

Department of Health
Annual Report 2025



CONTENTS

INTRODUCTION BY MINISTER FOR HEALTH, JENNIFER CARROLL MACNEILL	5
OVERVIEW	7
THE DEPARTMENT'S MISSION	7
ROLE OF THE DEPARTMENT	7
STRATEGIC PRIORITIES	7
CHAPTER 1 - PROMOTE AND PROTECT PUBLIC HEALTH.....	9
Screening Services	9
Immunisation and Vaccination	10
Healthy Ireland	10
Child Health Workforce Steering Group	12
Cancer Services	12
Cervical Cancer Elimination	13
Mental Health.....	13
Patient Safety	13
Food Safety and Environmental Health	14
Sexual Health	14
HSE Capital Plan	16
Covid-19 Evaluation	16
Preparedness for Emerging Health Threats	17
CHAPTER 2 - BRING CARE CLOSER TO HOME	18
Health Regions.....	18
Primary Care	19
Age Friendly Health System	19
Older Persons Strategy.....	20
Home Support.....	21
Nursing Homes	22
Community Pharmacy	22
Mental Health.....	23
National Cancer Strategy	23
Health Information Bill	24
Workforce Planning.....	24
Capital Infrastructure	24
CHAPTER 3 - MAKE ACCESS TO HEALTHCARE FAIRER AND FASTER	27
Acute Hospital Waiting Lists.....	27
Paediatric Spinal Surgery	28
Emergency Medicine Programme	28
Urgent and Emergency Care (UEC)	29
Review of Urgent and Emergency Care in the Mid-West Region.....	30
Strategic Plan for Critical Care	30
Health Regions.....	30
Sláintecare	31
Strategic Workforce Planning.....	35
Industrial Relations	36

Workforce Reform	37
Nursing and Midwifery	37
National Children's Hospital Ireland	38
Capital Infrastructure	39
Other Major Capital Projects	41
National Ambulance Service (NAS)	42
National Trauma Strategy	42
Cancer Services	43
Cardiac Services	43
HSE National Stroke Strategy 2022-2027	44
Neurology	45
Organ Donation and Transplantation	45
Primary Care	46
Oral Health.....	46
e-Health	46
Patient Safety	47
Mental Health.....	47
Women's Health.....	48
National Maternity Hospital	50
National Maternity Strategy	51
Gynaecology Service Developments	52
Assisted Human Reproduction Treatment	52
Termination of Pregnancy	53
The National LGBTI+ Inclusion Strategy.....	53
Gender Healthcare	53
Rare Diseases.....	54

CHAPTER 4 - STRENGTHEN GOVERNANCE AND PARTNERSHIP..... 55

Agency Governance	55
Performance Management	55
Health Service Productivity Dashboard	56
Industrial Relations.....	56
Patient Safety	56
Adult Safeguarding	57
Mental Health.....	57
Cancer Services	57
Oral Health.....	58
Older Persons.....	58
Community Pharmacy	58
Food Safety and Environmental Health	59
Health and Wellbeing	59
Strategic Workforce Planning	59
Health Regions.....	60
Health Infrastructure	60
European Health Data Space.....	61
North/South Cooperation.....	61
European Union (EU).....	61
World Health Organisation (WHO).....	62
Medical Evacuations	62
Sodium Valproate Inquiry	63
Inquiry into Complex Scoliosis and Spina Bifida.....	63

Medical Device / In Vitro Diagnostic Regulation Stakeholder Group	63
CHAPTER 5 - EVOLVE TO MEET FUTURE CHALLENGES AND OPPORTUNITIES	64
Corporate Operations Office (COO)	64
Statement of Strategy and Public Sector Duty	64
Open Data	65
Health Research	66
Health Infrastructure	66
Strategic Workforce Planning	67
Official Languages (Amendment) Act 2021	68
Governance and Risk	68
Corporate Services.....	69
Human Resources (HR).....	69
Press and Communications	70
Information and Communications Technology (ICT).....	71
Data Protection	71
Protected Disclosures	71
Internal Audit	72
APPENDIX 1: CORPORATE INFORMATION	73
Department of Health Management Board in 2025	73
Corporate Profile.....	74
2025 Parliamentary Responses at a Glance	75
Freedom of Information	76
Prompt Payment	76
Energy Usage In 2025	76
Green Public Procurement.....	77
Green Public Procurement Annual Return 2025	78
APPENDIX 2: AGENCIES UNDER THE AEGIS OF THE DEPARTMENT	80
APPENDIX 3 – DEPARTMENT OF HEALTH PUBLICATIONS	80

INTRODUCTION BY MINISTER FOR HEALTH, JENNIFER CARROLL MACNEILL

This Department of Health Annual Report for 2025 reflects a year of significant progress, sustained investment, and continued reform across our health system. Supported by the largest level of State investment to date, we advanced our mission to improve the health and wellbeing of people in Ireland while responding to growing and evolving healthcare needs.

In 2025, we continued to expand bringing services closer to home for our patients. The Enhanced Community Care programme grew significantly, supported by the recruitment of over 2,800 healthcare workers. The GP Direct Access to Community Diagnostics Scheme facilitated over 248,500 diagnostic tests during the year, while Community Specialist Teams for Older Persons provided over 142,000 patient contacts and over 25 million home support hours nationally. These initiatives are enabling more patients to receive timely, appropriate care within their own communities while reducing reliance on acute hospital settings.

Improving access to healthcare remains a central priority and the publication of the Waiting List Action Plan reflected our department's commitment to achieve this. To further support critical care, over 800 highly skilled staff were recruited and there were 3,286 consultants on the Public Only Consultant Contract by the end of 2025. A key objective of the contract is to strengthen senior decision-making presence on site, with provisions that facilitate the extension of consultant core working hours to 10pm Monday to Friday and 8am to 6pm on Saturdays.

Investment in infrastructure and bed capacity continued at pace, with the completion of new acute and community facilities, the opening of surgical hubs and ongoing advancement on major projects such as the National Children's Hospital Ireland and the new National Maternity Hospital. These developments will significantly enhance the patient journey and have a lasting impact on the quality, accessibility and sustainability of healthcare services in Ireland.

We have also strengthened our focus on prevention, public health and innovation. Important developments in 2025 included the expansion of screening and vaccination programmes, the publication of new national strategies and the introduction of Ireland's first National Endometriosis Framework, which is an important step in improving women's healthcare. Progress was also made in advancing public health regulation and digital health transformation, ensuring that our system is better equipped to respond to current and future challenges.

I express my sincere thanks to all those working across our health and social care services and within the Department of Health. Your commitment, expertise and dedication continue to underpin our many achievements. Together, we remain focused on ensuring we continue to build a fair, high-quality and sustainable 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 2025 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 2025-2028.

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 2025-2028 are:

1. Promote and protect public health
2. Bring care closer to home
3. Make access to healthcare fairer and faster
4. Strengthen governance and partnerships

5. Evolve to meet future challenges and opportunities

AND PROTECT PUBLIC HEALTH

Demographic trends and health capacity projections show that ensuring good public health is essential to maintain a stable, efficient, and sustainable health service for the people of Ireland.

Promoting and protecting public health means raising awareness of health risks and helping people to live longer, healthier lives. Encouraging and enabling people to make health-conscious choices and increasing uptake of screening programmes is vital to reducing health inequalities and early illness prevention.

SCREENING SERVICES

There are six population-based screening programmes delivered by the Health Service Executive (HSE). These programmes aim to reduce morbidity and mortality through prevention, early detection of disease, and treatment to improve health outcomes. The National Screening Service delivers four programmes: BreastCheck, CervicalCheck, BowelScreen, and Diabetic RetinaScreen. The National Children's Screening Service provides two programmes: the National Newborn Bloodspot Screening Programme and the National Universal Newborn Hearing Screening programme.

BowelScreen

In 2025, the BowelScreen programme was extended to include individuals aged 58 to 70. It will expand further throughout 2026 to cover individuals aged 57 to 71. This is an important part of a phased approach to extending the screening age, in line with available capacity and resources. When full expansion is complete, people aged 55-74 will be invited for screening.

At the request of the National Screening Advisory Committee (NSAC), the Health Inspection and Quality Authority (HIQA) undertook a comprehensive evidence review on a proposed extension of BowelScreen to those aged 50-54 (in addition to the current 55-74 ambition).

In 2025, BowelScreen added Cork University Hospital as a new unit to expand endoscopy capacity. It became the 16th unit in Ireland, offering colonoscopy procedures to BowelScreen participants requiring additional tests after their free bowel cancer screening test.

Newborn Screening

Progress continued throughout 2025 in implementing the addition of Severe Combined Immunodeficiency (SCID) and Spinal Muscular Atrophy (SMA) to the National Newborn Bloodspot Screening Programme (NNBSP).

At the request of NSAC, HIQA undertook a comprehensive evidence review on a proposed addition of testing for Congenital Adrenal Hyperplasia (CAH) to the NNBSP.

IMMUNISATION AND VACCINATION

- In 2025, Ireland's Primary Childhood Immunisation Programme, (PCIP), was expanded to include the varicella vaccine for infants turning 12 months on or after 1 October 2025, with a second dose provided in junior infants. This vaccination gives infants important protection against the chickenpox infection and helps protect the wider community.
- Following on from the successful Respiratory Syncytial Virus, (RSV), Immunisation Pathfinder Programme in 2024/2025, which saw 83% coverage and significant reductions in RSV cases, hospitalisations and ICU admissions, an expanded RSV Immunisation programme was put in place throughout Winter 2025/2026.
- For 2025/2026 the HSE offered RSV immunisation in maternity settings to all babies born in Ireland from 1st September 2025 to 28th February 2026 as well as extending the programme to include all babies born in the six-month period from March 1st to August 31st, 2025. This immunisation offered protection ahead of the seasonal upsurge in RSV infection. A HIQA Health Technology Assessment, (HTA), is underway to inform long-term programme planning.
- Community Pharmacists played an instrumental role in the implementation of the 2025/2026 HSE national seasonal influenza vaccination programme.
- HSE figures show that for this flu season, almost 1,400 Community Pharmacies provided LAIV vaccinations, and of these, 203 have visited school or pre-schools settings.
- In terms of the proportion of children and adults receiving their flu vaccine at the pharmacy, data indicates that 56% of children, and 26% of adults >60 years received the influenza vaccine from their community pharmacist.

HEALTHY IRELAND

- As part of the expansion of the Sláintecare Healthy Communities programme, 4 new areas were selected and contracted in the 2025. The areas are Blanchardstown, East Tallaght, Drogheda and Dundalk. The total number of Healthy Communities areas in 2025 is now 24.
- A comprehensive review of the Healthy Ireland Framework 2013-2025 was conducted in 2025. This will feed into the development of the new Healthy Ireland Framework in 2026.
- In June 2025, Minister Murnane O'Connor welcomed the accreditation of the National Healthy Cities and Counties of Ireland Network (which underpins the Cities and Counties programme).



- Galway, Limerick and Waterford were also newly designated as World Health Organisation (WHO) members of the European Healthy Cities Programme (Phase VII) during the Annual Business Meeting in Bursa, Turkey. This affirmed Ireland's commitment to the implementing the WHO's Healthy Cities approach in an Irish context.
- In 2025 the Department of Health formed a breastfeeding steering group to research and develop a new whole of government breastfeeding policy. Funding was allocated to host a large stakeholder event in November 2025. The outcomes of this event and the focus group discussions will help inform the new national breastfeeding strategy.
- Due to the continued high incidence of neural tube defects (NTDs) in Ireland, the Department of Health's 2019 report recommended improving folic acid supplementation uptake, establishing surveillance, increasing awareness, and introducing folic acid food fortification. A Department-led Steering Group, supported by an Expert Advisory Panel and four working groups on each recommendation, was established in 2025 to oversee development of an overarching strategy.
- In 2025, the Department of Health began the process of developing a successor strategy to the Obesity Policy and Action Plan, which was due for completion in 2025. Throughout the year, the Department held various workshops and focus groups with key stakeholders, and also held a public consultation in August of 2025. This process allowed the public to feed into the development of the strategy. The new strategy is due to be published in 2026.
- The National Physical Activity Framework 2024-2040, and the National Physical Activity Action Plan 2024-2029 were published. The Department of Health co-chairs the promotion of physical activity across a broad range of sectors and this Framework will drive the collaboration and ambition needed to enable Ireland to have the most physically active population in Europe by 2040. The objectives of the Framework will be driven by a series of KPI-oriented Action Plans, the first of which covers the period to 2029.
- A National Policy Lead for Mental Health Promotion was appointed within the Department of Health in September 2025. The policy lead will lead on the implementation of Pathways to Wellbeing, Ireland's first cross-government mental health promotion plan – designed to strengthen mental health and wellbeing at a population level.
- The annual Healthy Ireland Survey gives an up-to-date snapshot of the health of the nation monitoring progress against key policy targets. The Healthy Ireland Survey 2025 was launched on 7th November 2025, providing updates on contraception use, experiences of menopause, use of e-cigarettes and other nicotine products, sleep, caring responsibilities and alcohol harms in addition to standard annual content.
- 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 2024 and the Irish Trends Report in 2025. Both can be accessed on the University of Galway website. HBSC underwent re-procurement in 2025. Delivery of the next four-year HBSC cycle will be led by the University of Galway, with fieldwork to be prioritised and completed in 2026 and analysis and publication of the Irish and International 2026 Reports and a Trends report to take place during the remaining 3 years, in co-ordination with the WHO.

- Delivery of the first phase of implementation of the Healthy Workplace Programme with 38 organisations and partnership initiative launched with Chambers Ireland
- Completion of first phase of Walking Tracks initiative with IRFU and FAI and agreement on Phase 2
- Establishment of cross-sectoral group to develop a Healthy Prisons Framework

CHILD HEALTH WORKFORCE STEERING GROUP

First 5, a Whole-of-Government Strategy 2019-2028 (First 5 Strategy) is designed to improve the lives of babies, young children and their families.

- The Department of Health has responsibility for identifying and testing a Dedicated Child Health Workforce and established a Dedicated Child Health Steering Group to progress this.
- In 2025 the Steering Group identified a dedicated child health workforce to support the consistent provision and enhancement of the National Healthy Childhood Programme and outlined an approach to test the proposed model.

CANCER SERVICES

- In 2025 the full cohort of six Senior Health Promotion and Improvement Officers – Cancer Prevention (SHPIOs-CP), one in each of the newly established HSE health regions, were fully in place. These posts align with the aims of Sláintecare, supporting people to stay healthy in their own homes and communities for longer.
- The SHPIO-CP's remit is to work with their local health promotion and improvement teams to implement health and wellbeing initiatives which seek to reduce cancer risk, improve awareness of cancer symptoms and support timely help-seeking behaviour among target populations in their regions. The SHPIOs-CPs work closely with the National Cancer Control Programme (NCCP) Cancer Prevention and Early Diagnosis Functions. Their work plan is informed by, and contributes to the implementation of, the National Cancer Strategy recommendations in relation to cancer prevention and early detection, the National Skin Cancer Prevention Plan, the NCCP Early Diagnosis of Symptomatic Cancer Plan and the recently published NCCP Cancer Prevention Plan 2025-2030.
- Significant progress was made in 2025 in achieving the full mainstreaming of cancer genetic testing under the National Hereditary Cancer Model of Care (2023). A working group under the Hereditary Cancer Steering Group has developed resources to mainstream the programme including guidance and training modules for clinicians as well as patient information materials.
- Two of our eight cancer centres now have established mainstreamed pathways. Available data shows that in 2025 at least 446 patients have availed of cancer genetic testing through these new pathways. This makes pre-test counselling and genetic testing available through the treating oncology team for certain patients with a diagnosis of cancer.

CERVICAL CANCER ELIMINATION

Ireland publicly committed to the World Health Organisation's global initiative to eliminate cervical cancer in January 2023, becoming one of the first countries to do so. We are on target to eliminate cervical cancer by 2040 through HPV vaccination, HPV screenings, and ensuring access to cervical cancer treatment. A [national action plan](#) was published in 2025 to ensure Ireland remains on track to eliminate cervical cancer and realise its vision to make cervical cancer rare in every community by 2040.

