There has been an approximate 12% reduction in the total number of patients waiting over 12 months during the year, and a corresponding reduction of approximately 20% in the number waiting over 18 months.

Progress was also made in reducing the average length of time that patients on lists were waiting. OPD (Outpatient Department) improved from 7.5 to 6.8 months, IPDC (Inpatient/Day Case) from 6.4 to 6.0 months, and the length of time patients on the GI Scope list had been waiting improved from 3.0 to 2.7 months.

Approximately 85% of all patients who were waiting for care at the start of 2024 were no longer on a waiting list by the end of the year.

The trend of year-on-year increases in health service activity and in the numbers of patients being treated continued in 2024. During the year, 1.812 million people were removed from our acute hospital waiting lists, which was in line with the projections in the WLAP. However, the increased activity and progress in the length of time patients are waiting was offset by increased demand for scheduled care services. Last year, there were 1.814 million people added to hospital waiting lists, which was just over 2% higher than projected and equates to approximately 39,500 people.

Without the implementation of the 2024 WLAP and delivery of HSE additional activity and NTPF removals, it is estimated that the waiting list would have increased by 64% to almost 1.1 million people in 2024.

Several reform enablers are also being progressed under the WLAP approach to drive the most efficient use of available resources in a patient-centred way. Progress was made during 2024 in respect of implementation of patient-centred booking arrangements through development of Centralised Referrals, Patient-Initiated Reviews and the development of the HSE Website.

Significant progress was also made during the year in terms of implementation of Modernised Care Pathways (MCPs) which are another key aspect of reform within the WLAP. MCPs are founded on the vision of Sláintecare and the principle of transitioning acute scheduled care closer to the patient's home through primary and/or community care and adopting a multi-interdisciplinary approach to care delivery.

PAEDIATRIC SPINAL SURGERY

A dedicated Paediatric Spinal Surgery Management Unit was established in Children's Health Ireland (CHI) to manage the delivery of spinal surgery. International outsourcing arrangements were established with Morgan Stanley Children's Hospital in New York and Great Ormond Street Hospital in London, with families fully supported in accessing these pathways if it is the right option for their children.

513 spinal procedures were completed in 2024, which represents an 11% increase on the 464 completed in 2022, and a 35% increase when compared to the 380 that were completed in 2019. Across 2024, there was a 37% decrease in the number of patients waiting over 4 months on the active list, from 86 patients at the start of January, to 54 at the end of the year.

URGENT AND EMERGENCY CARE (UEC)

- In 2024, 13,000 (11%) fewer patients were counted on a trolley at 8am waiting for an inpatient bed than during 2023.
- The Urgent and Emergency Care Plan sought to standardise the operating hours of all Injury Units to open 8am to 8pm, 7 days a week including bank holidays.
- To mitigate periods of increased demand, the Private Hospital Framework was utilised to access all available and appropriate bed capacity.
- Additional and extended hours were put in place to provide the senior decision makers and other staff integral to supporting 7/7 operations, thereby improved patient flow and reduced emergency department congestion.

ELIGIBILITY

The Department of Health is currently implementing a significant programme of work relating to eligibility measures to increase access and the affordability of healthcare services.

The primary goal is to complete a comprehensive review and appraisal of the arrangements that underpin the existing eligibility framework. This will enable the development of evidence-based policy options for a future eligibility framework to support a progressive move towards universal healthcare.

STRATEGIC PLAN FOR CRITICAL CARE

The Government approved the Strategic Plan for Critical Care in December 2020. This set out a plan to address historical critical care capacity deficits and meet the requirements set out in the Health Service Capacity Review.

Under the Strategic Plan, capacity has increased from 258 critical care beds to 340 beds at the end of 2024. This represents an increase of 82 beds (31.5%) from the 2020 baseline.

To support this increased capacity, over 800 highly skilled staff were recruited by year end 2024 and the Plan has also enabled the further expansion of critical care education places to support ongoing and future recruitment needs.

The roll out of the Critical Care Clinical Information System has continued with the recruitment of the National Implementation Team and one Local Implementation Team. This development is supporting staff in managing their patients more effectively, improving patient outcomes and shortening the length of stay in ICU.

There has been additional recruitment to and development of the Critical Care Retrieval Service.

In addition to the capacity increases achieved under Phase 1 of the Strategic Plan for Critical Care, capital planning is underway for five projects that will deliver 106 new critical care beds in Phase 2 as well as replacing and updating existing ones. This will increase capacity to 458 beds and exceed the recommendations of the 2018 Health Service Capacity Review that had recommended a target of 430 critical care beds by 2031.

SLÁINTECARE

During 2024, Sláintecare continued to be implemented, focusing on three strategic priority areas for Ireland's health and social care system:

- Increase access to health and social care services
- Improve service quality for patients and service users
- Increase capacity of the health and social care system

Underpinning the delivery of Sláintecare projects across these priority areas, are critical enabling reform programmes designed to transform the delivery of health and social care services through digital transformation, innovation, and with an increased focus on achieving greater levels of productivity.

In 2024 key progress was made across Sláintecare programmes, including:

1) Improving Access

- Progress on removing Private Practice from Public Hospitals continued with 2,770 consultants signed onto the Public Only Consultant Contract, as of 11 December 2024.
- In July 2024, the free contraception scheme for women was expanded to include all those aged 17-35. With nearly 2,400 GPs and 2,050 pharmacies participating, approximately 88,000 individuals used the scheme from September to December 2022, over 189,000 in 2023, and just under 287,000 from January to November 2024.
- Enhanced Community Care (ECC) Programme: With 95% of GPs signed up to the Chronic Disease Management (CDM) programme and over 645,000 patient reviews by GPs in 2024, 92% of patients with chronic disease are now fully managed routinely in primary care and are not attending hospital for ongoing management of their chronic condition.

2) Improving Service Quality

- The Healthy Ireland Survey 2024 highlighted that 81% of the population report being in overall good or very good health, remaining broadly unchanged since 2023 (80%).

Two in every five people (41%) have a long-term health condition confirmed by a medical professional, broadly unchanged since 2023 (40%).

- National Men's Health Action Plan— Healthy Ireland - Men (HI- M) 2024 – 2028 was published in November 2024.
- National Mental Health Promotion Plan - Pathway to Wellbeing published in December 2024.

3) Building Capacity

- The Construction of the first Surgical Hub was completed at the end of 2024 at Mount Carmel, South Dublin; once fully operational it is envisaged that this Hub will deliver over 28,000 day-cases, minor operations and outpatient consultations annually.
- The Acute Inpatient Bed Capacity Expansion Plan was published in 2024 setting out a total planned capacity for delivery of 3,438 additional new acute inpatient beds and 929 replacement acute inpatient beds over the period 2024 to 2031.

4) Enabling Reform

- Health Regions commenced on 4 March 2024 and all six Regional Executive Officers were in post by April 2024 with Hospital Groups and Community Healthcare Organisations stood down from 01 October 2024.
- *Digital for Care 2030: A Digital Health Framework for Ireland 2024-2030* was published in May 2024, with trials of the HSE Health App taking place to facilitate the public launch of the App in Q1 2025.
- Creating a Culture of Innovation: 16 projects were funded to test as a proof of concept in 2024 under Rounds 2 & 3 of the Sláintecare Integration Innovation Fund (SIIF).

Path to Universal Healthcare: Programme for Government and Sláintecare 2025+

1. Sláintecare 2025+

The Sláintecare 2025+ Vision is to provide universal, accessible, affordable, person centred, safe and high-quality health and social care for all the people of Ireland. To achieve this vision, the Sláintecare 2025+ Mission is to deliver more timely access, high quality, lower-cost patient care and better health outcomes in partnership with the people who use our services.

We will do this by increasing capacity, improving productivity and delivering more efficient and integrated care. Sláintecare 2025+ sets out an integrated and whole of- system reform programme to be implemented over the period 2025–2027, recognising that some of these reforms will continue over a longer timeframe. Sláintecare 2025+ sets out 23 individual Sláintecare Projects and the milestones to be achieved on the path to achieving universal healthcare across three priority areas:

- Increase access to health and social care services
- Improve service quality for patients and service users
- Increase capacity of the health and social care system

Underpinning delivery of Sláintecare projects across these priority areas are critical enabling reform programmes designed to transform the delivery of health and social care services through digital transformation, innovation, and with an increased focus on achieving greater levels of productivity.

The plan is underpinned by the eight 2017 Sláintecare Principles. Advancing equality and inclusion in health is a whole Government issue. Progress has been made on several fronts, but challenges persist. The Government will continue to drive progress and reform, ensuring Ireland is an inclusive and accepting country.

2. SLÁINTECARE 2025+ Programmes

Improving Access

- Urgent & Emergency Care – reducing delays in Emergency Departments and providing safer urgent care.
- Waiting Lists Reduction & Reform – focusing on increasing capacity, reforming scheduled care and the use of enabling technologies to reduce waiting lists and waiting times.
- Primary Care Therapy Waiting Lists – addressing primary care waiting lists.
- Enhanced Community Care – moving hospital and specialist services closer to home and community.
- Removing Private Care from Public Hospitals – Public Only Consultant Contract (POCC) – rolling out of the new Consultant Contract and associated extended working hours and weekend rostering.
- Eligibility Framework – improving access and the affordability of healthcare services informed by an evidence-based review.

Improving Service Quality

- Patient Engagement – listening to people and involving them in service design and delivery.
- Patient Safety Quality and Assurance – ensuring our services provide safe, high-quality care.
- Public Health, Prevention, Health Promotion and Social Inclusion – supporting people to live well, with and without disease, and choosing healthy behaviours.
- Disability Services, Mental Health and Older Persons – improving and extending disability services, mental health provision, and services for older people.
- Women’s Health – providing an increased focus on women’s health issues and greater scrutiny of women’s experiences of health care.
- Oral Health – reforming and modernising the provision of oral healthcare services.

Build Capacity

- Strategic Workforce Planning and workforce productivity and workforce reform measures. Delivering accessible and affordable care will require the workforce operating to the top of their skillsets with a sustainable flow of new resources to build and sustain it at the required levels into the future. Strategic workforce planning and workforce productivity and reform are key programmes in supporting this.
- Health Infrastructure including Elective Hospitals and Surgical Hubs – reducing waiting lists by enabling the separation of emergency (unscheduled) care from elective (scheduled) care.

- Planning Future Capacity – capital/ buildings and workforce numbers – planning infrastructural needs in Primary & Acute Care and associated workforce needed to deliver the capacity required for the future. Planning for future capacity requirements will ensure that we are addressing longer-term challenges and preparing our health and social care service to be future-fit.
- Expansion of Pharmacy Services – improving services that can be delivered by pharmacists and pharmacies for the benefit of the public and the wider healthcare service.

Enabling Reforms

- HSE Health Regions – reorganising the HSE into six regions in order that hospital and community care services will be integrated and managed together in each region which will support the delivery of more efficient, integrated, streamlined and productive services.
- Digital Health Transformation – improving health outcomes enabled by safe, secure and connected digital health. Implementation of the digital health strategy, Digital for Care – Strategic Digital Health and Social Care Framework (2024-2030) will be critical to connecting health information and data, which will improve communications and process efficiencies and patient experience in our health and social care service.
- Creating an Innovation Culture – enabling health care innovation to support sustainable health and social care for all.
- Driving System-wide Productivity Improvements – improving productivity, efficiency and performance across the health service.

STRATEGIC WORKFORCE PLANNING

Increasing Student Training Places

Significant progress has been made working with the Department of Further and Higher Education, Research, Innovation and Science and the Higher Education Sector to increase student training places for the health sector.

- In September 2022 an agreement was secured with the Irish Medical Schools for additional 200 Irish/EU medicine student places by 2026.
- Over the period 2014 to 2023 first-year nursing places in Irish Higher Education Institutions (HEIs) grew from 1,570 to 2,100 – an increase of almost 34%.
- In July 2024, Government approved the prioritisation of funding to support the expansion of training places in priority healthcare areas including Speech and Language Therapy, Occupational Therapy and Physiotherapy. This will contribute to delivering expansion in the region of 35% in these vital disciplines over the next two academic years.
- In 2024 over 470 additional student places were provided in the Higher Education Sector on health-related courses. This includes 78 student places in Nursing and Midwifery, 83 student places in Allied Health Professions and 26 student places in medicine in Northern Ireland.
- Further work is underway to increase the domestic supply of health-related professionals.