The action plan was developed following an extensive stakeholder engagement and consultation process. Ireland's Cervical Cancer Elimination initiative is supported by the Women's Health Fund. In 2025, €530,000 was allocated to support actions across vaccination, screening, and early treatment. Key measures include a pilot to improve HPV vaccination in underserved communities, research on school vaccination uptake, examining specific interventions like HPV self-sampling options, and funding for a specialist gynaecology fellowship.

MENTAL HEALTH

Over 2025, significant work was done to progress the development of a successor suicide and self-harm reduction strategy to *Connecting for Life*, which ran from 2015-2024. This successor strategy will be launched in 2026.

- The Strategy has been developed by the Department of Health and HSE, in collaboration with relevant Departments and agencies and all key stakeholders, as a national, whole of society approach to suicide reduction.
- The Strategy was informed by an extensive public consultation, the evaluation of *Connecting for Life*, and an evidence synthesis examining the current evidence base for suicide and self-harm risk factors and suicide and self-harm reduction initiatives.
- The new policy will build on the success of the previous strategy *Connecting for Life*

The implementation of *Sharing the Vision: A Mental Health Policy for Everyone* (2020-2030) continued, with policy implementation progress reports published by the National Implementation and Monitoring Committee for the policy on the Department of Health website. 9 Recommendations were signed off as completed in 2025, bringing the total of completed recommendations to 21 of a total of 100, at the end of 2025.

PATIENT SAFETY

- In September 2025, the Patient & Healthcare Staff Stories Project: Experiences of Sepsis, Infection & Antimicrobial Resistance (AMR) Report was launched. The report captures the views and experiences of people, families and healthcare staff in Ireland who have experienced serious infections, AMR or sepsis. The project aimed in part to raise awareness and understanding of the impact of AMR, sepsis, and infection in the health system.

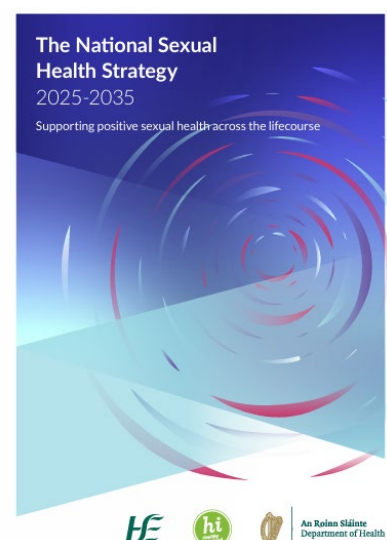
- The National Care Experience Programme (NCEP) is a joint initiative of the HSE, HIQA and the Department of Health. The second National Maternity Experience Survey was implemented and reported on in 2025, with the results published on 10 December 2025. The Health Service Executive (HSE) and individual maternity service providers have responded to the results by developing quality improvement initiatives.
- The Department acted as a liaison point for a series of national clinical audits published in 2025.
- The new National Action Plan on Antimicrobial resistance, INAP3, was published in November 2025 and launched at a One Health Conference on 17 November 2025.

FOOD SAFETY AND ENVIRONMENTAL HEALTH

- In July 2025, Minister Jennifer Murnane O'Connor established a Sunbed Working Group and launched a public consultation to progress the commitment in the Programme for Government to explore ways to ban commercial sunbed use. There were approximately 9,500 responses from members of the public, the sunbed industry, health sector workers, public health bodies and non-governmental organisations. The Reports from the Working Group and the Public Consultation will inform future public health policy on sunbed use.
- The Department's Folic Acid Steering Group is working on a new strategy to lower Neural Tube Defects in Ireland. This involves examining policy options, collecting and analysing data, and reviewing evidence to guide policy decisions.

SEXUAL HEALTH

- The new National Sexual Health Strategy was launched in June 2025 and presented at the annual Health Promotion Research Centre meeting at the University of Galway, shortly thereafter. Implementation structures are being finalised, with an Implementation Group in place and many actions progressed. The Strategy has a wider focus than its predecessor, including cross-Government and inter-agency working to support multidisciplinary areas of prevention.
- The Free Contraception Scheme (FCS) and National Condom Distribution Service (NCDS) continue to provide access to free contraception. The FCS was accessed by approximately 220,000 women in 2025, with over 2,450 GPs and 1,900 pharmacies in all regions of the country providing services and products under the scheme. Just under 1.3m condoms and 700,000 sachets of lubricant were distributed under the NCDS in 2025.



- Pilot male pelvic cancer survivorship and rehabilitation programmes in both Cork University Hospital and St James's Hospital were funded and initiated in 2025, with additional supports being provided to survivors.
- Work is commencing to develop a **HIV Action Plan**, as per the Programme for Government, 2025 commitment. This will include prevention, access to testing, diagnosis and treatment, and wider supports for people living with HIV.
- Work is ongoing with Cuan and the HSE to prevent domestic, sexual and gender-based violence and to support and care for its victims. We are supporting the Department of Foreign Affairs and Trade in meeting our sexual and reproductive health commitments under various international treaties, agreements and accords to which Ireland is a signatory. We are also working with the education and higher education sectors to promote education and awareness of good sexual health and consent, in school and on campus.
- Preparatory work to enable prescription of contraception through local pharmacies under some circumstances is underway, with this element of the scheme to be put in place following enabling legislation in 2026.
- Following a pilot funded by the Sláintecare Integration Fund in 2021, a home STI testing scheme was launched nationwide in 2022. The scheme has gradually expanded and has been highly successful, adding approximately 33% to national testing capacity.

In 2025 there were:

- 130,232 Home test kit orders
 - 97,986 Home test kits returned (Return rate: 75.2%)
 - 8,750 Reactive results (Reactive rate: 8.9%)
- HIV Pre-Exposure Prophylaxis, or PrEP, involves administration of low-dose anti-retroviral drugs to those at high risk of infection. PrEP appointments are provided free of charge through the national network of STI clinics. Appointments are also available through participating GPs and other private clinics; however, these are charged. The Department expanded the national PrEP and free home STI testing schemes in 2025 and secured funding for further expansion in 2026.
 - Additional staffing in 4 public STI clinics to provide additional capacity for HIV Pre-Exposure Prophylaxis (PrEP) was put in place by Q4, 2025. The PrEP e-learning course was launched in December 2024 as part of a PrEP competency framework for GPs. In 2025, 25 new GP were approved, bringing the total number of private & GP providers to 42.

In 2025:

- 9,469 individual PrEP users (new & return) were approved for free PrEP medication (these data are used as a proxy for PrEP clinic activity)
- 7,437 PrEP users had a prescription for free PrEP filled (new and return PrEP users)
- 2,196 PrEP users had a prescription for free PrEP filled for the first time (new PrEP users)

HSE CAPITAL PLAN

In 2025 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 2025 progressed and delivered a range of acute and community projects across the country, including increased capacity in the health system, as well as 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 the promotion and protection of public health.

COVID-19 EVALUATION

The Covid-19 Evaluation Panel commenced its work in early 2025. It is an independent body with a multi-disciplinary panel chaired by Professor Anne Scott. The overall objective of the work of the panel is to:

- Provide a factual account of the overall strategy and approach to planning for and handling of the pandemic in Ireland covering the period 1 January 2020 to 28 February 2022.
- To identify lessons learned having regard to health and social care system performance and the wider Government response to managing and mitigating risks.
- To recommend guiding principles and processes to guide future decision-making in the context of rapidly moving threats of this scale and duration.
- The focus of the evaluation will be on the whole-of-government response to the pandemic and how we might do better and be in a stronger position if another pandemic or other similar type event were to occur.
- The Department of Health played a lead and significant role in the national response to the COVID-19 pandemic, it provided oversight, guidance and strategic direction on the actions required to protect public health over the course of the pandemic. It worked in close partnership with its agencies, leveraging the best available evidence, to rapidly put in place the required public health measures to limit virus transmission, protect public health and limit the impact on services to the greatest extent possible.
- The Department is fully supportive of the work of the COVID 19 Evaluation Panel and has engaged extensively with the panel throughout 2025, providing detailed information and supporting documentation to assist them in carrying out a whole-system review of structures, frameworks and processes, through documentary analysis.
- The Evaluation Panel will submit its final report to the Taoiseach approximately 12-18 months after commencement of its work (due by end of 2026).

PREPAREDNESS FOR EMERGING HEALTH THREATS

Work was progressed to implement the recommendations of the report of the Emerging Health Threats Function Expert Steering Group. In April, the Health Threats Advisory Committee was established under the Chairmanship of the Chief Medical Officer to monitor emerging health threats and provide public health advice to the Department in response to public health emergencies.

Work commenced on a Health Threats Framework, to include a Pandemic Preparedness Plan, in line with strengthened EU and international law and informed by national and international best practice and lessons learned from the COVID-19 pandemic.

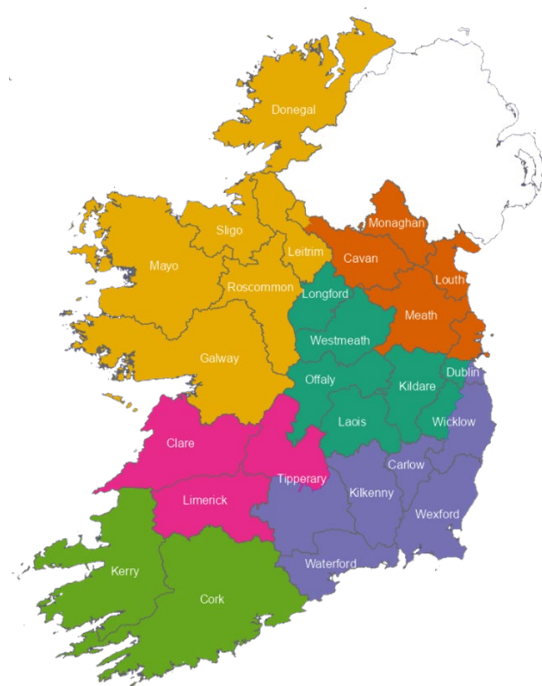
An agreement was reached on establishing and funding an Evidence Synthesis Hub in Evidence Synthesis Ireland that will serve as Ireland's national, dedicated evidence synthesis hub for emerging health threats preparedness and response.

CARE CLOSER TO HOME

The Department is committed to increasing care provided in communities, to ensure people are treated in the most appropriate setting while enhancing patient outcomes. Expanding care in the community means a reduced dependency on hospitals via increased local levels of primary and social care, providing accessible and timely healthcare closer to home.

Bringing community health services and hospitals together regionally supports a more patient-centred approach to healthcare, driving integration between care settings at a national, regional and local level.

HEALTH REGIONS



- The structure of Integrated Healthcare Areas (IHAs) was agreed. IHAs are the sub-regional geographies responsible for providing integrated acute and community care for their populations.
- Implementation of the Integrated Service Delivery model, which underpins how services will be delivered in the IHAs, began in anticipation of full rollout in 2026. This was informed by significant change readiness activities throughout the year, including extensive engagement with patients and service users, staff across multiple clinical disciplines and operational roles, voluntary organisations, staff representative bodies, and other stakeholders.
- The Department produced demographic components for the Population-Based Resource Allocation model. This enables Health Region budget allocations to account for the different age-

sex cost curves across regions and care groups, assigning more resources where they are needed most.

-  **HSE Dublin and North East**
FSS Bhaile Átha Cliath agus an Oirthuaiscirt
-  **HSE Dublin and Midlands**
FSS Bhaile Átha Cliath agus Lár na Tíre
-  **HSE Dublin and South East**
FSS Bhaile Átha Cliath agus an Oirdheiscirt
-  **HSE South West**
FSS an Iardheiscirt
-  **HSE Mid West**
FSS an Iarthar Láir
-  **HSE West and North West**
FSS an Iarthair agus an Iarthuaiscirt

- The HSE aligned its Regional Health Forums to the geographies of the Health Regions in advance of an upcoming legislative amendment. The Forums continue to facilitate representations and feedback from nominees of local authorities on the range and operation of health and social care in their areas.

- The independent evaluation of the Health Regions reform continued, and initial findings were used to inform implementation and future planning.

PRIMARY CARE

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 2025 includes:

- Ongoing investment in the Enhanced Community Care (ECC) Programme with all 96 Community Healthcare Networks (CHNs) established alongside a total of 53 Community Specialist Teams (CSTs) are now operational and providing services to patients nationwide, consisting of 27 for CSTs for Older Persons and 26 CSTs for Chronic Disease Management.
 - CSTs for Chronic Disease delivered over 476,000 patient contacts in 2025, and CSTs for Older Persons provided over 142,000 patient contacts in the year.
- 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 248,549 diagnostic 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 almost 122,000 referrals accepted and treated by this service in 2025.
- Continued delivery of Primary Care Centres (PCCs) across the country, with two new PCCs opening in 2025, bringing the total number of operational centres to 181 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 2025 one new Primary Care Centres became operational.

AGE FRIENDLY HEALTH SYSTEM

On 2nd December 2025, the Minister of State for Older People and Housing, Kieran O'Donnell, TD, launched the publication by the Health Service Executive (HSE) and the Department of the Health Age-Friendly Health System (AFHS), a blueprint intended to transform health and healthcare for older adults in Ireland.

The AFHS blueprint sets out an ambitious plan to become a country where the entire health system is designed and delivered through an age-friendly lens, to support longer lives by integrated, person-centred, high-quality care.

The framework has been developed on a collaborative basis across the Department of Health, HSE, and frontline staff, integrating clinical expertise with the preferences and will of older adults.



The 4Ms are:

What Matters: We must understand what matters most to each older adult, ensuring care aligns with their will and preferences, and aligning care decisions with the older adult's priorities and goals, not just their diseases.

Medication: We must prescribe medication thoughtfully and safely, choosing medications that benefit 'What Matters', Mind, and Mobility. The objective is to eliminate unnecessary, ineffective, and duplicate medications.

Mind: We must support a healthy mind and emotional wellbeing by the prevention, early recognition, and treatment of delirium, dementia, and depression.

Mobility: We must support older adults to live, thrive, and do 'What Matters' most to them, ensuring early, frequent, and safe mobility to maintain function

OLDER PERSONS STRATEGY

- The independent Commission on Care for Older People, established by the Government in 2024, completed its work on module 1 on the effectiveness, adequacy and efficiency of the care and supports which are currently provided within the health and social care system for older people.
- Increased funding was provided for the Carer's Guarantee in Budget 2025, providing a more standard package of supports for family carers in collaboration with the community and voluntary sector.

- The Department hosted a webinar in collaboration with the Institute of Public Health and World Health Organisation Regional Office for Europe on the topic of older persons' respite. The findings from the webinar and a HRB evidence brief on the topic will support the development of respite policy.
- A three-year evaluation of the national rollout of the Healthy Age Friendly Homes programme was commenced. The evaluation will determine the effectiveness of the programme, its value for money and replicability for other sectors.
- In September 2025, the HSE National Adult Palliative Care Policy Implementation Plan 2025-2026 was published. The plan sets out a detailed roadmap to implement the Department of Health's National Adult Palliative Care Policy. This plan will ensure that people who need palliative care will receive a timely and high-quality service at home or as close to home as possible.
- Budget 2025 provided targeted investment for the development and expansion of dementia diagnostic and community supports. Funding was allocated to increase the provision of dementia day care at home services, extend dementia day care services, increase the number of dementia advisers, increase Memory Assessment and Support Services (MASS) capacity, increase the number of activity clubs for people with young onset dementia and establish an Irish Dementia Registry, development of which commenced in mid-2025.

HOME SUPPORT

Increasing home care hours

In 2025, 25.55 million home support hours were delivered nationally, a 7.5% increase on 2024. The target for home support has increased to 26.7 million hours for 2026. This is more home support than has ever been delivered before and represents a 43% increase in the target since 2020.

Regulation of home support providers

The 2025 Programme of Government includes a commitment to "Design a Statutory Homecare Scheme to allow people to stay in their own home for as long as possible." A necessary precondition for any statutory scheme for home support is to ensure that the sector is regulated. The *Health (Amendment) (Home Support Providers) Bill 2025* was approved by Cabinet and published in December 2025.