WORKFORCE REFORM

Designation of Physiotherapists as Referrers for Radiological Procedures

In 2024 work progressed to develop the policy and to prepare for the necessary legislative change to enable physiotherapists who have completed the relevant training, and meet the competency requirements, to refer patients for medical radiological procedures including X-ray. This will support the delivery of effective and efficient patient care and will result in fewer steps in the care of patients who require diagnostics.

Advanced Practice for Health & Social Care Professions

€5.5 million has been allocated in Budget 2025 to support continued growth of Advanced Practice in nursing and midwifery and to enable these roles to be rolled out for the first time for Health and Social Care Professionals. The Department is working with the HSE to ensure these posts support improvements in primary and community care, in line with new regional structures in the HSE and areas of policy priority including nursing midwifery and HSCP led care in the community, cancer care, women's health, acute care areas experiencing challenges with access to care.

NATIONAL CHILDREN'S HOSPITAL IRELAND



- At the end of December 2024, the National Children's Hospital Ireland (NCHI) project was approximately 94% complete, against the contract. The project has advanced to a 'snagging' and finishing phase, across just over 5,500 rooms.
- The major focus throughout 2024 was the internal fit-out and completion of rooms to the highest international standards, with the installation of medical equipment and integrated building technical commissioning underway.
- The hospital received a BREEAM Excellent Rating in Design and is one of only a small number of hospitals in the world to have achieved such a rating.
- BREEAM is the world's leading sustainability assessment method for master planning projects, infrastructure and buildings.

- The NCHI is also designed to meet the Building Energy Rating A3' standard including the installation of the most efficient energy systems delivering 60-70% per square metre reduction in energy running costs when compared to the existing children's hospitals.
- In March 2024, work commenced on the new family accommodation unit, which is located across the plaza from the main entrance of the NCHI. It will provide accommodation for up to 52 families each night, more than double the accommodation available at the current Ronald McDonald House at Children's Health Ireland, Crumlin. The new facility is 30% complete and on track to be completed in Q3 2025.
- The construction of the helipad is complete. This is the first elevated helipad in the country and will provide rapid and safe access to key areas of the hospital including Critical Care, Theatre and Emergency Departments. The helipad will also provide access to the adult hospital at St James's.
- The NCHI will be Ireland's first digital public hospital. Electronic Healthcare Record (EHR) implementation is well underway for the NCHI. This is the largest deployment of an EHR in Ireland's healthcare system to date and will result in the NCHI being a truly "digital-born" hospital.

OTHER MAJOR CAPITAL PROJECTS

Elective Care Programme:

- Through the course of 2024, the HSE and Government continued to progress plans for the development of new Elective Hospitals in Ireland. The Government had previously approved progression of proposed sites in Cork (St Stephen's Hospital, Sarsfield Court) and Galway (Merlin Park University Hospital).
- In May 2024, the Government noted the two emerging preferred sites for the development of new elective hospitals in Dublin, at Connolly Hospital in Blanchardstown and at the current Children's Hospital site in Crumlin. Work continues to develop the business cases for the two Dublin sites, informed by the ongoing, parallel work on the Cork and Galway projects.
- At the end of 2024, the HSE appointed an Architect-led Design Team which will provide the full scope of detailed design services for the Elective Hospitals Programme and develop pre-tender business cases.
- The new Elective Hospitals will provide significant additional capacity, enabling the separation of scheduled and unscheduled care. The greater elective care capacity created by them will also release capacity in existing hospitals for more acute, non-elective and inpatient activity. This will change the way in which day cases, scheduled procedures, surgeries, scans and outpatient services can be better arranged across the country, ensuring greater overall healthcare capacity in the future and helping to address waiting times. Once up and running, the Elective Hospitals will deliver nearly 1 million elective procedures every year.
- In the interim, to address elective care capacity needs in the shorter term, the HSE is expediting the development of 'Surgical Hubs' in Cork, Dublin, Galway, Limerick, and Waterford. The Surgical Hubs are based on the successful Reeves Day Surgery Unit at Tallaght University Hospital, which has significantly reduced waiting times for certain day-case procedures. Construction of the South Dublin Hub was completed at the end of 2024, ready to commence operations in early 2025. The remaining Hubs will become operational during 2025 and 2026. Once operational, each Hub will deliver over 28,000-day cases, minor operations, and outpatient consultations annually.

Hampson House (formerly known as the Earl Building)

- Work on Hampson House was completed in 2024, and it is now the primary location for clinics that provide a range of outpatient services for over 100,000 patients. The services included are Maternity Outpatients, Paediatric Outpatients, Colposcopy procedures, Perinatal Mental Health, Social Work and Dietetics.

NATIONAL AMBULANCE SERVICE (NAS)

2024 saw the continued development of high-quality pre-hospital emergency care services with increased investment in the National Ambulance Service (NAS). This investment enabled the continued transformation of prehospital emergency care services to better meet patient needs.

A key priority in 2024 was the continued provision of frontline prehospital emergency care by the NAS. In the year to date to November 2024, a total of 429,746 urgent and emergency calls were received of which over 192,527 resulted in the activation of an emergency resource.

In addition, the NAS continued to build further capacity in its “Hear and Treat” and “See and Treat” alternative care pathways, designed to treat more patients at the most appropriate level of clinical need and to reduce patient conveyances to hospital Emergency Departments where there is no clinical need. In 2024, over 1,000 patients each week benefited from one or more of these pathways, with 40% of these patients not requiring subsequent conveyance to a hospital ED. 6.4% of all emergency calls to the NAS National Emergency Operations Centre were triaged for response by an alternative care pathway.

The Department, together with other stakeholders including the NAS, the Irish Air Corps and the Irish Coast Guard, continued to progress development of aeromedical services to serve critically ill patients nationwide, including those in rural or isolated areas.

The Department continued to work closely with the NAS in 2024 to implement the NAS strategic programme of reform to transform the NAS from a traditional patient conveyance service to a mobile, Urgent and Emergency Care Service in line with the changing needs of the health system.

NATIONAL TRAUMA STRATEGY

In 2018, the Government approved the Trauma Strategy, *Report of the Trauma Steering Group, A Trauma System for Ireland*. The Trauma Strategy aims to significantly improve the survival rate of major trauma patients by ensuring that every patient receives the best possible standard of care in the most appropriate facility.

Since 2018, implementation of the Strategy has focused on developing the Major Trauma Centres (MTCs) at the Mater (MMUH) and Cork University Hospital (CUH), and trauma services in the two trauma networks. Building on the official launch of major trauma services at the MTCs in April 2023, progress continues to be made to implement the Trauma Strategy.

In 2024, a number of capital projects to support the delivery of major trauma services were progressed at MMUH and at CUH, including the construction of a new helipad at CUH to support aeromedical access to the MTC.

Inter-hospital transfers of trauma patients are coordinated by the Trauma Desk at the National Emergency Operations Centre. This service expanded to include referrals of Traumatic Brain Injury patients to Beaumont in March 2024, and referrals from the South Trauma Network to the MTC at CUH in July 2024, following its initial launch within the Central Trauma Network in 2023.

A new clinical guidance document was launched by the HSE in May 2024, which aims to improve trauma care for older adults. Consultant physicians in geriatric medicine have been appointed to the MTCs, one each in MMUH and CUH, to provide integrated trauma care to older adults. Fracture Liaison Services are active at 12 hospital sites. This service identifies, treats, and refers eligible patients aged 50+ with fragility fractures and aims to reduce subsequent fractures.

CANCER SERVICES

Radiolabelled therapy, Peptide Receptor Radionuclide Therapy (PRRT) for neuroendocrine tumour (NET) patients was launched in St Vincent's University Hospital in March 2024, following investment of €0.8 million in funding to enable the provision of this service. It is expected that 40 patients will receive this treatment per year, increasing to 50-60 per year in the future, at a cost of €3.5 million per annum. This means that NET patients will no longer need to travel to receive this treatment.

Further capital projects for cancer services were continued under the Capital Plan for 2024. This included the equipment (linear accelerators) replacement programme for St Luke's Radiation Oncology Network, expansion of the oncology day unit at Cork University Hospital, and progression of the replacement of Aseptic Compounding Units (ACUs) at Cork University Hospital, Letterkenny University Hospital, University Hospital Kerry, and Cavan General Hospital and completion of the ACU at Tallaght University Hospital and expansion of the day ward in St Vincent's University Hospital.

CARDIOVASCULAR POLICY

Cardiovascular Conditions remain a significant challenge and is the second largest cause of mortality. However, Ireland has seen a decline in the number of deaths from Cardiovascular Diseases (CVD). Since 2012, the mortality rate from heart disease has been reduced by 38% and mortality from stroke has been reduced by 48%. In 2021, 4,121 deaths were attributed to heart disease. The Irish Heart Foundation suggest that cardiovascular disease costs the state €1.7B per annum. Overall mortality rates have decreased, but there remains a considerable absolute burden in terms of disability. Estimates vary, but there are approximately 60k stroke survivors and up to 100k people living with Heart Failure.

CARDIAC SERVICES

- The Programme for Government committed to delivering a second Cath Lab in Waterford. Funding was allocated and this opened on the 4th of September 2023. The existing Cath lab is open from 8 am – 8 pm Monday to Friday. Additional staff to complement existing services and to extend the opening hours of one Cardiac Cath Lab at UHW to a 7 day, 8am – 8pm service was allocated in 2024.
- The Irish Heart Foundation in partnership with the Department applied for 'Her Heart Matters' to the Women's Health Fund in building on an existing campaign on gender differences in CVD. The application was recommended for funding through the Women's Health Fund and the campaign is now concluded.
- Three heart failure projects received funding through the Women's Health Fund to further understand a heart failure diagnosis in women.
- In 2024, both the Department worked closely with other EU member states on the development of Council Conclusions on the improvement of cardiovascular health in the European Union. These Conclusions were published in December 2024 and set out an EU level political commitment to reducing mortality and disability from cardiovascular diseases

through strengthening efforts by all member states on prevention, early detection, diagnosis, treatment and management of cardiovascular diseases.

- A Joint Action on Cardiovascular Diseases and Diabetes (JACARDI) commenced. This joint action was identified through the EU4Health Steering Group and Programme Committee.

HSE NATIONAL STROKE STRATEGY 2022-2027

The HSE's Stroke Strategy (2022-2027) aims to modernise and reform stroke services in line with Sláintecare policy. The Strategy provides a blueprint for the required investment over five years, to deliver on key priorities under four pillars: Stroke Prevention, Acute Care and Cure, Rehabilitation and Restoration to Life, and Education and Research.

The Strategy received an additional €4.3m in funding in 2024. By 2025, a total of €8.5m will have been invested in the implementation of the strategy, resulting in better services for patients with stroke.

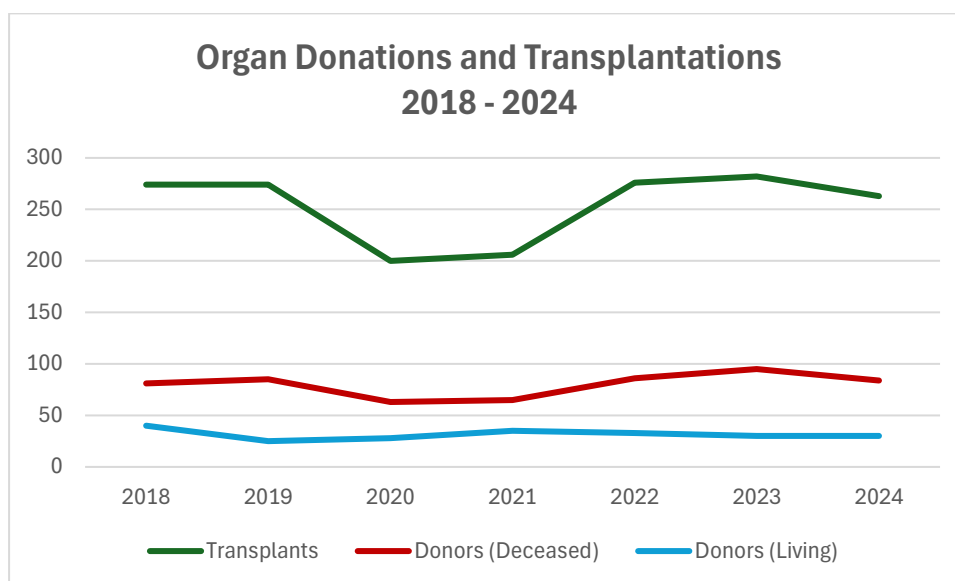
The funding secured in 2024 has enabled the extension of the GP contract to include a screening and treatment strategy for high blood pressure. This measure initially applied to over 45-year-olds but has now been expanded to include those 18+. Identifying people with high blood pressure and controlling this risk factor is a key policy objective of the Prevention Pillar of the Stroke Strategy and will help avoid preventable incidences of stroke in the future.

ORGAN DONATION AND TRANSPLANTATION

The Department remains committed to supporting the improvement and expansion of organ donation and transplantation services in Ireland. Despite a small decrease on 2023 figures, in 2024 there was sustained recovery in organ donation and transplantation rates following a drop during the COVID-19 pandemic. During the year, 263 transplants took place from 84 deceased and 30 living donors. These figures include instances where there was no suitable match in Ireland and in the spirit of ensuring the gift of life is passed on, organs were offered to other countries where a suitable recipient benefits, and vice versa.

The Human Tissue (Transplantation, Post-Mortem, Anatomical Examination and Public Display) Act 2024 was enacted on 28 February 2024. This significant piece of legislation provides, for the first time, a national legislative framework for operating donation and transplant services in Ireland and will help make organ donation "the norm" in Ireland.

The Act introduces a soft 'opt-out' organ donation system where all adults in Ireland will be considered to have agreed to be an organ donor when they die, unless they have recorded a decision not to donate on an Opt-Out Register or are in one of the excluded groups. The Act also provides new pathways for living donations including for non-directed altruistic donation, which will allow people to donate an organ to someone they do not know.



ORAL HEALTH

As part of policy implementation, and to support workforce planning in the sector, the Department finalised the framework for a skills assessment workforce census in oral healthcare. The Department has also commenced a design for the scope of practice and establishing a pilot for mid-level professional grade in oral healthcare. The purpose of this work to explore expanding capacity for provision of services by expanding the scope of practice for dental auxiliaries.

GP SERVICES

The Diabetes Policy and Services Review commenced in 2024. It is led by a Steering Group (including representatives of the Department of Health, the HSE, and Diabetes Ireland) and supported by a larger Consultation Group (including healthcare and patient representatives). On completion of the Diabetes Policy and Services Review, the Steering Group will submit a report to the Minister for Health, which will include key findings in relation to diabetes care and a set of actions to improve service delivery and patient outcomes.

RARE DISEASES

In 2024, significant progress was achieved in the development of a new National Rare Disease Strategy for Ireland. A Steering Group was convened in December 2023, and it met 14 times over the course of 2024 to develop a National Rare Disease Strategy that sets out the vision for Rare Disease services in Ireland and outline the actions required to achieve this. The Group was chaired by Prof. Cecily Kelleher and had, amongst its members, representatives from the HSE and HRB, along with clinicians, patient representatives and advocacy groups.

Extensive public consultation was undertaken to inform the work of the Steering Group, including the establishment of a rare disease patient forum, an international review of rare disease strategies by HIQA, and a public consultation. A Rare Disease Patient Forum was established following an Expression of Interest process which received 119 responses. The Forum met 6 times over the course of 2024, including an in-person event in the Department of Health with over 40 attendees which produced a report for the consideration of the Rare Disease Steering Group.

The Public Consultation was launched on 5th July 2024 and received over 600 responses from key stakeholders including the rare disease community, advocacy groups, industry, and healthcare providers. The information from the HIQA review, the Rare Disease Patient Forum, and the Public Consultation was presented to the Steering Group for consideration in the development of the new Strategy which is expected to be launched in 2025.

E-HEALTH

In 2024, the Department made significant progress in advancing the digitalisation of the health service with the publication of Digital for Care: A Digital Health Strategic Framework for Ireland 2024-2030, which was approved by Government and provides the vision and mission for digital health in Ireland for the next decade. The development of the framework considered many of the challenges and demands on the health service, feedback from patients and the workforce, research into other healthcare systems, global trends, and emerging opportunities. The framework also describes a stepwise approach for the delivery of electronic health records for all. Implementation of the framework will be a focus of the Department in the coming years.

During the development of the framework, the Department worked closely with the HSE and key important stakeholders on the development of a corresponding Digital Health Implementation Roadmap, and this was published in July 2024. The implementation roadmap provides clear direction for the delivery of important digital health programmes and technologies across health and social care services. The roadmap is intentionally aligned with the establishment of the new HSE health regions, as this provides a particular opportunity to accelerate delivery of digital health transformation.

The Department actively supported the HSE in the development of resources and capabilities needed to accelerate progress in delivering important digital health initiatives and new digital health solutions, including the procurement of a technology platform for the National Shared Care Record

PATIENT SAFETY

- The findings of the National End of Life Survey were published in April 2024.
- The findings of the National Inpatient Experience Survey were published in December 2024.
- The Paediatric Spinal Taskforce was established in March 2024.
- Version 2 of the National Clinical Effectiveness Committee (NCEC) National Clinical Guideline (NCG) for Adults with Type 1 Diabetes was published in May 2024. The updated guideline aims to improve access, quality, and safety of care for adults with Type 1 diabetes and includes recommendations to make continuous glucose monitoring (CGM) available for all adults with Type 1 Diabetes. CGM enables people with diabetes to monitor their blood glucose levels without the need for finger pricking.
- Updates of the following NCEC NCGs were completed in 2024: NCG No. 7 Diagnosis, Staging and Treatment of Patients with Breast Cancer; and NCG No. 25 Diagnosis, Staging and Treatment of Patients with Rectal Cancer.
- The Patient Safety (Notifiable Incidents and Open Disclosure) Act 2023, a landmark piece of patient safety legislation, commenced on 19 Sept 2024. Prior to commencement, a number of preparatory steps were completed including the design, build and testing of a

new module to the existing National Incident Management System (NIMS) which was signed off, in June 2024, by all key stakeholders, including the HSE, State Claims Agency, HIQA and the Mental Health Commission. The module was subsequently launched in September 2024. Additionally, a technical amendment to the Act was completed in order to facilitate its effective operation.

- The National Open Disclosure Framework was launched by the Minister for Health in October 2023 and was rolled out and promoted across the health system through substantial stakeholder engagement in 2024. This included preparation for the first round of reporting by stakeholders on progress, due in April 2025.
- The Department continued its oversight and governance of PAS (Patient Advocacy Service) who had 2125 new advocacy contacts in 2024, 301 of these contacts relating to nursing homes. PAS continued to raise awareness of the service and carried out over 300 promotions across acute settings and nursing homes, including 121 visits and presentations to nursing homes in 2024.

MENTAL HEALTH SERVICES

- Year on year funding for mental health services increased by €32.5 million, to €1.3 billion in 2024.
- Resources allocated under Budget 2024 allowed for a strong focus on youth mental health and in particular community Child and Adolescent Mental Health Services (CAMHS). In the context of increasing demand for community CAMHS, this investment facilitated an increase in the number of referrals assessed and the provision of more than 213,000 appointments during 2024. In addition, the absolute number of new cases or re-referred cases that were seen within 12 weeks of referral increased by 4.6%.
- Significant new development funding has also been allocated to our National Clinical Programmes (NCP) in mental health services. This funding has allowed for the continued development and ongoing expansion of a variety of specialist mental health teams to meet service user demand. This allowed for a 25% increase in assessments under the Eating Disorder clinical programme in 2024, and under the Early Intervention in Psychosis clinical programme the duration of untreated psychosis reduced to 6.5 weeks, down from 16 weeks in 2021
- Sharing the Vision (StV) is Ireland's 10-year ambitious, multifaceted national mental health policy to enhance the provision of mental health services. The policy recognises the need for a whole-of-population, whole-of-government approach to the delivery of mental health services. 2024 saw the completion of the first implementation report, and the November 2024 Implementation Status Report provides an overview of progress against the StV Implementation Plan 2022-2024 across the entire policy. The report serves as the end of term report for the first three years of policy implementation.
- The active participation of service users, families, carers and supporters in all aspects of mental health service improvement is an integral part of Sharing the Vision. A number of initiatives have been launched to ensure lived experience informs the design, development, evaluation and delivery of mental health services. During 2024 Minister Butler appointed a new member with lived experience expertise to the National Implementation and Monitoring Committee for Sharing the Vision. The new appointee will work alongside the clinical, social, and community members of the Committee and will further enhance the voice of service users in the policy implementation process, alongside the crucial role of the Reference Group (of service users, family members and carers).

- In alignment with Sharing the Vision, the Health Research Board (HRB) and Department of Health launched the new National Mental Health Research Strategy in December 2024. The strategy is a national framework for all funders, uniting diverse stakeholders across sectors aiming develop a comprehensive, integrated mental health research system that not only addresses current challenges but also anticipates future needs.
- Connecting for Life (CfL) is Ireland's National Strategy to Reduce Suicide. The Strategy focuses on the primary and secondary prevention of suicidal behaviour and addresses a broad range of risk and protective factors, taking a cross-government approach. Highlights from 2024 included the launch of universal suicide alertness training for Ireland, *Let's Talk About Suicide*; the publication of a bespoke suicide bereavement resource for children bereaved by a parent's death by suicide, *Safe Harbour*; and the establishment of the National Probable Suicide Monitoring System (NPSMS) within the HRB. It is clear that progress has been made on reducing suicide over the lifetime of CFL– the most recent *Health in Ireland* report highlighted that age standardised mortality rates have fallen significantly in relation to suicide (-26.1%) over the past decade.
- The Mental Health Bill 2024 was published in July 2024 and passed Second Stage in the Dáil in September of that year.
- 'My Mental health plan', which was launched in April 2024, is an online and interactive tool designed to help individuals reflect on their mental health needs and receive personalised advice. From April to December 2024 13,600 started their mental health plan through this website, with 13,100 completing their plan.
- Work progressed on Traveller Mental Health actions under the National Traveller Health Action Plan during 2024. The National Traveller Mental Health Working Group who serve as a central coordination group to monitor progress, streamline, and influence the prioritisation of actions identified in various Mental Health policies and strategies. Additional funding of €200,000 was provided for the Traveller Counselling Service in 2024 and is now mainstreamed for future years. In October 2024 the group funded and supported Travellers Together Preventing Suicide, an annual campaign at national and local levels which seeks to create awareness and tackle stigma in relation to Traveller suicide.

GENDER HEALTHCARE

- The Department engaged with the HSE on the development of the Model of Care for Gender Healthcare. This involved regular interaction in terms of progress regarding the development of the Model of Care and disbursement of the relevant budget provision.
- The Department has provided funding of €770,000 for 2025 to support the development of the updated clinical model of care for gender healthcare services over the next two years.

THE NATIONAL LGBTI+ INCLUSION STRATEGY

- The Department of Health provided significant input into the 2024 independent review of the Department of Children, Equality, Disability, Integration and Youth's National LGBTI+ Strategy. The independent review, carried out by Mazars, which was published on 27th June 2024 focused on progress made in implementing actions in the Strategy and sought to identify priority areas for inclusion in a successor Strategy.

- The independent review found that progress has been made across the Outcomes in *Pillar 3 - Healthy*, with significant or partial advances made in 81% of actions. Of the seven Outcomes in this Pillar, strong or very strong progress was made on the actions in four of these.
- The Department was also heavily involved in the development of the successor strategy and will be contributing to the progression of the associated action plans.