This Bill will regulate home support services in Ireland by establishing a registration system for providers of home support services, under which it will be an offence to operate without a registration. HIQA's Chief Inspector for Social Services will be the registering authority with responsibility for monitoring and assessing compliance with regulations and HIQA national standards.

The regulatory framework, when enacted, will extend to all service users regardless of age who by reason of illness, frailty or disability require a home support service. The objective of the proposed registration system is to improve the safety and quality of home support services by ensuring that

registered home support providers do not operate below the standard set by Ministerial regulations.

NURSING HOMES

New Residential Care Capacity

Funding was provided to staff and operationalise 615 community beds (long-term and short-term) in public residential care settings in 2025 (455 replacement and 160 new beds).

Nursing Home Residential Premises Upgrade (RPU) Scheme.

The 2025 Nursing Home Residential Premises Upgrade (RPU) Scheme provided €10 million in funding to support private and voluntary nursing homes in improving compliance with HIQA standards under Regulation 17 (Premises).

Under the scheme, each eligible nursing home could access up to €25,000 for qualifying works completed between 1 January 2024 and 14 November 2025.

A total of 395 nursing homes participated, drawing down approximately €9.8 million, with most applicants availing of the full allocation.

Early indications suggest that participating centres are demonstrating improved compliance with HIQA premises-related requirements.

COMMUNITY PHARMACY

Community Pharmacy Agreement

- The Department of Health, the Health Service Executive (HSE) and the Irish Pharmacy Union (IPU) successfully concluded a negotiation process, which delivered a major new [Community Pharmacy Agreement](#) in September 2025.
- The Agreement supports commitments to expand pharmacy services, provides new investment in the sector, supports value for money and modernisation and digital reform.
- The agreement is comprehensive and extensive. It covers a wide range of future service provision in community pharmacy including bowel screening; immunisation programmes; a common conditions service; oral contraception prescription continuation; national condom distribution service; medicines optimisation and unused medicines return and disposal.

Common Conditions Service (CCS)

- Legislation was put in place in November 2025 enables community pharmacists to provide treatment, including prescription treatments, for eight specified common conditions.
- This builds on the recommendations by the [Expert Taskforce to Support the Expansion of the Role of Pharmacy](#). The role of the Taskforce was to identify and support the delivery of specific health measures by pharmacists, and pharmacies to members of the public.

- Significant, multi-disciplinary collaboration through the work of [The Community Pharmacy Implementation Oversight Group](#) supported the safe implementation of this service.
- The CCS gives people across Ireland faster access to trusted healthcare, while ensuring General Practitioner (GP) and hospital appointments are available for people with more complex health needs.

MENTAL HEALTH



- A new initiative to support the mental health and wellbeing of men in Ireland was launched in September 2025. Through an investment of €2m, this initiative will provide access to a range of talk therapies, counselling and mental health supports. Over 15,000 free counselling sessions will be offered annually.
- A Specialist Eating Disorders Hub opened at Mount Carmel Hospital, Dublin in October.
- Building on the Model of Care for Crisis Resolution Services, there are currently six operational Crisis Resolution Teams and two Solace Cafés (crisis cafés). In December 2025, two further Solace Cafés opened in Limerick and Waterford.

NATIONAL CANCER STRATEGY

Delivering clinically appropriate cancer care closer to home is a key objective of the National Cancer Strategy, Sláintecare, and the National Cancer Control Programme's (NCCP) Systemic Anti-Cancer Treatment (SACT) Model of Care.

Delivering SACT, including chemotherapy, closer to the patient's home and away from the acute hospital setting is acknowledged internationally as important for both the patient experience during their cancer treatment as well as for relieving capacity issues in hospital-based day wards. Important work was achieved in 2025 towards establishing Community Infusion Clinics around the country.

The NCCP has developed guidance documents to support sites in the provision of SACT services in the community setting. Many SACT centres have reviewed the services provided in their medical oncology/ haemato-oncology day wards, and some patients who would previously have been seen in those day wards are now being seen in other locations/ hospitals which provide the appropriate level of care.

HEALTH INFORMATION BILL

The Health Information Bill (published July 2024) was passed by Dáil Éireann in November 2025. 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 EU Regulation on the European Health Data Space (EHDS).

WORKFORCE PLANNING

The Department of Health undertook a Technical Support Instrument Project funded by the European Union and delivered by the OECD in 2023. The project is titled "*Towards person-centered integrated care: Aligning the health service workforce in Ireland with the needs of the person and population*" and was delivered in collaboration with HSE.

The project aims were to support Ireland's overall reform process, focusing on developing a multidisciplinary workforce model for integrated care. The project was completed on 7th December 2025, after successfully delivering all outputs. Key published outputs include:

- [Situation Analysis Report \(Output 3\)](#)
- [Good practices in delivering integrated care – examples from the Netherlands, Denmark, France and Ontario, Canada \(Output 4\)](#)
- [Getting healthcare professionals ready for integrated care: skills needs and development \(Output 4\)](#)
- [A Blueprint for Delivering a Workforce Model for Effective Integrated Multidisciplinary Care Teams in the Community in Ireland \(Output 7\)](#)
- [An evaluation framework to monitor integrated care \(Output 8\)](#)

All published outputs can be found here: [Towards person-centered integrated care in Ireland | OECD](#).

CAPITAL INFRASTRUCTURE

The HSE Building & Equipment allocation for 2025 was €1.25bn. 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.

In addition, the Department of Health and the HSE engaged ESRI as part of the DoH-ESRI 'Joint Research Programme in Healthcare Reform' to undertake a new Capacity Review in 2025 to inform long-term strategic planning. The ESRI built out their Hippocrates projection model and produced six reports published over the course of 2025. These project future demand (to 2040, at a National and Health Region level) for:

- Public Acute Hospitals
- General Practice services
- Older Persons services

Capital projects progressed by the capital programme and in accordance with Government Priorities in 2025 included:

- The opening of Mount Carmel Surgical Hub in South Dublin; progressing the construction of Surgical Hubs in Cork, Dublin (Swords), Galway, Limerick, and Waterford, and; the development of Surgical Hubs in Letterkenny and Sligo.
- Construction of projects across the country including completing construction of 165 acute beds across the country including:
 - the 96 acute bed ward block at University Hospital Limerick,
 - 20 Cystic Fibrosis beds in patient facility at Beaumont Hospital, Dublin
 - the 16-bed ward in University Hospital Limerick.
- In addition, 6 critical care beds were constructed at St. Vincent's University Hospital, Dublin in 2025.
- The National Children's Hospital Ireland continues to progress towards substantial completion. In December 2025 partial additional early access to the building was provided to Children's Health Ireland (CHI) by the contractor BAM, with further areas provided early 2026. This access has enabled CHI to derisk its onsite operational commissioning phase, which will begin following substantial completion. BAM is continuing the technical commissioning of mechanical and electrical services and de-snagging areas of the hospital ahead of offering them to the National Paediatric Hospital Development Board's (NPHDB) Design Team for final inspections.
- In 2025, progress on the new National Maternity Hospital continued with the conclusion of the procurement and tender process, and the submission of a Final Business Case to the Department of Health for review in line with the requirements of the Infrastructure Guidelines. Enabling works to facilitate the decant of services away from the site of the new NMH continued during the year. In parallel successful tenderers entered a non-binding pre-construction services agreement with the HSE, effective from 1 October 2025.
- 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.
- Progressing the Climate Action and Sustainability capital programme. In 2025 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 2025 included:
 - Progressing the Deep Energy and Carbon Retrofit, Pilot Pathfinder Programme in partnership with the 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.



University Hospital Limerick – 96 bed block

CHAPTER 3

MAKE ACCESS TO HEALTHCARE FAIRER AND FASTER

A core aim of Sláintecare is to provide timely, affordable access to services while also addressing fundamental health inequalities. A more equitable health service means people have access to services based primarily on their needs, not ability to pay.

Expanding eligibility and reducing waiting times are vital in improving access to healthcare. This supports the goal of ensuring people receive the right care, at the right place, at the right time.

ACUTE HOSPITAL WAITING LISTS

The Waiting List Action Plan (WLAP) 2025 was published in March 2025 and reflected the Government's commitment to reducing waiting times for patients and improving access to hospital care. The Department, the HSE and the National Treatment Purchase Fund (NTPF) developed the specific actions and targets set out in the WLAP, which included 25 actions across three themes, namely Delivering Capacity, Reforming Scheduled Care, and Enabling Scheduled Care Reform.

The WLAP 2025 was particularly focused on reducing waiting times for scheduled care and set out four key targets aimed at achieving this objective, including having 50% of patients waiting less than the Sláintecare wait time targets and reducing the weighted average wait time for scheduled care to 5.5 months.

Since the commencement of the Action Plan approach in September 2021, there have been important improvements in waiting times in hospitals across a range of metrics, including reducing the proportion of people waiting over 12 months and reducing the weighted average wait time that patients across hospital lists have been waiting.

Despite this recent progress, scheduled care performance in 2025 was challenging, with increases in waiting list volumes continuing through most of the year. While approximately 1.85 million patients were removed from hospital waiting lists in 2025 (an increase of around 2% on 2024 activity levels), this was offset by approximately 1.93 million patients being added to hospital waiting lists, which represents an increase of 6.3% over 2024 levels. This increased demand was a contributing factor in terms of the challenges experienced in 2025. As a result, by the end of December 2025, there were approximately 754,000 (i.e. 753,763) patients on the active hospital waiting list.

In light of these demand challenges, the anticipated progress towards the four WLAP waiting time reduction targets was not achieved by the end of 2025. Similarly, while scheduled care performance challenges were experienced at a regional level, there were some signs of improvement, which could potentially be leveraged further in 2026. For example:

- HSE South West achieved reductions in the number of patients waiting over 12 months and in the weighted average wait time for both the outpatient department (OPD) and inpatient and day case (IPDC) waiting lists.

- HSE Dublin & Midlands reduced the weighted average wait time for those patients waiting on IPDC and GI Scopes waiting lists.
- HSE Dublin & Midlands also improved the proportion of patients waiting within the 12-week Sláintecare target for its GI Scopes waiting list relative to its performance in 2024.

In addition, a number of new initiatives in 2025 indicated how optimising capacity utilisation can deliver increased productivity and reduced waiting times, while still representing value for money, for example the new Mount Carmel (South Dublin) surgical hub which opened in February 2025.

PAEDIATRIC SPINAL SURGERY

Multiple initiatives sought to address the waiting times for paediatric spinal services. This included additional outpatient clinics supporting a 46% reduction in new outpatient waiting lists, the onboarding of additional staff to improve capacity, enhancement of the adolescent transition spinal service to support transition of care, and national and international outsourcing to maximise capacity.

These measures supported the completion of 534 spinal procedures in 2025, which is an increase of 4% on 2024, and a 40% increase on 2019. At the end 2025, 47% of patients on the Children's Health Ireland active spinal waiting list were within the Sláintecare targets, compared to 38% at year's end 2024.

EMERGENCY MEDICINE PROGRAMME



On 24th September 2025, Minister Carroll MacNeill addressed the launch of the updated Emergency Medicine Programme (EMP) Model of Care 2025. This Model outlines an updated strategy for delivering urgent and emergency care in Ireland, reflecting major healthcare reforms, population growth and lessons from the COVID-19 pandemic. It emphasises Sláintecare's

principles of “right care, right place, right time” through four pillars: organisation of care, patient pathways, infrastructure and quality improvement.

The model promotes enhanced pre-hospital and community-based care, specialised services for paediatric and older patients, greater use of multidisciplinary teams and sustainable workforce planning. The need for strong patient participation, expanded roles for advanced practitioners and data-driven planning are also highlighted. Recommendations include greater use of multidisciplinary teams, virtual and alternative care pathways and investment in infrastructure and health information systems to ensure equitable, patient-centred and value-based emergency care across Ireland.

URGENT AND EMERGENCY CARE (UEC)

In 2025, our health service made significant strides in ensuring that urgent care is more responsive and accessible. The Urgent and Emergency Care (UEC) Operational Plan is a nationwide strategy designed to improve how patients move through the health system, from the moment they arrive at an Emergency Department (ED) to the day they are ready to return home.

2025 was particularly demanding, with a 4.4% increase in the number of people seeking emergency care. There was also a significant rise in older patients, those aged 75 and over, who often have more complex needs and require longer hospital stays. Despite these record levels of demand, hospitals and community services worked closely together to create a more efficient system. By focusing on "hospital avoidance" and faster discharge processes, we have begun to reduce congestion and ensure that hospital beds are available for the sickest patients.

2025 Key Achievements

- **Reduction in Overcrowding:** Despite higher attendances, we achieved a 10% national reduction in the average number of patients waiting on trolleys at 8am compared to 2024.
- **Faster Treatment Times:** The average Patient Experience Time (PET) i.e. the total time from a patient registering at an ED to being either sent home or admitted to a bed improved to 5.1 hours.
- **Expansion of Virtual Wards:** We expanded the Virtual Ward programme from two to seven hospitals, allowing thousands of patients to receive hospital-level monitoring and treatment in the comfort of their own homes.
- **Seven-Day Hospital Services:** More than 66% of hospital consultants have now signed up to a new contract that supports weekend and evening working, ensuring that senior doctors are available seven days a week to make critical care decisions.
- **Increased Community Support:** To help patients recover outside of a hospital setting, we delivered 24 million hours of home support and opened over 400 new community beds.
- **Better Access to Family Doctors:** During the busiest winter periods, we provided an extra 40,000 GP (General Practitioner) hours, facilitating an estimated 138,000 additional consultations to help people get the care they need without having to visit a hospital.

- **New Hospital Capacity:** A major new 96-bed block was opened at University Hospital Limerick, which helped reduce the number of patients on trolleys at that site by nearly half in its first two months.

REVIEW OF URGENT AND EMERGENCY CARE IN THE MID-WEST REGION

In December 2025, the Minister secured Government approval to progress a blended approach to Options A, B and C arising from the HIQA review of urgent and emergency care in the Mid-West.

This includes expanding capacity at University Hospital Limerick (UHL) (Option A), extending the UHL campus to incorporate an additional nearby site (Option B), and advancing the development of a Model 3 hospital in the region (Option C).

Delivery of Option A is well underway, with 112 additional beds provided in UHL in 2025 as part of a programme to add 306 UHL beds by 2029 and another 114 across the region.

To support Option B, the HSE was mandated with securing a suitable site to UHL, while Option C will be progressed in 2026 through a strategic plan for the phased reconfiguration and investment in regional healthcare services.

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 2025. This represents an increase of 82 beds (31.7%) from the 2020 baseline.

To support this increased capacity, over 800 highly skilled staff were recruited by year end 2025 and the Strategic 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 length of stay in ICU. There has also 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, early-stage 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.

HEALTH REGIONS

The Population Based Resource Allocation (PBRA) Expert Group met regularly in 2025 to develop and agree the methodology applicable to PBRA. Work progressed on the development of the

demographic and social deprivation components. Regional funding allocations for 2026 will be accompanied by a detailed shadow PBRA budget for each region based on population demographics (size, age, sex). This will be monitored against the actual regional budgets for the year in preparation for implementation of PBRA from Estimates 2027.

SLÁINTECARE

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

During 2025, Sláintecare continued to be implemented, through 'Path to Universal Healthcare: Sláintecare & Programme for Government 2025+' (Sláintecare 2025+), published May 2025. Sláintecare 2025+ builds on the successes of the Sláintecare Implementation Strategy 2018 and Sláintecare Implementation Strategy and Action Plan 2021 – 2023. SC2025+ 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.

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.

Sláintecare 2025+ comprises 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.

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

- 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.