WOMEN'S HEALTH

- [The Women's Health Action Plan 2024-2025](#) Phase 2: An Evolution in Women's Health was published on 18th April 2024. This plan represents the next phase in women's health. It continues to build on the invaluable work undertaken over the previous Women's Health Action Plan 2022-2023, as well as having a focus on new and innovative developments. This plan was supported by the new development investment from Budget 2024.
- In addition to that investment, the dedicated Women's Health Fund continued to support the actions outlined in the second Women's Health Action Plan. In 2024 the fund invested in 34 initiatives covering a range of service areas, including women's cardiovascular health, information and awareness on the expansion of the Free Contraception Scheme, Cervical Cancer Elimination, drug treatment supports for marginalised women, and research into the impact of caring on midlife and older women's health and wellbeing.
- In October 2024 the *Women's Health Action Plan 2022-2023 Progress Report* was finalised. It outlines the breadth of achievements and progress made under the first Women's Health Action Plan 2022-2023. This Progress Report contains material covering the period from 2022 up to the publication of the second Women's Health Action Plan in April 2024. A *Women's Health Outcomes Report* was also published.
- In 2024, €914,000 in period dignity support was provided to 9 CHOs (Community Health Organisations), 26 local authorities, 10 NGOs (Non-Governmental Organisation), and to the Family Resource Centre National Forum, which supported 38 FRCs. All 31 Local Authorities have now participated in the scheme since inception in 2022.
- The Department of Health has been allocated funding for period poverty mitigation through its own sector and partnerships. The HSE programme, working through the National Social Inclusion Office and Community Health Organisations (CHOs) has a focus on reaching out to Travellers, Roma, and other marginalized communities. In 2024, €914,000 in period dignity support was provided to 9 CHOs, 26 local authorities, 10 NGOs, and to the Family Resource Centre National Forum, which supported 38 FRCs (Family Resource Centre).
- The Health Behaviour in School-Aged Children Study, 2022, was published in May 2024. The Irish study included a module on period poverty and menstrual health, which found that 10% of girls old enough to have periods had experienced period poverty and that 60% had missed school on occasion as a result of adverse period symptoms (e.g. pain, cramps, heavy bleeding or mood disturbances).
- Funding of €749,000 was secured from the Women's Health Fund for the expansion of the National Venous Thromboembolism Programme (VTE).

NATIONAL MATERNITY HOSPITAL

Key milestones in 2024 for the relocation of the National Maternity Hospital (NMH) to St Vincent's University Hospital (SVUH), Elm Park, include:

- The proposal is for a 7-storey, over 50,000m² building to be constructed on the Eastern side of the existing St Vincent's Hospital with a direct link to critical care there. It will include 244 beds, an increase of almost 50% in the number of inpatient and day-case beds at Holles Street. The relocated NMH will be the greatest infrastructural investment by the State, to date, in the area of women's health, increasing capacity and providing much-needed facilities for women, girls, and babies for generations.
- The tender process for the construction of the main hospital began in September 2023. In April 2024, requests for tenders were issued to pre-qualified contractors. Tender responses scheduled for return in Q1 2025, in line with expected timelines.
- A specialist pre-construction advisory support team has been appointed and was mobilised in April 2024 to support with governance and resource mobilisation planning.
- Governance and resource mobilisation are ongoing with a number of project delivery roles filled in 2024, and more to be filled in 2025.

Next Steps

- Evaluation of returned tenders.
- A Pre-Construction Services Agreement (PCSA) is scheduled to commence in Q2 2025.
- The final business case will be updated and submitted to the Government for consent to proceed to sign contracts.
- It is expected that this process will be completed by mid-2025 in parallel with the completion of the enabling works on site.

NATIONAL MATERNITY STRATEGY

The National Maternity Strategy 2016-2026 is entering its final years. Development funding from 2016-2024 has funded more than 530 additional full-time staff across maternity services, encompassing health professionals across a broad range of specialities. This includes 367 Whole Time Equivalent (WTE) nurses and midwives, and 44 Consultants, as well as physiotherapists, dietitians, social workers, healthcare assistants, and administrative staff.

This funding and recruitment are driving forward the Strategy's four priorities:

- A health and wellbeing approach to ensure that babies get the best start in life;
- Women have access to safe, high-quality, nationally consistent, woman-centred maternity care;
- Pregnancy and birth are recognised as normal physiological processes. Insofar as it is safe to do so, a woman's choice is facilitated; and
- Maternity services are appropriately resourced, have strong and effective leadership, management, and governance, and are delivered by a skilled and competent workforce.

At the end of 2024, 95% of the Strategy's actions are either fully implemented or in progress. Focus and investment in 2025 and 2026 will continue to drive the completion of these actions.

In 2024, further investment of €0.45 million (€1.87 million full year cost) was directed to establishing four further Postnatal Hubs, following the successful piloting of 5 Hubs in 2023. These Hubs deliver postnatal care to women and infants through 'spoke' sites in the community and support the delivery of the Strategy's Model of Care and Health and Wellbeing objectives.

Other key achievements in 2024 include:

- Phase 2 rollout of an Electronic Health Record, the Maternal and Newborn Clinical Management System (MN-CMS), commenced. This phase will, over 2024-2025, roll out the system to University Maternity Hospital Limerick and the Coombe Women and Infants University Hospital.
- All maternity services have completed a self-assessment against the National Standards for Antenatal Education and the National Standards for Infants Feeding in Maternity Services, helping each service to demonstrate a commitment to quality improvement in these areas.
- Training and support have continued to be strengthened for staff in maternity services. In the two years to December 2024, 3,577 staff across the country completed the Neonatal Resuscitation Advanced Provider programme.
- New clinical guidelines have been developed and published across a range of areas, including screening and management of domestic violence in pregnancy and reduced foetal movements.
- The National Midwifery Staffing Taskforce has been working to improve recruitment and retention within the midwifery workforce through 16 actions, 6 of which were completed in 2024.

GYNAECOLOGY SERVICE DEVELOPMENTS

Developments in gynaecology services are directly contributing to the reduction in national gynaecology waiting lists and to reduced waiting times. Despite a 108% increase in overall general gynaecology referrals from 50,000 in 2020 to 104,000 in 2024, 81% of women were waiting less than 6 months for an appointment in December 2024, compared to 77% in December 2023.

Achievements in 2024 include:

- 16 Ambulatory Gynaecology Clinics were fully operational with over 20,000 new appointments in 2024. This is ahead of the target of 18,000 appointments set for 2024.
- Additional Funding of €100k (€400k full year cost) was provided to open an AG clinic in Connolly Hospital.
- Six menopause clinics operational in Limerick, Cork, Galway, the Rotunda, Coombe, and National Maternity Hospital. Over 1,750 new patients attended these clinics in 2024.
- Additional Funding of €175k (€349k full year cost) was provided to expand specialist menopause services at 4 of the 6 sites.
- The operational supra-regional and regional endometriosis services saw 1,150 new patients in 2024.
- Additional Funding of €544k (€2.175m full year cost) was provided to expand specialist endometriosis services.
- The 6 fertility hubs had over 3,000 new appointments in 2024.
- 4 new clinical guidelines were published in Obstetrics and Gynaecology.

ASSISTED HUMAN REPRODUCTION TREATMENT

The Health (Assisted Human Reproduction) Act 2024 was signed into law by the President on 2nd July, 2024, having passed all stages in both Houses of the Oireachtas. This complex and far-reaching legislation encompasses the regulation for the first time of a wide range of AHR practices undertaken in this jurisdiction. 2024 was the first full year of the provision of publicly funded Assisted Human Reproduction (AHR) treatment, including IVF and IUI. This scheme, which is publicly funded and privately provided, has proven to be a real success.

The scheme commenced on September 30th, 2023, and by the end of 2024, just under 1,700 couples were referred to by a Reproductive Specialist Consultant for AHR treatment following extensive investigations and/or secondary level treatment within the Regional Fertility Hubs. Furthermore, these Hubs have successfully managed numerous other patients presenting with fertility-related issues who have been referred by their GP at this secondary level of intervention without requiring them to undergo often extremely invasive and arduous IVF treatment. Reports of the first successful births following publicly funded AHR treatment also started being received from Q3 2024.

The establishment of the Assisted Human Reproduction Regulatory Authority, as provided for in the Act, will be of central importance. The legislation provides for domestic altruistic surrogacy and the recognition of parentage arising from past surrogacy arrangements but also includes ground-breaking law in respect of the regulation of surrogacy agreements undertaken by Irish residents in other jurisdictions.

TERMINATION OF PREGNANCY

- Safe Access Legislation passed both Houses of the Oireachtas and was signed by the President on 7th May 2024 and came into effect on 17th October, 2024.
- Significant progress has been made in relation to, termination services in early pregnancy (up to 12 weeks) In 2024 services were provided in 17 of the 19 maternity hospitals (since expanded to all 19 maternity hospitals). There has also been a sustained increase in community providers.

SEXUAL HEALTH

- Following a pilot funded by the Sláintecare Integration Fund in 2021, a home STI testing scheme was launched nationwide in 2022. The scheme was expanded in 2023 and again in 2024 and has been highly successful, adding approximately 33% to national testing capacity.
- Demand for STI home testing kits has risen steadily since the service was launched in 2022, with 91,000 kits ordered in that year, and 108,000 kits ordered in 2023. 126,090 kits were ordered in 2024. The rate of returned kits has also risen, from 62% in 2022 to 69% in 2023 and 72.5% in 2024.
- Users with a reactive STI test result for chlamydia are now offered the option of an online assessment and prescription to a community pharmacy, if this is more convenient than referral to an in-person STI clinic for appropriate follow up and clinical management.
- HIV PrEP involves administration of low-dose anti-retroviral drugs to those at high risk of infection. PrEP medication is free of charge through the public PrEP clinic network. The free PrEP scheme was launched in 2019 and sequentially expanded in 2023 and again in 2024.
- Funding provided through Budget 2025 will enable further expansion, supporting WHO and UNAIDS targets to eliminate HIV transmission.

MEN'S HEALTH

With support from Healthy Ireland, the HSE's third Men's Health Action Plan, *Healthy Ireland – Men (HI-M)*, 2024-2028, was launched in late 2024.

ADVANCED NURSING AND MIDWIFERY PRACTICE

- The number of nurses and midwives practicing at advanced practice level across the health service continues to increase, with a current policy target of 3% of the total nursing and midwifery workforce to be practicing at advanced practice level.
- As a result of continued investment in advanced practice the number of nurses and midwives at advanced practice level, including those registered and at candidate level was 1,207 WTE in December 2024, an increase of 369 WTE in a two-year period.
- This increased the percentage of the total nursing and midwifery workforce at advanced practice level from 1.9% in December 2022 to 2.5% in December 2024.
- Investment from Budget 2025 of €5.5 million will support continued growth for Advanced Practice in Nursing and Midwifery and enable this to be rolled out for the first time for Health and Social Care Professionals

VIRTUAL CARE

- Virtual care is healthcare that is clinically led, and technology enabled, using digital tools and software solutions to enhance healthcare services for patients. It leverages the use of novel and existing technologies to enhance accessibility, cost effectiveness and efficiency of healthcare services.
- There are three predominant approaches to providing technology enabled care in Ireland: including acute and community virtual wards, telehealth and remote monitoring.
- Acute Virtual Wards are a safe and efficient alternative to inpatient care that is enabled by technology for patients who require acute care, monitoring, and treatment, all of which can be delivered in the patient's own home.
- Two Acute Virtual Wards at University Hospital Limerick and St Vincent's University Hospital Dublin were successfully piloted in 2024 for a number of patient care pathways for respiratory, cardiology and general medical conditions.
- In addition to the Acute Virtual Wards, there are a number of Community Virtual Wards providing non acute care; supporting an approach that promotes early intervention and admission avoidance.
- There are also various 'seedling projects' operational nationally where digitally enabled care is provided through the use of telehealth and remote monitoring, enhancing access to care for patients accessing maternity, respiratory, cardiology, oncology, renal, stroke, enhanced community care, and older person services.

MEDICINES

The Department introduced a primary legislative basis via the Health (Miscellaneous Provisions) Act 2024 to provide for an amendment of current legislation to enhance the Minister for Health's power to make regulations for management of and access to medicinal products.

CHAPTER 4

IMPROVE OVERSIGHT AND PARTNERSHIP IN THE SECTOR

The Department of Health provides leadership in the health and social care sector, working in partnership with our aegis bodies to deliver services, key strategies and reforms.

The Department is responsible for ensuring effective processes, governance structures and regulatory frameworks are in place to support strong oversight, monitoring and performance management, with a particular focus on positive health outcomes, efficiency and value for money.

AGENCY GOVERNANCE

- The Corporate Governance Committee expanded its remit to include oversight of the governance of bodies under the aegis of the Department. To date the committee has received assurances on over half of the 19 aegis bodies overseen by the Department. The Committee will review the oversight of the remainder of these bodies in 2025.
- A report on compliance with the Code of Practice for Governance of State Bodies for 19 aegis bodies was completed in November 2024.
- Approximately 150 appointments were made in 2024 to State Boards under the aegis of the Department.
- 6 claims were approved under the COVID-19 Death in Service ex-gratia scheme in 2024 bringing the total number of claims to 17. The scheme provided for a lump sum payment of €100,000 to the estate of any healthcare worker who died having contracted COVID-19 during the course of their work.

HEALTH INFRASTRUCTURE

Following publication of the Department's Strategic Healthcare Investment Framework (SHIF) in August 2024, implementation is underway. SHIF is the overarching framework developed by the Department to guide infrastructural investments in the public healthcare sector to ensure value for money and better health outcomes. SHIF is based on IGEEES evidence and sets out the principles for the development and assessment of evidence-informed capital proposals.

An output of SHIF is the development of a Common Appraisal Framework. The objective of Health Sector Common Appraisal Framework (CAF) is to provide a common, clear and proportionate approach to the appraisal of healthcare capital proposals from the initial concept to the hand-over of the facility to the service, including when a programmatic approach is required/ may be appropriate. CAF has been developed following a robust process which included gap analysis and extensive stakeholder engagement.

CAF will provide a common, streamlined, clear, and proportionate approach to the development and appraisal of healthcare capital proposals from the initial concept to the handover of the facility to the service, including when a programmatic approach may be appropriate. CAF is scheduled for publication in Q3 2025.

To further improve oversight and partnership, in the first half of 2024 consultations were carried out with line units in the Department to inform medium- and long-term capital planning and also to ensure that units understand the capital planning process.

The Department will require the HSE and the agencies under its aegis to comply with SHIF and CAF. SHIF and CAF were developed to ensure capital investment decisions are driven by service needs and must link back to service policy and strategy. Overall, the development of healthcare infrastructure must be planned, appraised and delivered in a timely manner and a manner which ensures value for money and outcome focus is always paramount.

HEALTH SYSTEM PERFORMANCE ASSESSMENT FRAMEWORK (HSPA)

During 2024, the Department progressed the implementation of the Health System Performance Assessment Framework (HSPA). The Framework is designed to improve our understanding of health system performance using clear, measurable, outcome-focused indicators. The HSPA was nominated in 2024 for the Civil Service Excellence and Innovation Awards, in the Insights-Driven Decision-Making category, recognizing excellence in the application of research, analytics and data to increase insights that will benefit people in their everyday lives.

Following a tender process, the University of Amsterdam has been contracted to provide technical support for the project, and a detailed workplan has been developed in consultation with key stakeholders to support the practical implementation and utilisation of the HSPA framework in areas such as performance oversight and policy review and analysis (including Slaintecare).



MENTAL HEALTH

- The First Annual Progress Report of the High-Level Taskforce on Mental Health and Addiction was published in February 2024. The inter-departmental Steering Committee established to monitor implementation of the HLTF Report and to prepare Annual Progress Reports for the Ministers for Health and Justice continued to monitor implementation in 2024.
- In 2024 the Department of Health, with the support of the WHO, hosted a roundtable/event engaging key stakeholders involved in both legacy and new media to promote safe and sensitive media reporting of self-harm and suicide
- The Department brought together an Irish delegation with representation from the Irish Prison Service, the National Forensic Mental Health Service, Departments of Justice and Health and the HSE to contribute to the WHO conference on Care in Detention. Ireland's contribution was in respect of the work of the High-Level Taskforce

CHILDREN'S HEALTH IRELAND

In 2024 the National Children's Research Centre (NCRC) transferred into Children's Health Ireland (CHI). The NCRC, as the largest paediatric research centre in Ireland, has had a long history of research excellence, expert staff, and established academic partnerships. Incorporating the NCRC into CHI will support the new hospital in becoming state-of-the-art, research and innovation driven, and on the cutting-edge of paediatric healthcare internationally.

STRATEGIC WORKFORCE PLANNING

Increasing Doctor Training Places

- There have been significant increases in the number of doctors in training. €7.7m was provided in Budget 2024 for additional NCHD (Non-Consultant Hospital Doctor) post-graduate medical training places. This measure supports medical workforce planning and more doctors in specialist training programmes.
- An increase of 105 additional postgraduate medical specialty training posts were filled in July 2024. There was a 4.5 % increase in the total number of NCHDs enrolled in training programmes in 2024/2025 compared to 2023/2024. The total number of doctors enrolled in postgraduate medical training programmes in Ireland for the 2024/2025 training year was 5681, including interns.
- 879 medical Intern posts were available for the 2024/2025 training year. This represents an increase of 20% (145 places) in the number of intern posts available in the last six years.

National Taskforce on NCHD Workforce

- The National Taskforce on the Non-Consultant Hospital Doctor (NCHD) Workforce was established by the Minister for Health in 2022. The purpose was to put in place sustainable workforce planning strategies and policies to improve the NCHD experience and work life balance, with enhanced structures and supports on clinical sites. The aim was to further develop and foster a culture of education and training at clinical site level, and plan for future configuration of the medical workforce to support delivery of healthcare in Ireland.
- The final report of the Taskforce published by the Minister on 7th February 2024 recommended improved working standards on clinical sites for NCHDs. Building on the work of the 42 Interim Recommendations which were published in 2023, the final report contains 44 further recommendations, with responsible leads and implementation timeframes. The final report of the Taskforce includes recommendations for immediate implementation in 2024, as well as medium to longer term recommendations for implementation on a phased basis from 2024 to 2026.
- Immediate implementation of recommendations in 2024 included projects to improve NCHD Learning Environments and Working and Wellbeing standards on clinical sites; enhanced NCHD Induction Standards, Guides, and Supports; the launch of the HSE Occupational Health Specialist Support Hub for NCHDs; increased Flexible Training and Working Opportunities for NCHDs; and increases in NCHD post-graduate medical training places towards agreed targets for 2030.
- Engagement between the HSE and the Department of Health is ongoing to monitor progress with implementation and prioritisation of the recommendations.

Health Workforce Planning Strategy and Planning Projection Model

- The Department now has an evidence-based planning modelling tool that has the capacity to produce a variety of workforce projections of our potential long-term staffing needs for the health sector (public and private) and includes doctors, nurses and health and social care professionals., taking into account the major drivers of healthcare demand, strategic health policy reforms and workforce specific reforms.
- The model is now incorporated into the Department's strategic workforce planning function which will allow for ongoing management of the model and the incorporation

of new data, policy, and research, to further improve our workforce planning capabilities.

- These outputs will inform our engagements with the HSE, DFHERIS, DCEDIY and the Higher Education Sector with the goal of building a sustainable health and social care workforce.

Expert Review Body in Nursing and Midwifery

- In the 2022 Report of the Expert Review Body on Nursing and Midwifery there are 47 recommendations that support nurses and midwives to continue to learn and develop in professional roles, enabling significant reform and ensuring that critical Sláintecare priorities are realised.
- The national oversight group known as ERB Implementation Oversight Team (IOT) was established and chaired by the Chief Nursing Officer.
- Five Implementation Action Groups (IAGs) were convened in April 2023 to progress 14 priority recommendations.
- As of December 2024, work of four of the IAGs concluded with 11 of the priority recommendations implemented. A further 12 of the non- priority recommendations are also complete with the remaining recommendations in progress and expected to be delivered by end of 2025.

OLDER PERSONS

State of Long-term Care in Ireland Report

- The World Health Organisation and the European Commission published the 'State of Long-term Care in Ireland' report in November 2024. The report assessed Ireland's long-term care system from a range of perspectives including older persons services, disability services, and social protection supports and involved stakeholders from across Government departments, the HSE, private and voluntary service providers, academia and advocacy organisations.

ADULT SAFEGUARDING

A public consultation on a new national policy on adult safeguarding in the health and social care sector was undertaken by the Department. An analysis report of the findings was prepared by the Institute of Public Health and will inform the final policy.

NORTH/SOUTH COOPERATION

The Department continued to meet its objective of enhancing and deepening North-South Cooperation in Healthcare, by:

- coordinating the Department's participation in the North South Ministerial Council sectoral and plenary meetings, including work to update the Health and Food Safety Work Programme in collaboration with Department of Health, Northern Ireland.
- ensuring oversight related to the closure of the EU cross-border programme INTERREG VA with Northern Ireland and Scotland and the launch of the Collaborative Health and Social Care call and the Addiction Services call of the successor PEACEPLUS programme.

- working with the Department of the Taoiseach and the Department line unit colleagues to identify further opportunities to avail of Shared Island Initiative funding.

EAST/WEST ENGAGEMENT WITH THE UK

The Department oversaw the coordination, and strengthening, of the health sector's overall engagement on an East-West basis by:

- Supporting actions of the Plenary of the Common Travel Area forum and via direct engagement with the Department of Health and Social Care (UK).
- Providing support to the Department of the Taoiseach for the visit of British Prime Minister Keir Starmer.
- Maintaining support to the Irish Scottish Health Forum in 2024, along with representatives from the HSE.
- Meeting with colleagues in the UK Embassy to discuss areas of mutual interest, maintaining a strong, co-operative relationship.

Brexit

The Department continued to work to manage the impact of the UK's withdrawal from the European Union, including monitoring the impacts of the Windsor Framework Agreement in 2024.

EUROPEAN UNION (EU)



The Department proactively and positively contributed to the work of the **Belgium Presidency of the Council of the EU** (January – June 2024). During this Presidency, the Department provided the input to achieve a political agreement on the regulation for a European Health Data Space, finalise the work on standards of quality and safety for substances of human origin and adopt the regulation on in vitro diagnostic medical devices. The Department also supported the drafting of Council Conclusions on the Future of the European Health Union.



During its presidency of the Council of the European Union in the second half of 2024, Hungary made significant strides in the field of health, notably progressing negotiations on the revision of the Pharmaceutical package, tackling cardiovascular diseases (Council Conclusions) and reflecting on organ transplantation (Council Conclusions). In addition, Council Recommendation on smoke-free environment were adopted by the Council during the Hungarian Presidency.



Ireland will hold the presidency of the Council of the EU during the second half of 2026. The Department is actively participating in the whole-of-government approach to the preparations, led by the Department of Foreign Affairs. This includes the identification of Health priorities Presidency and the planning for key health related

events with appropriate staff and resources both in Dublin and in the Permanent Representation to the EU in Brussels.

Ireland was represented by the Department at the four 2024 Health-related meetings of the **Employment, Social Policy, Health and Consumer Affairs Council configuration (EPSCO) of the Council of the EU** and was fully engaged in the discussions and negotiations around legislative and non-legislative files on topics including mental health policy, the fee structure of the European Medicines Agency, the European Health Data Space, the revisions of the pharmaceutical package, substances of human origin, pandemic prevention preparedness and response, antimicrobial resistance and medical devices.



The 2024 **EU4Health Programme** budget was €752.4 million. The Department worked closely with the Health Research Board, as well as the HSE, to drive engagement in EU4Health across the wider health sector. Eight nominations for Direct grants and Joint Actions were made by the Department in 2024.

The Department has five projects included in **Ireland's National Recovery and Resilience Plan (NRRP)**: two funded projects ('Award of the contracts for ePharmacy system' and 'eHealth National Financial Management System') and three reform projects (the 'Sláintecare Consultant Contract', 'Chronic Diseases Management Programme' and 'Community Health Networks').

Engagement with projects leads continued throughout 2024 to ensure that targets and milestones on each of these projects were met. Ireland's first payment under the National Recovery and Resilience Plan (NRRP), worth €324 million, was received in July 2024.

Bilateral engagements

In 2024, the Department explored and discussed possible synergies in areas of common interest and mutual learning opportunities with health agencies and/ministries from Germany, Singapore, US, Canada, India and Pakistan.

WORLD HEALTH ORGANISATION (WHO)

The Department continued to develop, promote, represent, and advance Ireland's health-related interests at the WHO. The Department contributed to the 154th and 155th meetings of the WHO Executive Board, the 77th meeting of the World Health Assembly, and the 74th WHO European Regional Committee. Ireland had a 400% increase in health-related interventions and national statements, our financial contributions increased by 50%, and we were nominated to the Standing Committee of the Regional Committee for WHO Europe: Ireland's first governance role in the WHO in 23 years.

Ireland acted as a leading member state on several issues, including health workforce and oral health. At the first Global Oral Health Meeting, delivering statements on behalf of all WHO member states, and hosted the first oral health event at the World Health Assembly in 14 years.