In 2025, significant progress was made in implementing Sláintecare 2025+, including:

1) Improving Access

- Progress on removing Private Practice from Public Hospitals continued with 3,286 consultants signed onto the Public Only Consultant Contract as of 31st December 2025.
- Enhanced Community Care (ECC) Programme: In 2025, ECC teams continued to deliver significant community based multidisciplinary care to patients closer to home, with over 1.34 million patients seen by Community Healthcare Networks (CHNs). Over 142,000 patient contacts delivered by ICPOP Community Specialist Teams (CSTs), a 7% increase on 2024. Over 474,000 patient contacts delivered by Community Specialist Teams for Chronic Disease (ICPCD), a 33% increase on 2024 activity. 248,000 scans of various modalities were completed in the community.
- From June 2025, couples with one existing child in their relationship, and who meet all other current access criteria, can now access publicly funded Assisted Human Reproduction (AHR) treatment including one full cycle of in-vitro fertilisation (IVF) or intra-cytoplasmic sperm injection (ICSI).
- Urgent and Emergency Care (UEC): Over 1.6m ED attendances in 2025, a 4% increase on 2024. 2025 saw an improvement in the daily average 8am trolley figures, with an 11% reduction compared to the previous year, equating to, on average, 30 fewer patients waiting on trolleys for an inpatient bed per day.

2) Improving Service Quality

- The Healthy Ireland Survey 2025 highlighted that 82% of the population report being in overall good or very good health, remaining broadly unchanged since 2023 (80%). Improvements in general health perceptions have been noted in older adults, with 69% of older adults reporting good or very good health, as compared to 60% in 2015.
- The second National Maternity Experience Survey was implemented and reported on in 2025, with the results published on 10 December 2025. The Health Service Executive (HSE) and individual maternity service providers have responded to the results by developing quality improvement initiatives. In total, 84% of participants said that they had a good or very good overall experience.
- The 2025–2027 Sharing the Vision Implementation Plan was launched by the Minister for Mental Health on 9th April 2025.
- The Hormone Replacement Therapy (HRT) arrangement came into effect on 1 June 2025. Where a woman has been prescribed a HRT product by her healthcare provider

for the purpose of alleviating the symptoms associated with all stages of menopause, the cost of the HRT medications and the dispensing fees are met by the State.

3) Building Capacity

- A total of 9 HSE surgical hubs are at various stages of development nationally. Two surgical hubs are now fully operational. The Reeves Day Surgery Centre, Tallaght University Hospital, opened in late 2020. The HSE Surgical Hub South Dublin opened at Mount Carmel in February 2025.
- Budget 2025 allocated €5.5 million to expand Advanced Practice roles in nursing and midwifery, adding 70 additional posts, and for the first time this funding also created 30 Candidate Advanced Practice posts in Health and Social Care Professions.
- 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. As of 31 December 2025, there are 12,196 acute inpatient beds, and 2,688 day-case beds, which includes an additional 246 acute hospital inpatient beds opened in 2025.
- In December 2025, the Minister of Health published “Ireland’s Future Health and Social Care Workforce” paper. This paper forms part of the Department’s long-term health and social care workforce planning projections and the work underway to plan for future workforce needs of the health and social care sectors.

4) Enabling Reform

- The HSE Health App was publicly launched in February 2025, offering patients a trusted, secure place to view information. Initial features included secure access to certain health information, COVID-19 and flu vaccination records, digital medications lists, medical cards, European Health Insurance Cards (EHICs), and maternity appointments.
- Creating a Culture of Innovation: In 2025, 16 projects which were funded under Rounds 2 & 3 of the fund completed their “proof of concept” phase. 8 new projects were approved for funding under SIIF Round 4. The HSE commissioned the HSE Framework for Health Innovation to embed innovation as a core function of the health service - enabling successful innovation projects to be mainstreamed and scaled.
- Health Regions: The Health Regions reform involves the reorganisation of the HSE into six operational regions with responsibility for the planning and coordinated delivery of health and social care for their respective populations. This is a foundational recommendation of the Sláintecare Report. The structure of Integrated Healthcare Areas (IHAs), which are the sub regional geographies responsible for providing integrated acute and community care for their populations, was agreed.

- Productivity and Savings: a new theatre utilisation tool has been implemented in 22 sites with significant potential for improvement in productivity. The pilot rollout led to 1,775 additional surgeries in 6 months.

STRATEGIC WORKFORCE PLANNING

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

- Significant investment is being provided to expand healthcare education provision from 2025–2026 as a key part of addressing future supply of healthcare professionals and ensuring Ireland can meet growing healthcare needs. This will support the delivery of more than 1,100 additional healthcare training places annually over the next three years across medicine, nursing, therapy professions, pharmacy, dentistry.
- In June 2025, the Government announced major expansion in Health and Social Care Profession Training Places, with 461 new places to be delivered in nine priority disciplines by 2028. The expansion will see up to 310 additional student places created in 2025, up to 133 additional places in 2026, and the remainder in subsequent years, in disciplines critical to disability, health, and education services.
- In total over 480 additional medicine, nursing and midwifery and allied health profession student places have been provided in Northern Ireland across 2023, 2024 and 2025.

Additional places that commenced in September 2025¹ include:

- 20 additional places in medicine
- Maynooth University's new School of Nursing welcomed its first intake of 30 students in September 2025, with enrolments expected to grow to approximately 100 students annually.
- Up to 310 additional HSCP student places in disciplines critical to disability, health, and education services in Sept 2025 and a further 151 additional places in subsequent years (as per government announcement in June 2025). In addition, a tertiary programme in occupational therapy has also been created, with 20 students commencing in September 2025.
- Approximately 80 additional Pharmacy student places in 2025 with further increases expected in 2026.
- 21 additional Irish/EU Dentistry places in RCSI.

¹ 2025 figures are estimates pending Higher Education Authority enrolment data

- Further work is underway with DFHERIS and the higher education sector to increase student places in disciplines critical to disability, health, and education services.

Medical Workforce Planning - Postgraduate Medical Training Places

- Medical workforce planning supports investment in education and training of doctors for a sustainable health and social care workforce and supports implementation of NCHD Taskforce recommendations and retention of doctors.
- Significant increases in specialist postgraduate medical training places have been achieved over a six-year period from 2019/20 to 2024/25, including:
 - 27% increase across Basic Specialist Training (BST)
 - 32% increase across Higher Specialist Training (HST)
 - 29% increase in the total number of doctors enrolled in training programmes.
- The total number of doctors enrolled in postgraduate medical training in Ireland for the 2024/2025 training year was 5,681, including interns. This was an increase of 4.5% compared to 2023/2024.
- Increases in Senior House Officer Posts to accommodate expedited GP training expansion, and increases in specialist postgraduate training posts, were delivered in 2025.
- 879 medical Intern posts were available in July 2025, and all of these posts have been filled for the 2025/2026 medical intern training year. This represents an increase of 20% (145 places) in the number of intern posts available and filled since 2019.
- Provisional figures for the 2025/2026 training year indicate the total number of doctors enrolled in postgraduate medical training in Ireland for the 2025/2026 training year is approximately 6,080, representing a 7% increase in places compared to 2024/2025.
- Engagement between the Department of Health and the HSE is ongoing to progress this work, informed by long term medical workforce planning projections.

INDUSTRIAL RELATIONS

An agreement was reached with trade unions on arrangements to introduce an extended working day/week for staff in the public health sector in June 2025. Operating a 7-day health service will help to reduce trolley numbers, reduce the time patients spend in hospital unnecessarily, will speed up time for access to care, and can help in giving people alternative access to services in their communities and outside of acute settings.

The introduction of the new consultant contract was another significant step forward in ensuring we can increase current rostered hours, effectively doubling the available time for rostering consultants from 40 to 80 hours and ensuring that senior decision makers are available into the

late evening and at weekends. By the end of December 2025 there were 3,286 consultants on the Public Only Consultant Contract (POCC), accounting for 66% of the overall number of consultants working in the Irish public health system.

WORKFORCE REFORM

Advanced Practice in Health and Social Care Professions

Budget 2025 allocated €5.5 million to expand Advanced Practice roles in nursing and midwifery, and for the first time, this funding created Candidate Advanced Practice posts in Health and Social Care Professionals (HSCPs). Thirty Candidate Advanced Practice in HSCP posts have been created in line with regional structures and areas of priority, including areas experiencing challenges in access to care.

Designation of Appropriately Trained Physiotherapists as Referrers for Medical Radiological Procedures

In 2025 key steps were taken for physiotherapists, who have completed the training and entered the relevant register with CORU, to refer patients for diagnostic investigations such as X-ray. 197 physiotherapists completed training in University College Dublin. Hospitals and services facilitating referrals have a key role to play to ensure governance arrangements are in place to support this new practice-This initiative will result in fewer steps in the patient journey.

NURSING AND MIDWIFERY

Reform of the undergraduate nursing and midwifery programmes

- The undergraduate curricula for nursing and midwifery were reviewed in 2025 to support policy reforms including increased time for student practice placements in integrated and community settings.
- The Nursing and Midwifery Board of Ireland published revised Registered Nurse and Registered Midwife Programme Standards in line with this review in 2025.

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.

- Full baseline implementation of Phase 2 of the Framework for Safe Nurse Staffing and Skill Mix was achieved in 96% of Adult Emergency Departments nationally.
- The final research evaluation report for Phase 3(i) of the Framework for Safe Nurse Staffing and Skill Mix in Long Term Residential Care Settings was delivered in 2025 following extensive pilot testing in eight nursing homes nationally.
- Policy recommendations were approved by the national Taskforce overseeing the development of Phase 3(i) for inclusion in national policy.

- 2025 saw the commencement of Phase 3(ii) of the Framework within Community Care Settings.
- An evidence review and international consultations was completed in 2025 and an Expert Oversight Group established to oversee a research evaluation of the current models of public health nursing used in Ireland.

Advanced Practice in Nursing and Midwifery

- Investment from Budget 2025 of €5.5 million supported continued growth for Advanced Practice in Nursing and Midwifery towards the policy target of 3% and enabled this to be rolled out for the first time for Health and Social Care Professionals.
- As a result of this continued investment, the number of nurses and midwives at advanced practice level, including those registered and at candidate level, rose from 1,207 in December 2024 to 1,332 in December 2025.
- This increases the percentage of the total nursing and midwifery workforce at advanced practice level from 1.9% in December 2022 to 2.7% in December 2025.

NATIONAL CHILDREN'S HOSPITAL IRELAND



- In 2025, the major construction phase of the National Children's Hospital Ireland (NCHI) was completed. The contractor, BAM, began and is continuing the technical commissioning of mechanical and electrical services and de-snagging areas of the hospital ahead of offering them to the National Paediatric Hospital Development Board's (NPHDB) Design Team for final inspections.
- On 19th December 2025, partial additional early access to the Level 6 Ward block area of the building was provided to Children's Health Ireland (CHI) by BAM. This access is enabling

the installation, commissioning, and testing of equipment on site. This additional work de-risks CHI's onsite operational commissioning phase, which will begin post-substantial completion.

- The National Paediatric Hospital Development Board's (NPHDB) vendors were notified to commence delivering medical and non-medical equipment. A delivery compound was set up in the Emergency Department car park to enable over 5,500 pieces of equipment and furniture to be brought into the building. The first deliveries including inpatient overbed tables, lockers, and other equipment for Level 6 arrived in early January 2026.
- While this partial additional early access is welcomed, the NPHDB remains focused on securing the remaining early access areas in an expedient and consistent manner, and overall Substantial Completion soon thereafter.
- CHI's preparations for both the remainder of additional early access and the onsite operational commissioning phase, post substantial completion, are complete. Further, the integration of the three hospitals and workforces is ongoing, and the pre-commissioning programme is 96% complete.
- On 15th December 2025, the 52-bed family accommodation unit that will be operated by Ronald McDonald House Charities Ireland was successfully completed by Clancy Construction, on time and on budget.
- The NCHI will be Ireland's first digital public hospital. The implementation of the Electronic Healthcare Record (EHR) 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.
- Once NCHI is open and operational it will expand our capacity to meet clinical demand and have a transformative impact on the standard of care we can provide to sick children, and support to their families.

CAPITAL INFRASTRUCTURE

In 2025, progress on the programme of investment in public residential care continued, while also recognising the requirement to meet HIQA regulatory compliance. In 2025, 93 community beds completed construction:

- 43 beds at Cherry Orchard Hospital, Dublin
- 50 beds at St. Vincent's Community Nursing Unit, Mountmellick, Co. Laois

In addition, significant progress was achieved on the bundle of seven Community Nursing Units (CNU) being delivered under the Public Private Partnership (PPP) model, with three projects handed over to the HSE in Q4 2025:

- 48 beds at St. Vincent's Care Centre, Athlone (PPP)
- 50 beds at St. Joseph's Hospital, Ardee (PPP)
- 130 beds at Killarney Community Nursing Unit, Kerry (PPP)

In February 2026, the 50 bed PPP CNU in Middleton, Cork was handed over to the HSE.

The remaining PPP units are anticipated to be handed over in 2026:

- 50 beds at Clonmel Community Nursing Unit, Tipperary (PPP)
- 95 beds at St. Columba's Hospital, Thomastown, Kilkenny (PPP)
- 105 beds at St. Finbarr's Hospital, Cork City, Cork (PPP)



St. Vincent's Care Centre, Athlone

Primary Care is an integral component of Sláintecare. The continued infrastructural provision of primary care centres provides accommodation for a range of services, including community mental health services. 2 Primary Care Centres achieved construction completion in 2025 including Roscrea, Co. Tipperary and Ballybay, Co. Monaghan.



Adamstown Primary Care Centre

Mental Health services capital progress in 2025 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. Infrastructure completed in 2025 included:

- Refurbishment of the existing vacant community nursing unit Dual Diagnosis and Child and Adolescent Mental Health Services teams at Parteen, Clare
- Refurbishment of facility for Child and Adolescent Mental Health Services (CAMHS), Malahide Road, Dublin
- Continuation of the national anti-ligature programme of works.

Enhanced Community Care (ECC) roll-out continued in 2025; infrastructure completed included:

- Coastal and Clontarf, Dublin
- Hawthorn Building, Naas
- Equipping of a dedicated area of the Nenagh Primary Care Centre building to accommodate an ECC Hub

OTHER MAJOR CAPITAL PROJECTS

Elective Care Programme

- Through the course of 2025, the HSE and Government continued to progress plans for the development of new elective care facilities in Ireland. We are increasing elective-only day-case capacity through the Elective Ambulatory Care Programme. This is being delivered in two phases: a national network of surgical hubs in the first instance to meet medium term demand and capacity, and, in the longer term, a national network of Elective Treatment Centres in Cork, Dublin and Galway.
- In February 2025, the new surgical hub in Mt Carmel became operational. It delivered 3,729 procedures in 2025 (24% above target), resulting in a 74% reduction of patients waiting more than 12 months on relevant waiting lists compared to Dec 2024.
- Construction was progressed on five further surgical hubs (Swords North Dublin, Cork, Galway, Limerick and Waterford), all of which are expected to open in 2026.
- In July 2025, the Minister for Health announced that two further surgical hubs would be developed for Sligo and Letterkenny, to increase surgical capacity in the north-west.
- In relation to the Elective Treatment Centres, work continued in 2025 to refine the scope of the projects and develop their business cases as well as carrying out a number of surveys and site investigations as well as preparation of enabling packages. Government previously approved progression of proposed sites in Cork (St Stephen's Hospital, Sarsfield Court), Galway (Merlin Park University Hospital) and Dublin (Connolly Hospital in Blanchardstown and at the current Children's Hospital site in Crumlin). The HSE expects to submit planning applications for the Cork and Galway sites in 2026, whilst finalising demand modelling for preparation of a business case for Dublin.

The new elective facilities 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.

NATIONAL AMBULANCE SERVICE (NAS)

The Department continued to work closely with the National Ambulance Service (NAS) in 2025 to implement the NAS strategic programme of reform to transform the service from a traditional patient conveyance service to a mobile, Urgent and Emergency Care Service in line with the changing needs of the health system. In 2025 development of high-quality pre-hospital emergency care services continued with increased investment in the NAS. This investment enabled the ongoing transformation of prehospital emergency care services to better meet patient needs.

In 2025, a total of 449,297 urgent and emergency calls were received. A key priority in 2025 was the continued provision of frontline pre-hospital emergency care by the NAS. To meet increasing patient demand 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 2025, over 1,100 patients each week benefited from one or more of these pathways, with 40% of these patients not requiring subsequent conveyance to a hospital ED. Calls to the NAS National Emergency Operations Centre that were triaged for response and treatment by an alternative care pathway rose during 2025 to 6.5% of all calls received.

The Department of Health, 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.

NATIONAL TRAUMA STRATEGY

In 2018, Government approved the Trauma Strategy, Report of the Trauma Steering Group, A Trauma System for Ireland. The Strategy aims to reduce mortality and disability to people who suffer trauma injuries. Ireland’s trauma system consists of two hub-and-spoke Trauma Networks: Central and South. Each network has a Major Trauma Centre (MTC) for the treatment of major trauma and Trauma Units for the treatment of injuries of a lesser severity.

Building on the official launch of major trauma services at the MTCs at the Mater (MMUH) and Cork University Hospital (CUH) in April 2023, progress continues to be made on the implementation of the Trauma Strategy.

In 2025, funding was provided for the development of the Trauma Unit with Specialist Services (TUSS) at University Hospital Galway, Planned Trauma Care at Merlin Park University, Trauma Units at University Hospital Waterford and OLOL Drogheda and staff for capital projects underway at the MTCs.

Capital projects to support major trauma services progressed in 2025 include additional trauma resuscitation bays and diagnostic services at MMUH and CUH, additional theatres in MMUH and

a helipad and link bridge at CUH. Additionally, planning permission has been approved for a rooftop helipad at MMUH to support aeromedical access to the MTC.

CANCER SERVICES

Following a successful pilot in 2024, the innovative Stratified Self-Managed Follow Up (SSMFU) pathway was rolled out in 2025 for all post-treatment prostate cancer patients.

SSMFU pathways aim to adopt a standardised approach nationally to stratified follow up care after cancer treatment with a more personalised approach for cancer patients. Appropriate patients have their necessary tests and scans but no longer need to return to the hospital for routine follow up appointments and have a rapid access pathway back into the hospital if needed. These new pathways transform how follow up care is delivered for cancer patients' post-surgery/treatment.

Under the SSMFU pathway, patients no longer need to return for routine follow up appointments in the hospital. The clinical team assess their suitability to join the pathway at their first post-operative/treatment visit and the decision to commence is made together with the patient. It is at this stage that they meet a Patient Support Worker (PSW) who becomes their central point of contact.

When they start on the new pathway, the patients attend a group education session, which provides information on the pathway design, the tests and assessments they will need to complete, supports that are available in their local communities that will help them to self-manage their condition and who they should contact if they have an issue.

The PSW tracks the patients on the pathway, ensuring tests/questionnaires are completed and results returned and reviews these with the clinical team. If everything is within expected range and there are no concerns raised the patient and their GP are informed of the results and that they can continue on the pathway. If there are concerns or test results are not normal the clinical team agree on further actions required and the PSW follows up.

CARDIAC SERVICES

- Budget 2025 provided €4 million in full-year costs and 28 WTEs were provided to support cardiac service priorities; establishment of a national cardiac registry called EuroHeart, enabling a pilot project on cardiac imaging infrastructure, the development of governance and structures for Integrated Cardiac Care and the development of cardiac rehabilitation services. 13 new posts were funded to support the implementation of the new Cardiac Rehabilitation Model of Care.
- The Government is committed to progressing cardiac services at University Hospital Waterford and has invested significantly to support the delivery of enhanced and extended cardiac services. In March 2024, the Government announced provision for a further 19.5 staff, to complement existing services and to extend the opening hours of one Cardiac Cath

Lab at the Hospital to a seven day, 8:00am–8:00pm service. The 7-day service went live on 18th March 2025. The final step in service expansion is the introduction of a full 24/7 out-of-hours emergency cardiac service, which is expected to begin in 2026.

- The 'Her Heart Matters' campaign through the Irish Heart Foundation was supported by the Department of Health and the HSE in 2025 through Women's Health funding. The campaign aimed to increase the awareness of heart disease and stroke in women emphasising the importance of women recognising heart disease symptoms and seeking timely medical advice and raises awareness of the associated risk factors.
- In March 2025 the Minister for Health launched €570,000 in funding for three applied University College Dublin Projects on Women's Heart Health aimed at improving cardiovascular health in women. These initiatives focus on, postpartum cardiovascular risk assessment, addressing social determinants of health in heart failure (HF) and enhancing early cardiovascular diagnostic strategies for women.
- A further three projects, with a total value of €689,000 were also funded through the Women's Health Taskforce in April 2025 and aim to evaluate and appropriately manage polypharmacy in women with CVD, to address gaps in our knowledge about the influence of anxiety and depression in vulnerable women on the progression of CVD and seeking to find out if women with heart failure are treated differently than men and to understand the related risks.
- The Department of Health welcomed the development of the EU Safe Hearts Plan which was published in December 2025. The EU Safe Heart Plan aims to reduce premature cardiovascular deaths by 25% by 2035 through improved prevention, screening, and treatment across all Member States. The plan emphasises shifting from treatment to prevention, and amongst other things calls for stronger action against tobacco and smoking.
- The Joint Action on Cardiovascular Diseases and Diabetes (JACARDI) continued in 2025. This joint action was identified through the EU4Health Steering Group and Programme Committee and included two Irish pilots. JACARDI is currently in its third year, with both Irish pilot projects progressing well. This Joint action will conclude in 2027, and the learnings will be a key part of informing EU-wide approaches to disease prevention, screening and early detection, treatment and management of cardiovascular diseases.

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 €5.0m in 2025. This means that a total of €13.5m has been invested in the implementation of the strategy since its publication in 2022, resulting in better services for patients with stroke.

The funding received in 2025 will enable the recruitment of new posts to support the expansion of early supported discharge teams and access to acute stroke units to support stroke services through the provision of additional consultants, psychologists and a range of health and social care professionals.

Separately in 2025, €600,000 was allocated to support the Irish Heart Foundation Stroke Connect service. This service complements hospital services by supporting survivors of stroke when they are discharged, helping them make lifestyle changes to self-manage their condition and giving them a better chance of leading an independent life. The Irish National Audit of Stroke 2024/25 found that 96% of acute stroke units refer patients onto this service.

In 2025 the HSE launched a new national TV, radio and digital campaign called 'Every Second Counts'. The campaign reinforces knowledge and understanding of stroke symptoms while focusing on the importance of contacting emergency services immediately when a stroke is suspected. It is envisaged that this measure will increase the number of people attending emergency Departments within the crucial 4.5-hour window for the most effective treatments and the impact of the campaign will be measured by the national stroke audit.

NEUROLOGY

In 2025 €4.3m was allocated to support the implementation of the Neurology Model of Care and the Hub and Spoke Model for neurology services. This funding will enable the recruitment of 5 consultant neurologists and an additional 25 nurse specialist posts. This new service development will support implementation of the HSE Models of Care for Neurology and Epilepsy and will directly contribute towards achieving the Programme for Government commitments of increasing the number of neurology nurse specialists and the number of consultant neurologists. The funding will also enable development of the Deep Brain Stimulation service at the Mater Hospital in Dublin, an effective treatment for Parkinson's Disease and other movement disorders.

Nurse specialists will provide specialist care for people with complex neurological conditions including Epilepsy, Parkinson's Disease, Multiple Sclerosis, Neurogenetics, Neuromuscular, and Headache, helping to reduce waiting times and supporting people to manage their conditions in the community. It is expected that this proposed Hub and Spoke model will enable reduction in waiting lists, timely access for people with neurological symptoms to expedite diagnosis and treatment in order to improve quality of life and prognosis.

ORGAN DONATION AND TRANSPLANTATION

The Department remains committed to supporting the improvement and expansion of organ donation and transplantation services in Ireland. In 2025, 207 transplants took place from 69 deceased and 29 living donors. These figures include instances where there was no suitable match in Ireland and organs were offered to other countries with a suitable recipient, and vice versa.

Part 2 of the Human Tissue (Transplantation, Post-Mortem, Anatomical Examination and Public Display) Act 2024 was commenced on 17th June 2025. 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 introduced a soft 'opt-out'

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

PRIMARY CARE

Improving timely access to healthcare for all by reducing waiting lists, including Primary Care waiting lists, is a key focus of the *Path to Universal Healthcare: Sláintecare & Programme for Government 2025+*. To address the long waiting times for access to Primary Care therapy services, the Department is engaging with the HSE on a focused Programmatic Approach to Primary Care Waiting List Management which aims to put in place considerable standardised infrastructure to support systematic responses to Primary Care waiting lists.

Under this programme of work, an initiative commenced in 2025 to specifically target those waiting longer than 10 months to access Physiotherapy, Occupational Therapy and Speech & Language Therapy services. The initiative was approved to begin in September 2025 and is estimated to remove over 60,000 people from these waiting lists across these three therapies by the end of 2026.

ORAL HEALTH

September 2025 saw the Royal College of Surgeons in Ireland (RCSI) welcome their first batch of 30 students to their new state-of-the-art dental school in Sandyford. This is the first of three planned RCSI facilities which will be utilised to train undergraduate dental students in a primary care setting.

The RCSI will expand its intake to 35 Irish/EU student places by 2027. Over time, this will expand domestic graduate output by approximately 25% and contribute to workforce sustainability.



E-HEALTH

The Department actively engaged with Technology and Transformation Division in the HSE to drive the digital health agenda, implementation of Digital for Care and delivery on commitments under the Programme for Government. Relevant programmes in the context of the Programme for

Government in 2025 included the launch of the HSE National Patient App, the National Shared Care Record, deployment of Acute Virtual Care Wards in all regions, commencing the procurement of the National System for Electronic Prescribing and development of the preliminary business case for a national Electronic Health Record for consideration by Government.

Through the monthly performance meetings, particular attention was given to managing capital and revenue expenditure, recruitment, headcount, and progress with delivery of all significant 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 2025, which funded two significant projects to strengthen 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.

PATIENT SAFETY

- In May 2025, the updated National Clinical Effectiveness Committee (NCEC) Standards for Clinical Practice Guidance (Version 2) were published. The NCEC Standards for Clinical Practice Guidance support the development of high quality, up-to-date, evidence-based clinical policies, procedures and guidelines that guide clinical decision-making and achieve the best possible outcomes for patients.
- In September 2025 the NCEC, in conjunction with the HSE National Clinical Programme for Sepsis, updated the NCEC National Clinical Guideline No. 26 on Sepsis Management for Adults, including maternity. This update, and the research behind it, was undertaken to ensure that sepsis treatment in Ireland is in line with best practice internationally.
- A Government decision to recommence drafting of the Patient Safety (Licensing) Bill was received in June 2025. An OPC drafter was appointed and intensive engagement with HIQA on policy detail has commenced. Detailed internal and external stakeholder engagement is underway on the issue of Designated/High-Risk Activities.
- The first cycle of annual self-reporting on the implementation of the National Open Disclosure Framework was completed successfully, with an aggregated report on the implementation published in October 2025. Preparations are underway for the next reporting cycle.

MENTAL HEALTH

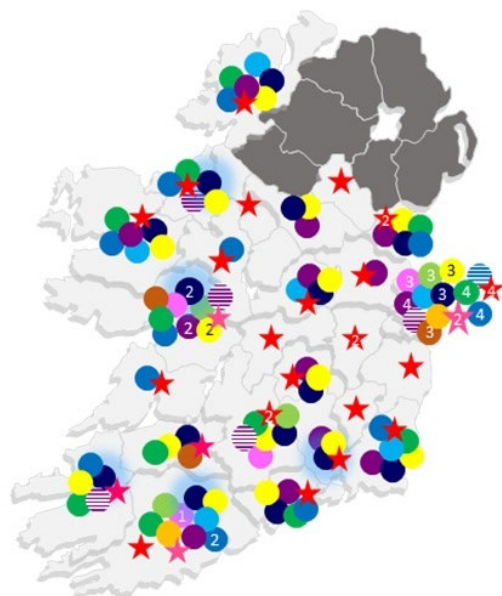
- 2025 saw the continued expansion and enhancement of the National Clinical Programmes for Mental Health, with additional teams funded for ADHD, Eating Disorders, Dual Diagnosis, and Early Intervention in Psychosis. This will facilitate equity of access to these services and ensure more people who need these services can be treated.
- In addition, a new Clinical Programme was launched in 2025 - the national Model of Care for Consultation Liaison Psychiatry which is a comprehensive framework to guide the development of Liaison Psychiatry services in our hospitals. Liaison psychiatry, also known as consultation liaison psychiatry, provides specialist mental health input in emergency departments and general hospital wards. Liaison Psychiatry plays a critical role in supporting people who present with both physical and mental health needs, particularly people who may present with eating disorders, self-harm and suicidal ideation.
- In February 2025, the HSE Child and Youth Mental Health Office (CYMHO) published its new Youth Mental Health Action Plan 2025-27, to improve all aspects of care including better access and reduced waiting lists.
- Navigator, a dynamic web-based signposting tool for young people aged 16-34 years, was launched in June 2025 and over 34,000 people used the tool during the year. This was commissioned by the Department and the HSE to facilitate help-seeking behaviour and enhance access to support.
- VISTA (Vision Into Action), a research programme designed to support and enable implementation of *Sharing the Vision*, was officially launched on 19th September 2025. The programme comprises six work packages as part of the Health Research Board Applied Programme Grants. Each work package is focused on an issue or experience related to mental health promotion, prevention and early intervention of mental health difficulties, with a particular focus on young people's mental health
- The HSE published updated Child and Adolescent Mental Health Services (CAMHS) Operational Guidelines in December 2025 regarding the role and responsibilities of CAMHS.
- Budget 2025 provided significant new funding to open the remaining 18 beds in the Central Mental Hospital.
- The Community Access Support Team (CAST) pilot project in Limerick commenced between the HSE and an Garda Síochána in January 2025.
- In 2025, the Mental Health Bill completed all stages in the Dáil and was in Seanad Committee Stage by year-end.

WOMEN'S HEALTH

In 2025, the [Women's Health Action Plan 2024-2025 Phase 2: An Evolution in Women's Health](#) was in its second year of implementation. This plan represented the next phase in women's health and continued to build on the invaluable work undertaken during the previous Women's Health Action Plan 2022-2023, as well as having a focus on new and innovative developments.

Women's Health in Ireland 2025¹

National map of existing and planned services



Operational
Planned

- Regional Fertility Hubs
(supporting men and women)
- "See and Treat" Gynaecology Clinics
- Sexual Assault Treatment Centres
(supporting men and women)
- Specialist Menopause Clinics
- Supraregional Specialist Endometriosis services
- Regional Specialist Endometriosis Centres
- Maternity Services²
- CervicalCheck Colposcopy Clinics
- BowelScreen Colonoscopy units
- Perinatal Mental Health services
- BreastCheck Screening (Static units)
- BreastCheck Screening (Mobile units)

(BreastCheck serves every county on rotation via its bank of 24 mobile units and four static units. As of 24 August 2023, screening was live in the locations marked above.)

Notes: ¹There are also many primary care, secondary care and tertiary care services available to women to support a range of health areas not depicted here. Always speak to your primary care health provider if you have a concern about your health.

²All 19 maternity hospitals are providing Termination of Pregnancy Services in line with legislation, and over 400 GPs are providing services

The Free Contraception Scheme was introduced in September 2022 and, as of September 2025, has just under 2,000 pharmacies and just over 2,400 GPs providing services.

The Free HRT Arrangement for menopause was introduced in June 2025 with 98% of Community Pharmacies now providing free HRT to women.

Indicates a maternity service includes a Community Postnatal Hub

Key Women's Health Achievements in 2025

- The dedicated Women's Health Fund supported 15 new initiatives, including in the areas of Female Genital Mutilation, Endometriosis, and supports for marginalised women.
- Increased hours in the Specialist Menopause Clinics for complex care.
- The National Framework for the Management of Endometriosis was published, and endometriosis services were expanded.
- All 19 Maternity Hospitals are now providing Termination of Pregnancy Services in line with Legislation.
- The Free HRT Arrangement came into effect in June.