The Department attended Global and Regional WHO meetings on a variety of issues, including negotiations of the Pandemic Accord and International Health Regulations, and welcomed WHO delegations to Dublin, including the WHO Regional Director.

Engagements with other United Nations Bodies

The Department was represented at the Commission on Population and Development and the United Nations General Assembly on Antimicrobial Resistance and fulfilled its reporting obligations on all UN reviews, including the International Covenant on Economic, Social and Cultural Rights, the UN Universal Period Review, and the Convention on the Elimination of All Forms of Discrimination against Women.

Other Multilateral Engagement

The Department became a founding member of the new Nordic Plus Health Working Group with Denmark, Finland, Iceland, Netherlands, Norway, Sweden and the UK. We also fulfilled all of our obligations to the Council of Europe and took part in the World Economic Forum.

MEDICAL EVACUATIONS

As an EU Member State, Ireland responded to a request from the World Health Organisation (WHO) to assist in addressing the current health needs in Gaza. Government approval was secured in September for Ireland to evacuate 30 sick children and accompanying family members from Gaza for treatment and care. The health needs are categorised under cancer, haemodialysis and patients with other severe medical conditions (except for orthopaedics to ensure there is no impact on HSE in this speciality).

The first group of Palestinian paediatric patients to receive treatment in Ireland arrived in Dublin on 19 December 2024. This group consisted of eight children, eight carers and eleven siblings. The group travelled from Cairo to Dublin Airport on a plane provided by the Slovakian Government for the medical evacuation and were accompanied by three medical doctors from the Health Service Executive (HSE) and a translator.

The Department engaged with other Departments and Agencies for the successful evacuation:

- Department of Justice in relation to Visa applications for entry to Ireland, border control for identity verification and the Registration Unit for registration for permission to stay in the State;
- The Department of Foreign Affairs, particularly the Irish Embassy in Egypt who facilitated with coordination of documents required to allow processing of Department of Justice visa applications for each patient and accompanying family members;
- HSE in relation to the selection of patients and provision of healthcare treatment services;
- Department of Social Protection for Social Protection registration and provision of a Public Services Card to enable payments to the parent or guardian;
- The Irish Red Cross who are contracted for the provision of accommodation and case work support including translation services;
- Department of Housing, Local Government and Heritage who communicated evacuation offers for patients, on behalf of Ireland, via the European Union Civil Protection Mechanism (UCPM).

The Department of Health and the HSE also engaged with the World Health Organisation in Egypt, the Ministry of Health in Egypt and the Umerto Primo Hospital (also known as the Italian Hospital) in Cairo to assess and prepare the patients, and with Children Not Numbers, an NGO in Cairo, who supported with visa applications for entry to Ireland.

MEDICO-LEGAL MATTERS

Interdepartmental Working Group on the Rising Cost of Health-Related Claims

The Minister for Health published the Report of the Interdepartmental Working Group on the Rising Cost of Health-Related Claims on 19 September 2024. The Group, chaired by Professor Rhona Mahony and comprised of membership from relevant Government Departments and Agencies, was established by Government in January 2023, to examine the rising cost of health-related claims, to consider mechanisms to reduce costs and to improve the experience of the processes involved for patients.

The Group, along with examining the financial costs, placed a strong emphasis on the human cost of litigation and a key element in the Report is acknowledging the harm that is central to the decision to litigate.

The Group's report identifies six strategic priorities, and an associated set of 30 recommendations, which aim to reduce the requirement for litigation in healthcare and to improve the litigation process for those taking this path.

An Implementation Group has been established and held its first meeting on 30 September 2024 and met on three subsequent occasions in 2024.

CervicalCheck Tribunal

The CervicalCheck Tribunal successfully implemented the recommendations made by Mr. Justice Charles Meenan in his report on an alternative system for dealing with claims arising from CervicalCheck. On 31 July 2023, the Tribunal Chairperson informed the Minister that all claims had been processed.

The Chairperson, Ms. Justice Power, and Ordinary members, Mr. Justice McGovern and Mr. Justice O'Connor submitted their resignations as members of the CervicalCheck Tribunal in April 2024, having completed the required administrative work and discharging any remaining obligations on them. The Restoration of Trust process, as provided for in the CervicalCheck Tribunal Act 2019, continues to be available to those eligible to participate.

CervicalCheck Non-Disclosure Ex-Gratia Scheme. Payments continued to be made to applicants under the CervicalCheck Non-Disclosure Ex-Gratia Scheme.

SODIUM VALPROATE INQUIRY

In June 2024, the Minister formally announced the appointment of Bríd O'Flaherty, BL as independent Chair to the Inquiry into the Historical Licensing and Use of Sodium Valproate in Women of Child-Bearing Potential in the State.

The Department provided support to the Chair to establish and operationalise the inquiry, with plans to commence by Q2 2025. A time commitment of between 12 and 18 months is envisaged for the Chair to conduct an independent, fair, and rigorous process.

EXPANSION OF PHARMACY SERVICES

The Department delivered the final report from the Expert Taskforce to Support the Expansion of the Role of Pharmacy, working in tandem with key stakeholders to progress and enhance pharmacy policy. The remit of the Taskforce was to identify and support the delivery of specific objectives, which will serve to align services and practices that can be delivered by pharmacists, and pharmacies, with the needs of the health service and patients.

Additionally, the Department actioned the first set of recommendations from the Taskforce, which related to prescription validity. From 1 March 2024, prescriptions have a maximum validity of 12 months. The Department worked with key stakeholders to implement these recommendations.

In September 2024, the Department established a Community Pharmacy Expansion Implementation Oversight Group to put the enablers in place to facilitate community pharmacies to establish common conditions services.

CANCER SERVICES

Implementation of the National Cancer Strategy is a Programme for Government commitment and is part of the implementation of Sláintecare. Eight years into the Strategy, 40 of the 52 recommendations are considered implemented, while the remaining actions are being actively progressed by the National Cancer Control Programme with oversight from the Department of Health.

In 2024, the National Cancer Information System (NCIS) was introduced at an additional 4 hospitals, meaning that multidisciplinary teams across 20 of the 26 chemotherapy-providing hospitals can work together on patient care. It is planned that most of the remaining hospitals will introduce NCIS in 2025.

URGENT AND EMERGENCY CARE

- The Minister and senior Department officials convened a formal series of meetings with HSE counterparts to discuss service areas of concern. There was a consistent focus on those sites managing high levels of urgent and emergency care demand and congestion to secure necessary supports for service improvement.
- In conjunction with other departments and the HSE, the Department contributed to the design workshops, determining potential issues and identifying the best format to provide timely reports and create liaison pathways with the HSE's new regional structure.
- There was direct on-site engagement with frontline HSE colleagues to gain further insights to the varied and challenging environment of urgent and emergency care delivery. Integral to these visits was identifying and promoting innovative and sustainable practices, including emerging digital solutions. Participation at the HSE's Patient Flow Academy to support and promote best practice and learning opportunities.
- The Department assisted HSE colleagues in structuring a new framework aimed at putting and keeping the patient in the centre of age friendly process and practices.

E-HEALTH

The Department actively engaged with Technology and Transformation Division in the HSE, on performance matters throughout 2024. Particular attention was given to managing capital and revenue expenditure, recruitment, headcount, and progress with delivery of important new digital

health solutions and services. These engagements significantly enhanced the quality and availability of data for performance management and oversight of the HSE in eHealth/Digital Health, enabling more informed decision-making, strategic planning, and fostering a continuing sense of constructive partnership between the Department and the HSE. They also provided an opportunity for the HSE to demonstrate progress with building cyber resilience and addressing any remaining deficits following the cyberattack in 2021 and associated recommendations from the independent review that was commissioned by the board of the HSE following the cyberattack.

Furthermore, the Department oversaw the continued delivery of the Recovery and Resilience Fund Programme in 2024, which funded two significant projects aimed at strengthening Ireland's resilience in the face of future policy challenges and also laid the groundwork for continued innovation and growth in digital health and improved efficiency and transparency within the health service.

EUROPEAN HEALTH DATA SPACE

The final agreed text of the European Health Data Space Regulation was approved by the European Parliament in December 2024. Throughout 2024, the Department of Health continued to engage with key stakeholders and technical experts in preparation for implementation of the Regulation.

The Department of Health has been awarded €3.6 million in EU funding to support establishment of a Health Data Access Body (HDAB) as required under the EHDS. This grant-funded project is being delivered in collaboration with a number of stakeholders including the Health Information and Quality Authority (HIQA) and the Health Research Board.

HEALTH SERVICE PRODUCTIVITY DASHBOARD

In July 2024, the Minister for Health published important data and insights into the productivity of the health service. The publication was based on metrics included in an internal departmental Microsoft Power BI dashboard. A [press release](#) on this topic was issued on 11 July 2024.

The dashboard includes analysis highlighting trends in:

- **Consultant productivity 2016 - 2023** – Number of Consultants employed each year and average number of outpatient appointments per consultant.
- **Waiting Lists 2021 - 2024** – Leveraging open data from the NTPF, this analysis highlights trends in numbers waiting for specialist treatment by type of appointment, health region, hospital and current time waiting.
- **Inputs** – Monitors changes in inputs factors for productivity including expenditure and workforce.
- **Outputs** – Compares activity levels measured as number of appointments across health regions and hospitals to illustrate how responsive the system is to changes in input factors.
- **Productivity-Enabling KPIs** – This section presents key performance indicators such as the ratio of return outpatient appointments to new appointments, weekend discharges, admission of elective patients on the day of surgery, and average length of stay are essential for measuring the efficiency of the health service.

HEALTH RESEARCH AND EVALUATION

Irish Government Economic and Evaluation Service (IGEES) analysts in the Department of Health carry out and facilitate research and evaluation to support policy development and evaluation across the department. In 2024 analysts provided targeted support and guidance on acute services, community and primary care, strategic workforce planning, population health, healthcare infrastructure, behavioural economics, demographics, evaluation, performance and productivity, and public consultation.

In 2024 the Department published 4 IGEES analytical papers:

- [Hospital Performance: An Examination of Trends in Activity, Expenditure and Workforce in Publicly Funded Acute Hospitals in Ireland](#)
- [10 Practical Areas for Behavioural Science to Improve Productivity in Health](#)
- [The Better Letter Initiative: An Evaluation of the Impact of Redesigned Appointment SMS Reminders on Outpatients DNAs](#)
- [Changing Behaviour: Reducing Unnecessary Antibiotic Prescribing. A Systematic Review and Meta-analysis](#)

The Department facilitated external research exchange and development through:

- Participation in the Organisation for Economic Cooperation and Development Health Committee and its expert groups, which in 2024 included a high-level ministerial meeting
- Participation in the WHO national focal point for Behavioural and Cultural Insights.
- Research published in 2024 by the World Health Organization (WHO) showed Ireland performed well in the use of behavioural and cultural insights (BCI) to support better health. Ireland was one of just 8 out of 44 countries that have scored at least 3 out of 5 across all five strategic commitments under the WHO European regional action framework for BCI for health.
- Management of the Evidence Synthesis Service with the Health Research Board
- Management of the Department's Joint Research Programme on Healthcare Reform with the Economic and Social Research Institute, and technical oversight of the ESRI's new Capacity Review.

CHAPTER 5

BECOME AN ORGANISATION FIT FOR THE FUTURE

A Department that is fit-for-purpose, high-performing and future ready underpins delivery of all of our strategic priorities. It is essential to have the right people, capabilities, structure and culture to advance our mission.

We are committed to ensuring that all staff are valued, trusted and empowered to contribute to the achievement of our strategic objectives.

CORPORATE OPERATIONS OFFICE

The Corporate Operations Office manages a range of functions to ensure that the Department operates effectively and efficiently, identifying and implementing business process improvements across areas under its remit. These functions include:

- Coordination of the Department's engagements with the Houses of the Oireachtas
- Support to the offices of the Minister, Ministers of State and Secretary General
- Information management
- Business planning
- Coordinating responses to public representations
- Freedom of Information
- Protected Disclosures
- Producing the departmental Statement of Strategy and Annual Report

In 2024, the Corporate Operations Office managed approximately 9,100 Parliamentary Questions, 12,000 Representations and 350 Freedom of Information requests on behalf of the Department.