- Two Listening Forums were held to hear from women about their experiences of (1) general healthcare, and (2) endometriosis.
- The National Sexual Health Strategy was launched.
- The Department of Health, along with other Government Departments, appeared before the UN's "Convention on the Elimination of all forms of Discrimination Against Women
- The Department of Health has been allocated funding for period Dignity 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 2025, €914,000 in period dignity support was provided to 9 CHOs, 25 local authorities, 10 NGOs, and to the Family Resource Centre National Forum, which supported 46 FRCs, with 14 of these being new participants.

NATIONAL MATERNITY HOSPITAL

The relocation of the National Maternity Hospital from Holles Street to Elm Park is a major infrastructural investment by the State for women's health providing much needed facilities for women and babies for generations to come. The new NMH will be a seven-storey, over 50,000m² facility containing 244 single-occupancy rooms (an increase of 80), 5 theatres, 24 birthing rooms, expanded neonatal capacity and direct clinical integration with St Vincent's University Hospital (SVUH).

Key milestones in 2025 for the relocation of the National Maternity Hospital (NMH) to St Vincent's University Hospital (SVUH), Elm Park include:

- The conclusion of the procurement and tender process, by the HSE and the incorporation of the outcomes into a Final Business Case.
- In July 2025, this Final Business Case was submitted to the Department of Health for review in line with the requirements of the Infrastructure Guidelines.
- During 2025, enabling works to facilitate the decant of services away from the site of the new NMH continued. This includes construction of:
 - A new medical records building
 - 13-bed neurology ward
 - fit out of new dermatology facilities
 - new campus wide-industrial kitchen & staff canteen facilities.
 - new electrical and mechanical energy (heating & water) centres for the campus
 - further junction upgrades
- In parallel to the review of the Final Business Case and ongoing enabling works, the successful tenderers entered a non-binding pre-construction services agreement with the HSE, effective from 1 October 2025. This process is bringing successful tenderers together

to ensure that all tenderers and suppliers are agreed on a detailed programme of works before they begin. This will enable more effective monitoring of works and enables successful tenderers to begin mobilising their supply chains.

NATIONAL MATERNITY STRATEGY

The National Maternity Strategy - Creating a Better Future Together 2016 - 2026 is entering its final year. Development funding from 2016-2025 has funded more than 560 additional full-time staff across maternity services, encompassing health professionals across a broad range of specialities. This includes 382 Whole Time Equivalent (WTE) nurses and midwives, and 44 Consultants, as well as physiotherapists, dietitians, social workers, healthcare assistants and administrative staff.

In this time, more than €100 million of capital funding has also been invested in improving the infrastructure of maternity services. Investment in the refurbishment of wards, upgrading equipment and the installation of home-from-home birthing rooms is enhancing the birthing environment for women.

At the end of 2025, 98% of the Strategy's actions are either fully implemented or in progress. Focus and investment in 2026 will continue to drive completion of these actions.

Investment of €2 million in the 2025 Budget (€4 million Full Year Cost in 2026) will ensure the continued progress of the National Maternity Strategy, including development of additional Postnatal Hubs, hiring more specialised midwives, and improving research, audit and clinical guidelines across our maternity services.

Key achievements in 2025 include:

- Continued roll of community Postnatal Hubs, with 8 in development in 2025 as part of Phases 2 & 3. 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. By the end of 2025, over 5,000 women and families have availed of services in the Hubs.
- Phase 2 rollout of an Electronic Health Record, the Maternal and Newborn Clinical Management System (MN-CMS). The MN-CMS went live at University Maternity Hospital Limerick (UMHL) in July 2025 and at the Coombe Women and Infants University Hospital in October 2025.
- 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.
- Additional Specialist Midwives have been recruited to enhance women's access to midwife-led care.
- Training and support have continued to be strengthened for staff in maternity services.

- 8 new Maternity Clinical Guidelines were launched in 2025, including on Reduced Foetal Movements, Antenatal Steroids, Ectopic Pregnancy, Domestic Violence, assisted Vaginal Birth and Management of First Trimester Miscarriage.

An evaluation of the current Strategy will take place in 2026. As part of this, a HSE review of the implementation of the Strategy was initiated in 2025 and is ongoing. This review and evaluation will be supported by an extensive evidence base, including learnings from the National Maternity Experience Survey 2025, published in December 2025, in which over 3,300 women participated. Overall, 83% of participants in this 2025 survey rated their maternity care as good or very good.

This overall approach will assess the achievement of the current Strategy and inform the successor to the Strategy as provided for under the Programme for Government.

GYNAECOLOGY SERVICE DEVELOPMENTS

Developments in gynaecology services are having a positive impact on gynaecology waiting lists and waiting times. There was a further increase in gynaecology referrals in 2025, with referrals more than doubling from just over 50,000 in 2020 to almost 110,000 in 2025. Despite the doubling of referrals, 79% of women were waiting less than 6 months for an appointment in December 2025.

Achievements in 2025 include:

- The National Framework for Management of Endometriosis was published on 18th October 2025.
- The established specialist endometriosis services saw almost 1,200 new patients and over 5,000 review patients in 2025. Over 1,400 endometriosis-related surgeries were completed in 2025.
- An additional 142 surgeries for women with endometriosis were funded in Q4 2025.
- 18 Ambulatory Gynaecology Clinics were fully operational with 24,366 new appointments provided in 2025.
- Six menopause clinics are operational in Limerick, Cork, Galway, the Rotunda, the Coombe and the National Maternity Hospital. 1,914 new patients attended these clinics in 2025.

ASSISTED HUMAN REPRODUCTION TREATMENT

- Access to the initiative was expanded in June 2025 to include couples experiencing “secondary infertility”
- The Assisted Human Reproduction Regulatory Authority formally was established and the Board was appointed in October 2025
- A total of over 3,600 couples had been referred for Assisted Human Reproduction (AHR) treatment (such as IVF) by the end of 2025
- Thousands more have had their fertility-related issues successfully managed at secondary care level at one of the six HSE-run Regional Fertility Hubs located across the country

- First public AHR Centre opened in Cork in December 2025 (initially providing intrauterine insemination (IUI) services only)

TERMINATION OF PREGNANCY

Significant progress has been made in relation to termination services in early pregnancy (up to 12 weeks). In 2025 services were provided in all 19 maternity hospitals. There has also been a sustained increase in community providers.

THE NATIONAL LGBTI+ INCLUSION STRATEGY

- The Department of Health and the Department of Children, Disability and Equality worked together to finalise the [National LGBTIQ+ Inclusion Strategy II 2024 – 2028](#).
- The first two-year Action Plan (2025-2026) for the successor strategy was published on 12th June 2025.
- The first steering committee meeting was held in November 2025, with representation from the Department.

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 provided funding of €770,000 for 2025 to support the development of the updated clinical model of care for gender healthcare services.
- A Clinical Advisory Group was established and convened in June 2025. In addition, a working group, which has a number of representatives with direct lived experience, was also established and the first meeting took place in December 2025.
- Lived experience engagement design sessions, attended by a number of advocacy groups, were held in July and September. These sessions were held to inform the development of a plan to maximise stakeholder engagement.
- The HSE commenced the systematic review on the first question in the evidence base with respect to co-existing clinical needs in gender diverse people with support from the HSE Library Service. Interim results of this review were made available for public consultation during the month of August 2025. This public submission process was completed in September 2025. The submitted papers were reviewed and included or excluded based on the pre-defined systematic review search strategy available on PROSPERO². Once all papers were reviewed, the HSE retrieved the data from the final total (of just under 200 papers) for analysis.

² The protocols for these systematic reviews can be found on PROSPERO (www.crd.york.ac.uk/prospero) under registration numbers CRD42024596562 and CRD42024596567 respectively.

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.
- Four new Acute Virtual Wards were opened in 2025 in Mercy Cork, Tullamore, Drogheda and St Lukes Kilkenny, expanding national capacity beyond the existing Acute Virtual Wards in St. Vincent's and UHL since July 2024.
- Over 2,350 patients have been onboarded to Acute Virtual Wards nationally, delivering approximately 22,000 virtual bed days to date. This has reduced pressure on acute hospitals by freeing up capacity for patients with care needs of higher acuity.
- Community Virtual Wards operating in Cherry Orchard and Letterkenny, along with a variety of Seedling Projects, harnessed digital technology to deliver clinically led healthcare to patients across the country.
- In 2025 these Community Virtual Wards demonstrated a significant reduction in acute admissions for the populations they serve, allowing patients to receive high-quality care at home.

RARE DISEASES

The [National Rare Disease Strategy 2025-2030](#) was finalised and officially launched by the Minister for Health in August 2025. The Strategy development included input from patient representatives, patient advocacy groups, clinicians, the HSE, and policymakers.

An Implementation Oversight Group (IOG) to provide oversight of the implementation of the Strategy's recommendations was established. Membership of the IOG reflects the key stakeholders across health services, policy and public engagement, and will ensure full implementation of the Strategy's recommendations.

CHAPTER 4

STRENGTHEN GOVERNANCE AND PARTNERSHIP

The Department of Health plays a vital role in providing good governance in the sector and the aegis bodies under its remit. Effective governance structures and regulatory frameworks support improved monitoring, performance and accountability.

Strengthening our partnership with the HSE and other agencies results in more productive, efficient health and social care services that provide better value for money. Constructive engagement, collaboration and oversight underpin the delivery of high quality and safe services across all health and social care providers, leading to improved health outcomes for patients.

AGENCY GOVERNANCE

- The Health (Amendment) Bill 2025 was published and cleared Second Stage in Dáil Éireann in July 2025. When fully enacted it will strengthen governance of the HSE by ensuring closer strategic alignment between the HSE and the Government.
- Approximately 200 appointments were made in 2025 to State Boards under the aegis of the Department.
- The Department completed a report on compliance with the Code of Practice for Governance of State Bodies for 19 aegis bodies in November 2025.
- Three claims were approved under the COVID-19 Death in Service ex-gratia scheme in 2025 bringing the total number of claims to 20. 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.

PERFORMANCE MANAGEMENT

- In 2025, the Department began to redesign the Performance Engagement Model (PEM) to drive faster, fairer access to healthcare through a sharper alignment between performance and funding decisions, and an increased focus on regional performance and regional comparative analysis.
- The Minister's Letter of Determination set clear national priorities for equity of access, regional consistency, prevention and early intervention, which were embedded in the 2026 National Service Plan (NSP).
- The Minister's approval of the HSE's 2026 National Service Plan (NSP), and the accompanying revisions to the HSE's Performance and Accountability Framework (PAF), represent a change in governance and performance oversight. Health Regions now have greater autonomy to deploy resources where they deliver the greatest impact, with

progress monitored against performance agreements and comparative regional benchmarking.

- Work is continuing with the University of Amsterdam on the implementation of the Health System Performance Assessment (HSPA) framework which aims to strengthen population level assessment of outcomes and support alignment between policy, planning, and performance management.

HEALTH SERVICE PRODUCTIVITY DASHBOARD

Health Service Productivity Dashboard

In June 2025, an interactive Productivity and Savings Taskforce Indicator Dashboard was published by the Department of Health and is available [here](#). The aim of the dashboard is to provide an analysis of trends in indicators highlighted by the Productivity and Savings Taskforce including:

- Expenditure and Workforce Inputs
- Hospital Activity
- Composite Activity Outputs
- Productivity Enabling Key Performance Indicators
- Waiting Lists

INDUSTRIAL RELATIONS

Improved monitoring and reporting arrangements with the HSE for staffing, agency usage and POCC implementation were put in place in 2025. The Department enhanced system-wide governance by progressing the National Integrated Staff Records and Pay Programme (NiSRP) across the HSE and agreeing plans for roll out to Section 38 organisations in 2026, driving further improvements in staffing controls.

The Department supported the HSE in development of appropriate Operating Models and service agreements following the introduction of the Regional Structure.

PATIENT SAFETY

- The Department continued its participation on the HIQA HTA Scientific Advisory Group.
- The Department nominated a representative to join the National Steering group for Clinical Audit. The HSE National Steering Group for Clinical Audit was established in June 2021 to provide a co-ordinated strategic approach for Clinical Audit activity and provide central oversight of National Clinical Audit service providers.

ADULT SAFEGUARDING

The National Policy Framework for Adult Safeguarding in the Health and Social Care Sector, Ireland's first adult safeguarding policy, was published in December 2025. The policy framework will extend across all public, private and voluntary health and social care services and includes a range of both legislative and non-legislative measures that will significantly expand and strengthen existing supports and protections for adults at risk of harm across the sector.

MENTAL HEALTH

An Interdepartmental Steering Group for Mental Health was established in July 2025, with representation drawn from across all government Departments, to help to embed mental health and a consideration of the needs of people with mental health difficulties in the delivery of all related policies, on a cross-government basis.

CANCER SERVICES

The National Cancer Control Programme's (NCCP) Alliance of Community Cancer Support Centres and Services ('the Alliance') is an initiative established in 2022, aiming to develop a collaborative framework for community-based cancer support centres and services. The Alliance brings the cancer support community together to best service the needs of cancer patients and their families within their own communities.

Significant progress was made in 2025 in achieving the full mainstreaming of cancer genetic testing under the National Hereditary Cancer Model of Care (2023).

A working group under the Hereditary Cancer Steering Group has developed resources to mainstream the programme including guidance and training modules for clinicians as well as patient information materials.

Two of our eight cancer centres now have established mainstreamed pathways. Available data shows that in 2025 at least 446 patients have availed of cancer genetic testing through these new pathways. This makes pre-test counselling and genetic testing available through the treating oncology team for certain patients with a diagnosis of cancer.

In 2025, €5.5million was allocated and distributed to among the over 21 full members and 23 associate members of the Alliance. Since 2022 the initiative has matured into a formulised, quality assured network of voluntary, community organisations. The



Alliance of Community Cancer Support Centres and Services Members, December 2025

Alliance are key partners in the delivery of survivorship supports under the NCCP's Psycho-oncology Model of Care.

ORAL HEALTH

In December 2025, the Minister for Health received Government approval to develop the legislation that will provide a legal basis for Continuing Professional Development (CPD) for dentists.

This amendment to the Dentists Act 1985 will introduce important obligations and powers for dentists, the regulator, and employers in relation to Continuing Professional Development (CPD). The intended outcome of this legislation is to guarantee the ongoing safety of patients and to reinforce public confidence in the dental profession's commitment to delivering high quality care. Moreover, these changes are designed to bring the regulation of the dental profession in line with standards set for other health professions, ensuring consistency and clarity across the board.

OLDER PERSONS

Representing Ireland, the Department of Health was elected Chair of the United Nations Economic Commission for Europe (UNECE) Standing Working Group on Ageing.

The Department also hosted a national stakeholder forum, 'Creating a Society for All Ages', to inform the revision of the Regional Implementation Strategy of the Madrid International Plan of Action on Ageing by the UNECE Standing Working Group on Ageing.

COMMUNITY PHARMACY

Medicines Criticality Assessment Group (MCAG)

- The MCAG is a collaborative working group of Department of Health, regulatory and healthcare agency bodies that facilitates rapid evaluation and actions to address emerging supply issues with human medicinal products (prescription and non-prescription). The group continued its successful collaboration over the course of 2025.

EU Pharmaceutical Package

- Following over two years of intense negotiations, provisional agreement was reached in December 2025 between the European Council and the European Parliament on the EU Pharma Package (Directive and Regulation).
- The conclusion of the pharmaceutical package by the European Union represents the biggest reform to Europe's pharmaceutical landscape for 20 years.

- Ireland participated actively throughout negotiations, seeking a balanced compromise that supports a strong, competitive Pharmaceutical Industry in Europe, and provides access to safe and innovative medicines which are affordable for health systems and individual patients.
- This was a significant moment in shaping the future of one of Europe's most strategically important sectors, supporting the health and economic security of Europe and impacting patient care for decades.