PROTECTED DISCLOSURES

In 2024, a total of 19 potential Protected Disclosures were received via the external reporting channel. Two of these were received via the Office of the Protected Disclosures Commissioner (OPDC).

These disclosures were made via the reporting channels established under section 7(2A) of the Act or transmitted by another prescribed person under section 7A(1)(b)(vi) of the Act or by the Protected Disclosures Commissioner under sections 10C(1)(b) and 10D(1)(b)(ii) of the Act.

Of the total 19 potential Protected Disclosures received:

- One was closed because it was deemed not to be a Protected Disclosure.
- One was closed because it was deemed to be a repetitive report containing no meaningful new information.
- 17 were transmitted on to the OPDC.

INTERNAL AUDIT

The Department of Health's internal audit services were delivered in line with the functions updated 2024 Charter, as approved by the Accounting Officer and the Audit Committee. The Department implemented a risk focused work programme, which was subject to systematic oversight and monitoring by Stakeholders.

Flowing from its assurance activities, recommendations were developed and agreed with Management. The Department notes strong engagement and facilitation in that regard, driving a range of governance and administrative improvements across auditable entities. Additionally, the Department substantially increased its advisory service activities during the period.

Further, in response to an independent External Quality Assessment, (EQA) conducted in 2023, the Department completed a substantive Quality Assurance Improvement Programme (QAIP) in 2024. Completion of this brought the Department into substantive compliance with the Chartered Institute of Internal Auditors International Professional Practices Framework, which is a key quality benchmark for the provision of Internal Audit services.

A follow-on 2025 QAIP will be developed to reflect changes to the Global Internal Audit Standards and evolving best practice, further enhancing functional capacity to provide quality, strategically focused internal audit and advisory services to the Department.

OFFICE OF THE CHIEF NURSING OFFICER

In May 2024, the Strategy for the Office of the Chief Nursing Officer 2024-2026 was published. The strategy aims to enhance, empower and enable nurses and midwives to lead on advances in our healthcare services while remaining connected to care.

Following extensive national consultation with nurses and midwives, five strategic priorities were identified:

Workforce Stability and Wellbeing; Leadership and Governance Capacity; Education, Research, Evidence and Regulation; Digital Healthcare and Global Partnerships and Global Health. These priorities will shape policy development in Nursing and Midwifery over the coming years.

OFFICIAL LANGUAGES (AMENDMENT) ACT 2021

In accordance with 4B of the Official Languages Act 2021, the Department of Health appointed an Assistant Secretary to oversee the performance of the body's obligations under the Act and all updates concerning the Act have been brought to their attention.

Throughout 2024, the Department of Health received 0 complaints from An Coimisinéir Teanga and continued its focus on utilising all available resources to ensure all communications were in compliance with the Official Languages Act.

On 2nd April 2025, the Department of Health submitted an audit on its advertising for the year 2024, as per the requirements of the Official Languages (Amendment) Act 2021:

- 21.28% of all the Department of Health's Advertisement was in the Irish language in 2024 (at least 20% requirement).
- Irish Language Media Spend overall for 2024 was 5.34% of all media spend (at least 5% requirement).

STATEMENT OF STRATEGY AND PUBLIC SECTOR DUTY

The Department of Health's five strategic priorities are set out in our [Statement of Strategy 2023-25](#), which guides the work of the Department at the highest level. The format of the Statement of Strategy (SoS) is mirrored in this Annual Report, which reports on our work across the five overarching priorities set out in the SoS.

The document also includes our commitment to eliminating discrimination, promoting equality and protecting the human rights of staff and patients, as outlined in the [Public Sector Duty](#) under Section 42 of the Irish Human Rights and Equality Act 2014. The Department has previously undertaken a self-assessment exercise, primarily focused on staff and structures within the Department and a range of implementation actions were determined and are under review.

CLIMATE ACTION

Work has progressed on the European Environment and Health Process (EHP) Partnership for Health Sector Climate Action which is led by Ireland. The Partnership supports countries across the WHO European Region to share approaches, experience and research towards developing climate-resilient and low-carbon health systems. In 2024 the Partnership held its first "deep dive" meeting which focused on Climate-Friendly Transport in the Health Sector.

GOVERNANCE AND RISK

- Significant progress has been made in operationalising the Department's revised risk management framework. A quarterly risk reporting cycle has been implemented, increasing engagement with eRisk (risk register) across the Department. September 2024 was designated as '*Spotlight on Risk Month*', focusing on key elements of the risk management framework. Risk management training was provided to all staff, emphasising the importance of understanding each step in the risk management process. These initiatives aim to embed a risk-aware culture within the Department.
- The Department has developed a new innovation policy, demonstrating our commitment to putting mechanisms and systems in place to support, recognise and invest in innovation.
- The Corporate Governance Committee met 8 times in 2024, and completed its workplan for the year on schedule. A number of new policies were reviewed and approved by the committee, including a policy on the use of Generative AI. Minutes of all CGC meetings are published on HealthNet once approved.
- The Corporate Governance Framework was reviewed and updated in Q3 2024.

CORPORATE SERVICES

The Department oversees the provision of corporate services and facilities management services to all staff in Miesian Plaza. The Department ensures the continuation of critical services within the building to support the business needs of the Department.

As the lead tenant in Block 1, Miesian Plaza, the Department is responsible for facilities management and health & safety issues for all tenants. The Department liaises with the OPW as the tenant, the landlord, the other tenants and contractors.

In addition to the operational service requirements, the Department:

- Continued to implement Health & safety assessments, provision of equipment and reporting to facilitate blended working initiatives.
- Continued to promote the Department's Green Team and biodiversity initiatives among staff to affect a positive culture change.
- Drafted, published, updated and implemented the Department's Climate Action Roadmap for 2024.
- Completed all relevant returns to the SEAI within the relevant timeframes.
- Following on from our silver award for the Smarter Travel mark and gold award as a Cycle Friendly Workplace, the Department arranged and hosted "lunch and learn" bicycle maintenance sessions for staff.
- Collaborated with AsIAM to provide and implement the required measures to achieve the autism-friendly workplace certification for the Department.

HUMAN RESOURCES (HR)

- At the end of 2024 there were 683 staff (670.3 Whole Time Equivalents) employed by the Department, 57% female, 43% male.
- Employee turnover decreased to 12%, a steady decline from its peak of 22% in 2022.
- Professor Mary Horgan was appointed as interim Chief Medical Officer.
- Average training days per person increased from 2.7 to 3.5 days reflecting the Department's ongoing commitment to continuous learning and employee professional development.
- As part of the Department's ongoing Culture Project initiative, an employee recognition framework was developed and launched featuring a new employee recognition app.
- As a continuation of our commitment to equality, diversity and inclusion, the Department engaged in steps to achieve Autism friendly accreditation.
- Guided by the 'Menopause in the Workplace Policy Framework', a collaboration between the Department of Public Expenditure, NDP Delivery and Reform in consultation with the Women's Health Taskforce, a new Menopause policy was launched.
- The Department's 'Health System Performance Assessment Framework' was shortlisted under the category of 'Insights-driven Decision making' at the 9th Civil Service Excellence & Innovation Awards.
- The government committed to increasing the public service employment target for persons with disabilities to a minimum of 6% by 2024. The Department of Health remains ahead of this target with 6.8% of staff declaring a disability in 2024.

PRESS AND COMMUNICATIONS

In 2024 the Department delivered a range of communications designed to inform the public about the range of health services that protect and improve public health.



During the year, 212 press releases were issued and 592 responses to media outlets were issued. The Department achieved 6.4 million social media impressions across its channels, as well as 750,000 website views on gov.ie/health. Organic video content achieved almost one million views.

The Department worked alongside the HSE in promoting the importance of good respiratory etiquette during winter virus season, with a particular focus on protective behaviours and the availability of flu, COVID and RSV vaccines for various groups.

The Department also supported the HSE in maximising awareness of treatment options all over the country, including GPs, pharmacies and injury units. Media opportunities to reinforce the importance of protective public health measures were arranged for ministers, the Chief Medical Officer and Chief Nursing Officer.

Throughout 2024, the Department continued its focus on utilising all available resources to ensure all communications were in compliance with the Official Languages Act 2021.

INFORMATION AND COMMUNICATIONS TECHNOLOGY (ICT)

The Department supports and develops a modern, centralised, standardised, and rationalised ICT infrastructure to support improved business systems, ensuring its ability to effectively deliver on its business requirements. The Department continued to work closely with the National Cyber Security Centre, other public service bodies, including GovCore and our security partners in maintaining and strengthening our cyber security posture.

In 2024 the Department:

- Continued work to adhere to Public Sector Cyber Security Baseline Standards.
- Maintained, reviewed, and updated ICT policy documentation.
- Further strengthened ICT security infrastructure and configurations, including recommendations from external audits.
- Provided mandatory cyber security awareness training programme to all staff.
- Commenced work to further secure the Department's VPN/remote connectivity.

- Engaged in preparatory work for the implementation of the upcoming NIS2 Directive.
- Completed tabletop tests/exercises against BCP\IRP ICT recovery Plans.
- Provided ICT configuration assistance to statutory bodies as required.
- Commenced proof of concept project to explore the possible uses of Generative AI.

OPEN DATA

The concept of Open Data is to make data held by public service bodies available and easily accessible online, for reuse and redistribution. While data published in any format could be considered Open Data, the type of data format (e.g. a PDF document vs a csv file), has significant implications for the usability of this data by others.

In line with the [Open Data Directive](#), the Department aims to publish as much Open Data as possible, in the most open and accessible formats. During 2024 's publication of Open Data expanded substantially. In total **the Department of Health now has 345 Open Data datasets available on the national open data portal**, up from 221 datasets a year ago.

The Department publishes Open Data on CSO's PxStat database under 4 different groups:

- Health Statistics (data on hospital activity: 93 tables)
- Health System Performance Assessment (HSPA) (data which feeds the HSPA visualisation platform: 103 tables)
- Healthy Ireland Survey (time series data on results of the Department's annual Healthy Ireland survey: 68 tables)
- Mortality Statistics: (data on mortality rates 8 tables)

In addition, the Department releases an annual publication of 20 Open Data tables on the Department's webpage from the **Annual Non-Monetary Health Care Statistics questionnaire**, which is administered jointly by Eurostat, OECD and WHO. The publication includes data on Physicians, Midwives and Nurses, Other Healthcare Professionals, Healthcare Graduates, Hospital and Surgical Activities, Hospitals and Hospital Beds, and Medical Technology.

All of this data is also made available through the national open data portal, [Data.gov.ie](https://data.gov.ie).

Health in Ireland: Key Trends 2024

The *Health in Ireland: Key Trends* publication collates statistics from several areas, including demographics, population health, hospital and primary care, health sector employment and expenditure. It highlights the significant achievements that Ireland has made for key health outcomes in the past decade, and also the challenges that persist in terms of the accessibility of timely and efficient healthcare.

Some of the key findings from 2024 include:

- The number of people in Ireland who reported their health as being good or very good (79.5%) in 2023 was the highest in the EU, well above the EU average of 67.7%. Ireland also had the highest rate of self-perceived good health in 2022.
- Life expectancy in Ireland is fifth highest in the EU, at 82.6 years.
- The population has grown by 14.8% since 2015, with the over 65s group increasing by 36.5% between 2015 and 2024.

- The total number of consultant and non-consultant hospital doctors employed in the public health service in Ireland increased to 13,772 (61.3% increase) between 2015 and 2024.

This year, work was done to automate the production of Key Trends as a webpage, meaning that from now on, tables and charts can be updated as soon as the underlying data is, rather than awaiting the usual publication date in December. As a consequence, other units in the Department will always have access to the latest available evidence upon which to base policies.

RECORDS MANAGEMENT

The Department appointed a Records Manager to oversee the management of its current and electronic records.

The Department updated its Records Management Policy and developed internal procedures for the transfer of files to the National Archives.

The Department submitted four records appraisal applications to the National Archives, the first step in gaining permission from the National Archives to dispose of Departmental records.

The Department continued work to ensure that it holds only records that it is legally responsible for. As part of this, the Department transferred:

- 166 files to the National Archives, which are now available to the public.
- 32,705 files to the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) relating to former Department of Health functions now with DCEDIY.

DATA PROTECTION

The Department of Health is committed to protecting the rights and privacy of data subjects. The Department has appointed a Data Protection Officer (DPO) and established a Data Protection Unit. The position and tasks of the DPO are set out in the GDPR, and their functions are supported by the Department.

The tasks include providing information and advice to business units on their obligations; raising awareness of data protection and training staff; monitoring data protection compliance and conducting audits; acting as the point of contact with data subjects and Data Protection Commission (DPC).

In 2024, the Department:

- Provided advice and support to Business Units on a range of data protection queries and issues. This included legislative consultations, data protection impact assessments (DPIAs), surveys, and updates to the Department's record of processing activities (ROPA).
- Raised awareness of data protection in the Department through the development of data protection guidance notes, templates, and information emails for staff.
- Reviewed the mandatory online training course in 2024, which is available to all staff on an ongoing basis.
- Reviewed and updated key Departmental policies to ensure data protection considerations were reflected and incorporated.
- Assisted members of the public on data protection queries and requests for access.
- Acted as the contact point with the Data Protection Commission.

Appendix 1: Corporate Information

DEPARTMENT OF HEALTH MANAGEMENT BOARD IN 2024

Robert Watt

Secretary General

Tracey Conroy

Assistant Secretary

Acutes Hospitals Policy

Greg Dempsey

Deputy Secretary

Governance and Performance

Rachel Kenna

Assistant Secretary

Nursing/Midwifery Policy, Professional Regulation, Workforce Planning, & Allied Health Professionals

Siobhán McArdle

Assistant Secretary

Social Care, Mental Health and Drugs Policy

Louise McGirr

Assistant Secretary

Health Sector Employment and Industrial Relations Policy

Muiris O'Connor

Assistant Secretary

Research & Development & Health Analytics

Professor Mary Horgan

Chief Medical Officer (appointed 21 August 2024)

Office of the Chief Medical Officer

Derek Tierney

Assistant Secretary

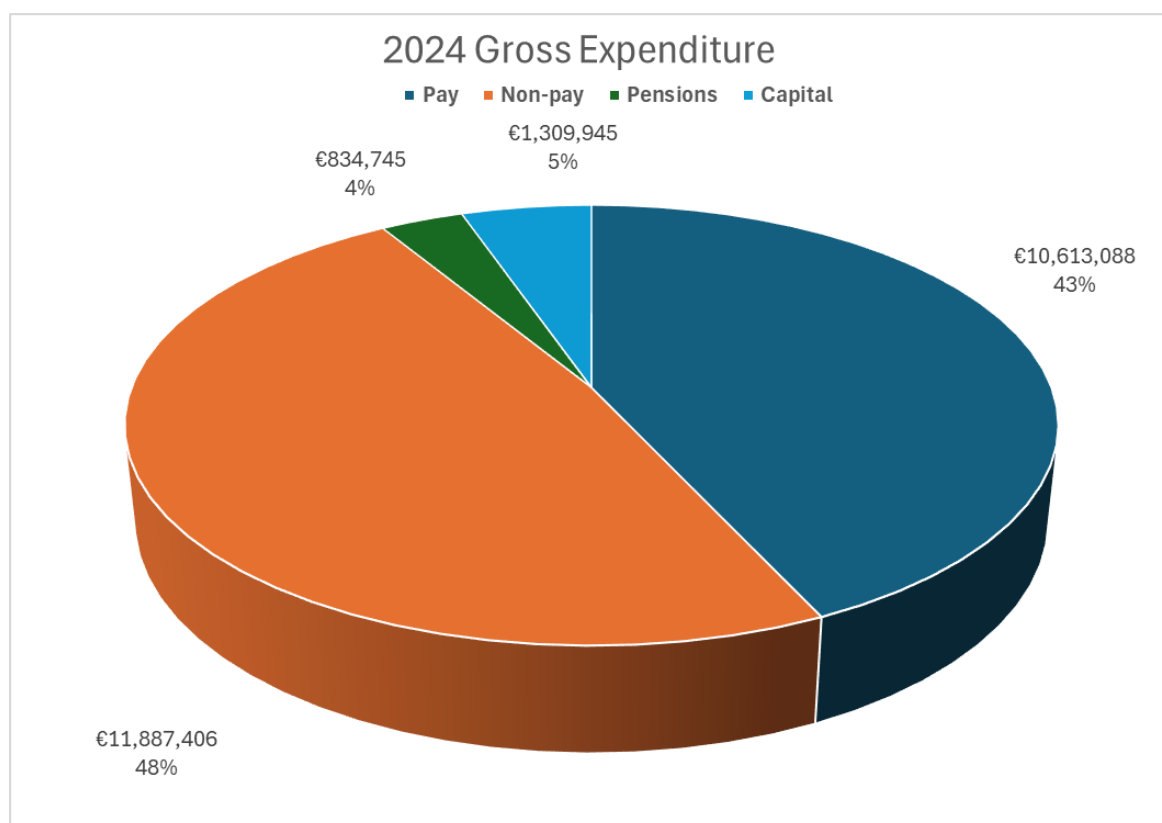
Health Infrastructure

CORPORATE PROFILE

At the end of 2024 there were 683 staff (670.3 Whole Time Equivalents) employed by the Department. In addition to supporting the Minister for Health, the staff of the Department also supported the three Ministers of State.

The Department managed a gross budget of €24.576bn in 2024. Budgeted appropriations-in-aid in the year were €0.423bn, leaving a net budget of €24.153bn. Gross expenditure in the year was €24.644bn (including capital carry-forward of €70m from 2023 spent in 2024) and appropriations-in-aid were €0.449bn. This resulted in net expenditure of €24.195bn.

Gross expenditure incurred by the Department of Health in the year represented 23.70% of total general government expenditure in the year. Net expenditure represented 28.23% of central government exchequer issues in the year. €24.645bn of gross expenditure in the year consisted of disbursements of €24.126bn to the HSE, €406million to other agencies with €112million incurred by the Department.



Note – figures in above chart are in thousands

2024 PARLIAMENTARY RESPONSES AT A GLANCE

Parliamentary Questions	9,100
Of which referred to the HSE for Direct Reply	5,900 (approx.)
Representations Received	11,500 (approx.)
Topical Issues Raised	144
Topical Issues Selected	46
Seanad Commencement Raised	92
Seanad Commencement Selected	52

FREEDOM OF INFORMATION

The Department processed 350 Freedom of Information (FOI) requests in 2024; 226 of which were from journalists. This represents a 5% increase on requests from 2023. The Department has continued to improve how requests are assigned and processed via the eFOI case management system.

This allows the efficient coordination of the Department's response to these requests and ensures they continue to be processed in accordance with our obligations under the FOI Act, 2014.

PROMPT PAYMENT

Details of the Department's Prompt Payments obligations during 2024:

Details	Number	Value (€)	Percentage (%) of <u>total number</u> of payments made
Total payments made in 2024	2,808	42,501,973.90	100%
Payments made within 15 days	2,494	36,808,095.84	89%
Payments made within 16 days to 30 days	247	5,417,775.59	9%
Payments made in excess of 30 days that were subject to LPI and compensation costs	60	276,102.47	2%

The total prompt payment compensation and interest paid by the Department in 2024 was €6,976.23, comprising €3,526.23 in interest payments and €3,450 in compensation payments.

ENERGY USAGE IN 2024

Ireland's Climate Action Plan 2024 demonstrates a strong commitment to reducing emissions and achieving climate targets. While significant progress has been made, including the completion of key actions and a notable reduction in emissions, ongoing challenges highlight the need for continued and accelerated efforts to meet the ambitious goals set for 2030 and 2050.

Over the past year, the Department has made significant strides in improving our Climate Action targets. Our recent achievements include:

- The Department successfully reduced its fossil CO2 emissions, and total CO2 emissions now stand at 36% below as measured against the baseline year 2018 through the implementation of energy efficient technologies and practices.
- The Department increased its use of renewable energy sources to 50% of total energy consumption, including the use of 100% renewable electricity.
- Waste reduction programs have led to increased awareness of types of waste and reduction of waste sent to landfills.
- The Department is on track to increase the improvement in energy efficiency in the public sector from the 33% target in 2020 to 50% by 2030.
- The Department is on track to reduce GHG emissions by 51% in 2030.

The Department also complies with Circular 01/2020 which requires public bodies to record the carbon emissions associated with official air travel and participate in the Monitoring and Reporting requirements with the SEAI. We have published our [Climate Action Roadmap 2024](#), reporting on our progress on the implementation of the Climate Action Mandate 2024.

The Department continues to be an active participant in the Office Public Works' Optimising Power @ Work campaign and continues to pursue and progress energy initiatives across the Department. In 2024 with the support of staff and our Green Teams, the Department has continued to run engagement campaigns, including a Biodiversity Day and Cycle clinics for staff. We also have a deposit point in Miesian Plaza for bottles and cans that are part of the Re-Turn scheme.

These improvements reflect our ongoing commitment to environmental sustainability. We understand that achieving our Climate Action targets requires continuous effort and engagement, and we are dedicated to maintaining this momentum.

GREEN PUBLIC PROCUREMENT

Green Public Procurement (GPP) is defined as "a process whereby public authorities seek to procure goods, services and works with a reduced environmental impact throughout their life cycle when compared to goods, services and works with the same primary function that would otherwise be procured." Approximately €12 billion a year is spent by the State on the procurement of goods, services and works. This provides Ireland's public sector with significant opportunity to influence the provision of more resource-efficient, less polluting goods, services and works within the marketplace.

Starting with the 2020 Annual Report, the Department reports annually on progress in relation to Green Public Procurement.

GREEN PUBLIC PROCUREMENT ANNUAL RETURN 2024

<i>Reference year 2024</i>	<i>Total number of contracts signed over €50,000 by priority sector</i>	<i>Total value of contracts signed over €50,000 by priority sector</i>	<i>Total number of contracts signed over €50,000 by priority sector <u>which have incorporated GPP</u></i>	<i>Total value of contracts signed over €50,000 by priority sector <u>which have incorporated GPP</u></i>
Priority Sector*				
Energy-related Products				
Food & Catering Services				
Heating Equipment				
ICT Products & Services				
Indoor Cleaning Services				
Indoor & Outdoor Lighting				
Office Building Design, Construction & Management				
Paper Products & Printing Services				
Textiles Products & Services				
Transport				
Totals	0	0	0	0
* Ten sectors for which GPP criteria have been developed by the EPA, based on common EU criteria with adaptations to reflect the Irish market and procurement practices				

Reference year 2024	<u>Total number of contracts signed over €50,000 by other sector</u>	<u>Total value of contracts signed over €50,000 by other sector</u>	<u>Total number of contracts signed over €50,000 by other sector <i>which have</i> <i>incorporated GPP</i></u>	<u>Total value of contracts signed over €50,000 by other sector <i>which have</i> <i>incorporated GPP</i></u>
Other Sectors**				
Professional Services	9	2,282,612	1	507,522
Other (please add other categories where relevant)				
Telephone Charges	1	97,434	0	
Energy	2	726,904	2	726,904
Totals	12	3,106,950	3	1,234,426

Appendix 2: Agencies under the aegis of the Department

Non-Commercial State Bodies

Dental Council
Food Safety Authority of Ireland
Food Safety Promotion Board - SafeFood
Health Information and Quality Authority
Health Insurance Authority
Health Products Regulatory Authority
Health Research Board
Health and Social Care Professionals Council (CORU)
Health Service Executive
Irish Blood Transfusion Service
Medical Council
Mental Health Commission
National Cancer Registry Board
National Paediatric Hospital Development Board
National Treatment Purchase Fund
Nursing and Midwifery Board of Ireland
Pharmaceutical Society of Ireland
Pre-Hospital Emergency Care Council

Commercial State Bodies

Voluntary Health Insurance (VHI)

Appendix 3 – Department of Health Publications

In 2024, the Department produced 61 publications, which are available for download at [gov.ie - Publications](https://gov.ie/Publications). The Department also sought the views of the public to inform policy development via public consultations:

- Development of the Inclusion Health Framework
- On the proportionality of legislative amendments contained in the Regulated Professions (Health and Social Care) (Amendment) Act 2020
- On behalf of the Commission on Care for Older People, a public consultation on health and social care services and supports for older people was undertaken.
- Development of the new National Rare Disease Strategy
- Public consultation on policy proposals for adult safeguarding in the health and social care sector