FOOD SAFETY AND ENVIRONMENTAL HEALTH

- A food legislative programme is developed annually by the Department and revised quarterly in consultation with the HSE/NEHS, HSE/official food control laboratories and the Food Safety Authority of Ireland. In 2025, the Department introduced 9 food statutory instruments and processed 55 EU Food Regulations.
- The Department, in conjunction with the HSE's National Environmental Health Service (NEHS), continued work with other Government Departments and Agencies on the development of a new permanent Border Control Post (BCP) at Rosslare Europort (Terminal 7). The new BCP, which was officially opened in November 2025, ensures that the State is compliant in its handling of consignments of food and other goods importing from or exporting to the UK, post Brexit.
- The Department's work on the transfer of the Local Authority Veterinary Services (LAVS) to the Department of Agriculture, Food and the Marine (DAFM), which it led through a cross-departmental/agency steering group, was successfully concluded on 1st January 2025. The transfer, which had been agreed by Government, results in a more efficient and effective single State Veterinary Service.

HEALTH AND WELLBEING

The Department of Health published the Health Sectoral Adaptation Plan 2025-2030. This will build on progress made under the 2019 Plan and facilitate greater cross-sectoral collaboration to improve the resilience of the health sector to the impacts of climate change.

STRATEGIC WORKFORCE PLANNING

- The HSE established an implementation framework to support the delivery of the Non-Consultant Hospital Doctor (NCHD) Taskforce recommendations and prioritised immediate actions to deliver improvements for NCHDs on clinical sites.
- Immediate implementation of recommendations in 2024 and 2025 includes projects to improve NCHD Learning Environments and Working and Wellbeing standards on clinical sites; enhanced NCHD Induction standards and supports; the HSE Occupational Health Support Hub for NCHDs; increased Flexible Training and Working Opportunities for NCHDs and increases in NCHD postgraduate training posts.
- The roll out of the piloted Clinical Educator programme and regional postgraduate education and training offices, recommended by the NCHD Taskforce, has progressed

towards the final phase of implementation. This provides a network of Clinical Leads across the regions with responsibility for overseeing onsite training and education for all NCHDs. This contributes to improved patient safety and retention of doctors by strengthening the education and professional development of NCHDs as well as supporting the delivery of the NCHD Taskforce recommendations.

HEALTH REGIONS

The HSE developed and agreed functional operating models, along with a whole-system “ways of working” framework, which together outline core processes and define how the HSE Centre and the Health Regions will work together.

HEALTH INFRASTRUCTURE

Health Infrastructure Investment Policy is being embedded across the organisation to deliver an enhanced strategic, efficient, and accountable approach to capital planning and delivery. The policy focuses on:

- **Ensuring Value for Money**
Implementing robust, evidence-based investment decisions that optimise the use of public funds and deliver sustainable health infrastructure outcomes.
- **Streamlined Appraisal and Approval Processes**
Applying a consistent, transparent, and proportionate appraisal framework, aligned with Infrastructure Guidelines requirements, to accelerate decision-making and reduce administrative burden.
- **Enhanced Efficiency in Project Delivery**
Strengthening programme and project management practices to improve timelines, cost control, governance, and risk management across the full infrastructure lifecycle.
- **Deepening Partnerships and Collaboration**
To further strengthen oversight and partnership in capital planning, internal consultations were undertaken in the first half of 2025 within the the Department. These engagements provided valuable insights into capital-related needs and concerns, while also supporting a clearer understanding of the capital planning process itself. The themes identified through this consultation will directly inform and enhance future capital planning approaches.

In parallel, the Department is embedding more structured and proactive collaboration with colleagues across the HSE including regional engagement through REOs, the Department’s own policy and operational units, and external stakeholders. This strengthened partnership model is designed to support coordinated planning, shared learning, and integrated delivery across the health infrastructure portfolio.

EUROPEAN HEALTH DATA SPACE

The EU Regulation on the European Health Data Space (EHDS) came into force in each Member State on 26 March 2025 and will follow a phased implementation timeline. Throughout 2025, the Department of Health continued to engage with key stakeholders and technical experts in order to progress 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.

NORTH/SOUTH COOPERATION

- PEACEPLUS is a cross-border funding Programme supported by the European Union, the Government of the United Kingdom of Great Britain and Northern Ireland, the Government of Ireland, and the Northern Ireland administration. In 2025, 10 projects were selected to receive over €85 million in funding through PEACEPLUS. The Department has also been developing a number of proposed projects for the next round of Shared Island funding.
- Significant work has continued as part of the wider cross border and all island strategic engagement process. Cooperation on healthcare is realised through a number of service level agreements and memoranda of understanding in a range of areas including cancer, pre-hospital emergency care, organ transplantation and cardiology.
- 6 meetings of the CMO IE and CMO NI offices were facilitated online over the year. These meetings are an opportunity for public health, clinical and policy leads to share information on approaches and results, and to support further collaboration on an all-island basis
- The Department of Health continued to liaise with counterparts in the UK Department of health and Social Care and to support the Ireland/UK Summit and the Common Travel Area Forum.

EUROPEAN UNION (EU)

The Department of Health engaged with the Department of Foreign Affairs and Trade, as well as other Departments and external stakeholders, to develop Ireland's health priorities for the upcoming Presidency of the Council of the European Union. In addition, 2025 saw the preparation and planning for a calendar of Presidency related events consisting of 24 health events to be held in Ireland during 2026. This included extensive stakeholder consultation, the analysis of ongoing developments within the EU, engagement at EU events, and the development of national and international partnerships.

There was also significant engagement during 2025 by Department officials and the Permanent Representation in Brussels with the European Commission and Council of the EU Preparatory Bodies on the EU legislative programme, notably as part of the negotiations of the revised Pharmaceutical Package and the proposal of the Critical Medicines Act.

WORLD HEALTH ORGANISATION (WHO)

The Department of Health has developed Ireland's presence with the WHO and other health related international organisations. Ireland was elected to the role of Vice-Chair of the Standing Committee of the WHO Regional Committee for Europe, fulfilled all multilateral obligations, increased engagement at major events including the World Health Assembly 2025, and has taken a leading role in international health governing bodies, such as the Standing Committee for the WHO Regional Committee for Europe.

During 2025, the Department actively contributed to the G20 group of countries Health Working Group with the Minister attending the final working Group in South Africa. The Minister led discussions on the importance of international cooperation and collaboration in ensuring the provision of equitable healthcare globally, with a focus on key issues such as health workforce training and development, antimicrobial resistance and women's health.

The Minister also highlighted the critical importance of the World Health Organisation (WHO) to global health and its vital role in directing and coordinating international health work, including emergency preparedness, prevention and response.

The Department also actively contributed to the intensive negotiations leading to the adoption of the WHO Pandemic Agreement at the World Health Assembly in May 2025 and to the ongoing work on negotiating an Annex to the Agreement to provide for a Pathogen Access and Benefit Sharing System.

This historic international agreement will be crucial in strengthening global pandemic prevention, preparedness, and response, and represents a global commitment to working together as an international community to protect public health and support the preservation of lives in the event of future pandemic emergencies.

MEDICAL EVACUATIONS

- As an EU Member State, Ireland was asked to respond to a request from the WHO to assist in addressing the health needs in Gaza. This follows Ireland's strong tradition of providing humanitarian assistance including through the Department of Foreign Affairs and Trade's Irish Aid humanitarian and development assistance programmes and the Health Service Executive (HSE) Global Health Programme.
- Following a government decision in 2024, Ireland will receive up to 30 paediatric patients and family members through medical evacuation from Gaza. By end of 2025, 20 paediatric patients with 88 family members had arrived in Ireland and were receiving treatment.
- Medical evacuation requests are managed through the Union Civil Protection Mechanism (UCPM), with the HSE and CHI managing the clinical support of the injured patient and other departments and agencies responding to ancillary support needs.

SODIUM VALPROATE INQUIRY

- The Inquiry into the Historical Licensing and Use of Sodium Valproate formally commenced on 22 July 2025, following the enactment of the required Data Protection Regulations.
- Throughout 2025, the Department provided operational support to the Chair to establish and operationalise the Inquiry.
- A public awareness campaign ran from August to October 2025, supported by the Inquiry's website, to inform potential participants and the wider public about the Inquiry's purpose and processes.
- The Chair issued documentation requests to key stakeholders and advanced preparatory work for the review phase, and put in place appropriate supports for participants, recognising the needs of affected individuals and families as they engage with the inquiry.

INQUIRY INTO COMPLEX SCOLIOSIS AND SPINA BIFIDA

On 18th November 2025, the Government agreed to a statutory public inquiry into spina bifida and complex scoliosis services.

As an initial step, the Government agreed that a facilitator will be appointed to consult with stakeholders on scoping the content of potential terms of reference for an inquiry

MEDICAL DEVICE / IN VITRO DIAGNOSTIC REGULATION STAKEHOLDER GROUP

- The Department of Health established a cross-departmental Medical Device / In Vitro Diagnostic Regulation Stakeholder Group, which convened several times over 2025.
- This group has provided an open, deliberative forum for discussion on the current and future regulatory landscape of medical devices and IVDs.
- This group is attended by representatives from D/Health, D/ETE, D/FA Permanent Representative to the EU, HPRA, HSE, Enterprise Ireland, IDA Ireland, Research Ireland, NREC, industry, patients, and healthcare professionals.
- These meetings have supported a full, balanced, and consistent understanding of the priorities of Irish stakeholders in this area.

CHAPTER 5

EVOLVE TO MEET FUTURE CHALLENGES AND OPPORTUNITIES

A high-performing Department is essential to support the delivery of all of our strategic and operational priorities. Ensuring staff are valued and empowered improves efficiency and productivity, allowing them to contribute to the achievement of the Department's goals.

Embedding innovation, harnessing data and utilising emerging technology will strengthen the Department's ability to develop policy, make evidence-informed decisions and meet any challenges and opportunities that may arise. Enhancing our capabilities results in a stronger operational structure, enabling the Department to perform its functions to the highest standard.

CORPORATE OPERATIONS OFFICE (COO)

The Corporate Operations Office manages a range of functions within the Department of Health, to ensure that the Department operates effectively and efficiently. The COO identifies and implements business process improvements across areas under its remit, including:

- 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
- Producing the Department's Annual Report

In 2025, the Corporate Operations Office managed approximately 14,300 Parliamentary Questions, 9,600 Representations and 426 Freedom of Information requests on behalf of the Department.

STATEMENT OF STRATEGY AND PUBLIC SECTOR DUTY

In 2025, the Department of Health developed a new [Statement of Strategy 2025-2028](#). The document sets out the direction for the Department's work over a three-year period, with consideration to the commitments set out in the Programme for Government and the fundamental principles of Sláintecare.

Input was sought and received from agencies under our aegis and from other Government Departments, in addition to internal consultation across our own Department. Five strategic priorities were identified to steer our work and enable us to achieve our goals:

1. Promote and protect public health
2. Bring care closer to home
3. Make access to healthcare fairer and faster
4. Strengthen governance and partnerships
5. Evolve to meet future challenges and opportunities

These priorities were chosen in response to the health, wellbeing, and social care needs of the people of Ireland, and in the context of significant national and international change, demands and demographics.

The Statement of Strategy 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.

OPEN DATA

The Department aims to become more open and transparent. The concept of Open Data is to make data held by public service bodies available and easily accessible online. In line with the [Open Data Directive](#), the Department aims to publish as much Open Data as possible, in the most accessible formats.

Health Geography Boundary Files

In July 2025, for the first time ever, boundary files for all levels of Ireland's Health Geographies - from the 96 Community Healthcare Networks up to the six HSE Health Regions - were made publicly available as Open Data via Tailte Éireann's GeoHive (Ireland's National Geospatial Data Hub). This was the result of close collaboration between the Department, HSE, CSO and Tailte Éireann.

Making these standardised boundary files publicly available allows stakeholders, including researchers, policymakers, and the public, to understand how health services are organised and delivered and allows for analysis to be carried out at these geography levels. Analysts can overlay them with other datasets (e.g. population demographics, disease incidence or socioeconomic indicators). They also facilitate integration with other geographic information systems (GIS) and health information systems, improving interoperability across agencies.

Open Data Tables

During 2025 the Department's publication of Open Data continued to increase and the Department of Health now has 398 Open Data datasets available on the national open data portal (from 345 datasets in 2024). The majority of these datasets were updated with new data during 2025.

The Department publishes Open Data through the CSO [database](#) on:

- Health Geographies

- Acute Hospital Discharges
- Health System Performance Assessment (HSPA)
- Healthy Ireland Survey
- Mortality Statistics

In addition, the Department released the annual publication of 18 Open Data tables on the Department's webpage from the [Annual Non-Monetary Health Care Statistics questionnaire 2025](#), which is administered jointly by Eurostat, OECD and the 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 open data is available through the national open data portal: [Data.gov.ie](#).

Health in Ireland: Key Trends 2025

The annual Health in Ireland: Key Trends publication collates statistics from several areas, including demographics, population health, hospital and primary care, health sector employment and expenditure. The 2025 publication will be released in early 2026 through a new online format meaning the tables, charts and underlying data will be more open and accessible to policymakers, researchers and the public.

HEALTH RESEARCH

- The Department produced health expenditure forecasts built from evidence on demographic, inflationary, and income-related cost drivers. The updated assumptions for 2027 will feed into the multi-year budgeting process for 2027-2029. This reduces the time spent on budget negotiations, and the increased transparency and predictability enables more capability building decisions with lower vendor prices.
- The Department took over management and development of a workforce demand and supply model created through an EU Technical Support Instrument. This enables the Department of Health to identify necessary student places in the higher education system for a range of professions. The outputs and technical documentation of this model were published in Ireland's Health and Social Care Paper in December 2025.

HEALTH INFRASTRUCTURE

The Department requires the HSE and all agencies under its aegis to fully comply with Health Infrastructure Investment Policy, which has been developed to ensure that capital investment decisions are firmly anchored in identified service needs and demonstrably linked to national service policy and strategic priorities. This policy framework provides a structured, evidence-based approach to investment planning, ensuring that proposals are both justified and aligned with the long-term direction of the health sector.

In line with this, the planning, appraisal, and delivery of healthcare infrastructure must be undertaken in a timely, disciplined, and outcomes-focused manner. All capital projects must meet

the highest standards of governance, adhere to the Infrastructure Guidelines, and demonstrate clear value for money across the full project lifecycle. The emphasis will remain on ensuring that infrastructure development supports improved service delivery, enhances patient experience, and contributes to system-wide efficiency and resilience.

By embedding these principles, the Department aims to strengthen accountability, drive better investment outcomes, and ensure that the health infrastructure portfolio is responsive, sustainable, and capable of meeting current and future healthcare needs.

STRATEGIC WORKFORCE PLANNING

In December 2025, The Minister of Health published “Ireland’s Future Health and Social Care Workforce”. This paper forms part of the Department’s long-term health and social care workforce planning projections and the work underway to plan for future workforce needs of the health and social care sectors. The paper highlights that there is an urgent need to build future supply of healthcare workers and sets out an evidence-based strategic direction for the health and social care workforce for the next 15 years.

This paper sets out twenty actions under the following five interconnected pillars:

- **Plan:** Use evidence and long-term workforce projections to meet future workforce needs.
- **Build:** Build future workforce supply through the expansion of student places and match the investment in workforce with the needs of the population.
- **Optimise Performance:** Reform, maximise capacity and optimise health service performance to support the development of innovative models of care as envisaged under Sláintecare. Having the right mix of healthcare professionals with the right skills, supported by the right technology is essential.
- **Recruit and Retain:** Consider tailored interventions to improve recruitment and retention. The same strategies may have different effects on different age groups, life stages, professions, locations and genders, and retention efforts need to be tailored accordingly.
- **Invest:** According to the WHO, targeted investment that delivers a sustainable workforce should be regarded as an investment for the future and not a cost.

The Department of Health will continue to use evidence-based tools to support strategic workforce planning. In particular, the Department will utilise the recently developed planning projection model to support strategic workforce planning activities. This model is an evidence-based planning tool that has the capacity to produce a variety of workforce projections, under different scenarios with differing levels of healthcare policy and reform, and varying levels of inward migration of foreign educated healthcare workers. Over time, the scope and capacity of the health and social care workforce planning model will be further expanded by incorporating new datasets and research to underpin the Department’s Health and Social Care long-term workforce planning and modelling.

OFFICIAL LANGUAGES (AMENDMENT) ACT 2021

In accordance with 4B of the Official Languages Act 2021, the Department of Health has appointed an official at Assistant Secretary level to oversee the performance of the body's obligations under the Act.

Throughout 2025, the Department of Health received no 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 Acts.

On 27 February 2026, the Department of Health submitted an audit on its advertising for year 2025, 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 2025 (requirement for at least 20%).
- Irish Language Media Spend overall for 2025 was 7.12% of all media spend (requirement for at least 5%).

GOVERNANCE AND RISK

- Significant progress has been made in progressing a risk-aware culture within the Department. September 2025 was designated as 'Spotlight on Risk Month', focusing on embedding risk management. In addition to risk management training which was provided to all staff, specific agency risk management training was provided to Line Units with oversight of State Bodies under the aegis of the Department of Health.
- An Innovation Steering Committee was established in 2025, bringing together representatives from each division to support progress in **implementation of the Department's Innovation Policy**. The Committee met four times and progressed several initiatives, including the Department-wide "Spotlight on Innovation" month in May and a "Design in Healthcare" seminar delivered with key partners. Work commenced on the development of an internal Innovation Hub to support collaboration, idea generation, and the advancement of innovation projects across the Department. The Hub will provide a dedicated space to foster teamwork, creativity, and forward-thinking approaches within the Department.
- The **Corporate Governance Committee** met 9 times in 2025. A number of new policies were reviewed and approved by the committee, and assurance provided regarding compliance with legislative and policy obligations. Minutes of all CGC meetings are published on HealthNet once approved. The Terms of Reference of the Corporate Governance Committee were reviewed and updated in July 2025.

CORPORATE SERVICES

As the principal sub-tenant of Block 1, Miesian Plaza, the Department manages facilities operations as well as health and safety matters for all occupants. The Department coordinates with the OPW as tenant, the landlord, other tenants, and contracted service providers. In 2025, the Department:

- Ensured legal compliance, managed the Safety Statement, conducted ergonomic assessments, oversaw building-safety systems, and led regular staff communications on health & safety matters.
- Continued to promote the Department's Green Team and biodiversity initiatives
 - Environmental initiatives
 - Waste management oversight
 - Staff awareness and biodiversity actions
- Drafted, published, updated and implemented the Department's Climate Action Roadmap.
 - Climate-action reporting
 - Delivering roadmap commitments
 - Ongoing engagement with climate governance and environmental units
- Completed all relevant returns to the SEAI within the relevant timeframes.
 - SEAI M&R reporting
 - Energy-saving campaigns
 - Environmental communications
- 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.
- Achieved the AsIAm autism-friendly workplace certification for the Department.
- Procured and implemented a new Facilities Manages and Security Services contract.

HUMAN RESOURCES (HR)

- At the end of 2025 there were 699 staff (687.5 Whole Time Equivalents) employed by the Department, 58% female, 42% male, with an average employee age of 44 years.
- Employee turnover, at 13.2%, remained broadly in line with the prior year figure of 12%.
- The Department's Gender Pay Gap (GPG) report highlighted a mean GPG of 0.86% in favour of men and a median pay gap of 2.56%, also in favour of men.
- The Department continued to exceed the current agreed 6% benchmark for employing persons with disabilities, with 9.2% of staff declaring a disability in the 2025 census.

- Participation in the Department's annual employee pulse survey stood at 58%, with findings indicating positive overall sentiment and stable or improved outcomes across most focus areas.
- The Department sponsored 116 third-level academic courses for staff across a range of disciplines aligned to the Department's strategic priorities. A mandatory training policy was also introduced to support legal compliance, operational safety and risk mitigation in the areas of GDPR, Cyber Security, and Health & Safety.
- As a continuation of our commitment to equality, diversity and inclusion, the Department successfully obtained autism friendly workplace accreditation in collaboration with ASIAM, Ireland's Autism charity.
- In July, the Department held its inaugural internal recognition awards ceremony as a key milestone of its Culture Project, recognising colleagues who exemplified the Department's values in action.
- In November, the Department commenced work on the development of the next iteration of its People Strategy 2026-2028.
- The Department's project on 'Improving Hospital Productivity' was named the overall winner under the category of 'Insights-driven Decision making' at the 10th Civil Service Excellence & Innovation Awards.

PRESS AND COMMUNICATIONS

In 2025, the Department issued 196 press releases, coordinated responses to 869 media queries (146% increase on 2024) and facilitated 46 interview opportunities, with almost 21,000 articles in traditional media relating to health topics.

Continuing the focus on digital media development to enhance public health messaging, there were 1.3 million views of gov.ie/health, and consistent engagement across all social media channels. There was significant growth in followers across Instagram (65%) and LinkedIn (30%). Organic social media impressions across X, Instagram, LinkedIn and Facebook totalled 3.4 million.

Several national public awareness campaigns were rolled out to support the strategic priorities of the Department. These campaigns were delivered through direct communications with the public via advertising, traditional print and broadcast channels and digital media channels, highlighting the introduction of free HRT, the new law around organ donation, the banning of the psychoactive substance HHC, and expanded eligibility for free GP visit cards.

The Department also collaborated with the HSE to complement and expand communications on a range of services, amplifying signposting to care pathways including injury units. This included targeted ads featuring the Chief Medical Officer and Chief Nursing Officer, encouraging uptake of flu vaccines for all groups and RSV immunisation for infants.

The above functions were carried out in compliance with the Official Languages Act 2021.

INFORMATION AND COMMUNICATIONS TECHNOLOGY (ICT)

Throughout 2025, the Department of Health continued to enhance and modernise its centralised, standardised ICT infrastructure to support business needs and strengthen our overall cyber-security posture. Consistent engagement was maintained with the National Cyber Security Centre (NCSC), public service bodies, and security partners to ensure compliance with evolving national requirements, including preparatory work for the NIS2 Directive. In 2025 the Department:

- Advanced alignment with the forthcoming NIS2 Directive, including completing a self-assessment, progressing gap-analysis planning, and coordinating management board training with the NCSC.
- Responded to and implemented recommendations from internal and external ICT penetration testing audits, completing actionable items in advance of scheduled re-tests.
- Continued the infrastructure refresh programme, completing preparatory work, procurement planning, and hardware specification to support resilient, high-availability platforms.
- Progressed the Department's Microsoft Copilot pilot, including licensing, training plans, and assessment of opportunities to improve productivity and support decision-making.
- Completed ICT-related activities supporting Business Continuity and Disaster Recovery, including a 2025 Cyber Incident Response tabletop exercise to test operational resilience during an incident.
- Maintained, reviewed, and updated ICT policy documentation.
- Delivered mandatory cyber security awareness training to all staff.

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, these 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).

PROTECTED DISCLOSURES

The Department received 51 Protected Disclosures in 2025. Each disclosure was handled confidentially, assessed promptly and addressed appropriately in accordance with statutory requirements and internal procedures, ensuring the rights of reporting persons are safeguarded at all times.

INTERNAL AUDIT

Internal Audit services operate in accordance with the functions set out in its updated Charter, as approved by the Accounting Officer and the Department's Audit Committee. A risk focused work programme was implemented in 2025 and was subject to ongoing oversight and monitoring by relevant stakeholders. The recommendations arising from assurance activities were agreed with Management and progress on implementation continues to be monitored.

During 2025, the Department continued implementing a substantive Quality Assurance and Improvement Programme (QAIP), following a recent independent External Quality Assessment. The QAIP supports the Department's progression towards substantive compliance with the Chartered Institute of Internal Auditors' International Professional Practices Framework, a key benchmark for internal audit quality.

Appendix 1: Corporate Information

DEPARTMENT OF HEALTH MANAGEMENT BOARD IN 2025

Robert Watt

Secretary General

Tracey Conroy

Assistant Secretary

Acutes Hospitals Policy

Derek Tierney

Assistant Secretary

Health Infrastructure

Greg Dempsey (resigned 28 February 2025)

Deputy Secretary

Corporate Affairs

David Leach (appointed 1 July 2025)

Assistant Secretary

Corporate Affairs

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

Secretary

Health Sector Employment and Industrial Relations Policy

Muiris O'Connor

Assistant Secretary

Research & Development & Health Analytics

Professor Mary Horgan

Assistant

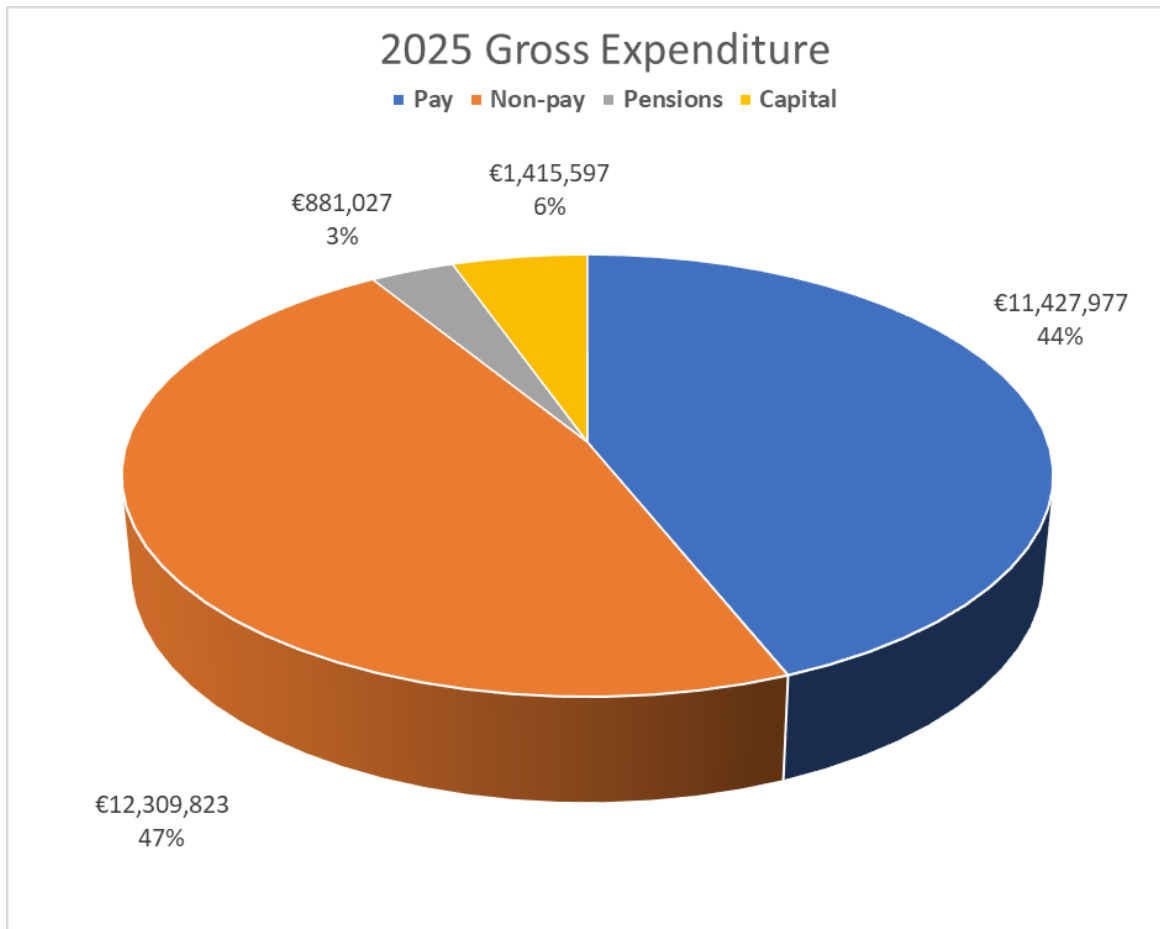
Chief Medical Officer
Office of the Chief Medical Officer

CORPORATE PROFILE

At the end of 2025 there were 699 staff (687.5 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 €25.753bn in 2025. Budgeted appropriations in aid in the year were €0.416bn, leaving a net budget of €25.337bn. Gross expenditure in the year was €26.034bn and Appropriations-in-Aid were €0.45bn. This resulted in net expenditure of €25.584bn

Gross expenditure incurred by the Department of Health in the year 2025 represented 23.8% of voted government expenditure in the year. Net expenditure represented 23.4% of government voted expenditure in the year. €26.034bn of gross expenditure in the year consisted of disbursements of €25.482bn to the HSE and €437m to other agencies and €115m incurred by the Department.



Note – figures in above chart are in thousands

2025 PARLIAMENTARY RESPONSES AT A GLANCE

Parliamentary Questions	14,300
Of which referred to the HSE for Direct Reply	9,000 (approx.)
Representations Received	9,600 (approx.)
Topical Issues Raised	331
Topical Issues Selected	73
Seanad Commencement Raised	132
Seanad Commencement Selected	68

FREEDOM OF INFORMATION

The Department processed 426 valid Freedom of Information (FOI) requests in 2025. This represents a 21% increase on requests from 2024. The FOI team continues to improve how requests are assigned and processed via the eFOI case management system. This supports the efficient coordination of the Department's responses to these requests and ensures all requests 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 2025:

<i>Details</i>	<i>Number</i>	<i>Value (€)</i>	<i>Percentage (%) of total number of payments made</i>
<i>Total payments made in 2025</i>	3,046	72,869,434.67	100%
<i>Payments made within 15 days</i>	2,745	69,757,524.30	91%
<i>Payments made within 16 days to 30 days</i>	258	3,025,039.72	8%
<i>Payments made in excess of 30 days that were subject to LPI and compensation costs</i>	38	86,869.65	1%

The total prompt payment compensation and interest paid by the Department in 2025 was €3,034.94, comprising € 1,134.94 in interest payments and € 1,900 in compensation payments.

ENERGY USAGE IN 2025

The Department of Health continued to deliver measurable improvements in the organisation's sustainability performance in line with the Climate Action Plan. Year-on-year analysis shows clear reductions in electricity and gas usage during 2025 compared with 2024, reflecting tighter control of building systems, improved monitoring, and increasing organisational engagement with energy-saving behaviours:

Electricity usage decreased by approximately 6.6% compared with 2024 and is now almost 16% below the 2019 baseline.

Gas consumption decreased by approximately 12.5% between 2024 and 2025, one of the largest year-on-year reductions achieved to date.

The Department will continue to comply with all Climate Action Plan requirements, including reporting obligations under Circular 01/2020 and participation in SEAI monitoring and performance frameworks.

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.” 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.

GREEN PUBLIC PROCUREMENT ANNUAL RETURN 2025

Reference year 2025	Total <u>number</u> of contracts signed over €50,000 by priority sector	Total <u>value</u> of contracts signed over €50,000 by priority sector. All values should be VAT exclusive.	Total <u>number</u> of contracts signed over €50,000 by priority sector <u>which have</u> <u>incorporated GPP</u>	Total <u>value</u> of contracts signed over €50,000 by priority sector <u>which have</u> <u>incorporated GPP</u> . All values should be VAT exclusive.
Priority Sector*				
Energy-related Products	0			
Food & Catering Services	0			
Furniture & Related Services	0			
Heating Equipment	0			
ICT Products and Services	2	498,748	2	498,748
Indoor Cleaning Services	0			
Indoor & Outdoor Lighting	0			
Office Building Design, Construction & Management	0			
Paper Products & Printing Services	0			

Textiles Products & Services	0			
Road Transport, vehicles and services	0			
Totals	2	498,748.00	2	498,748.00

* Eleven sectors for which national GPP criteria have been published by the EPA and were based on common EU criteria with adaptations to reflect the Irish market and procurement practices.

	<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 which have incorporated GPP</u>	<u>Total value of contracts signed over €50,000 by other sector which have incorporated GPP</u>
Other Sectors**				
Professional Services	6	560,056.00	3	350,056.00
Other (Health and Safety)	1	545,000.00	1	545,000.00
Other (Facilities Management and Security Services)	0	4,500,000.00	1	4,500,000.00
Totals	8	5,605,056.00	5	5,395,056.00

** Sectors which are not covered by national GPP criteria published by the EPA

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 2025, the Department produced 36 publications, which are available for download at [gov.ie - Publications](https://www.gov.ie/publications).

