# The Future of the Irish Health Service

Mary Jackson
Department of Health
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### GOALS OF THE HEALTH SYSTEM

- Keeping people healthy;
- Providing the healthcare people need;
- Delivering high quality services; and
- Getting best value from health system resources.

## The Challenge

 To create fair access, in a timely fashion, for all our citizens...

 ... even as budgets decrease and demographic pressures increase

## **Increasing Population**

- Population in 2011: 4.58 million

   an increase from 4.24 million
   in 2006
- Between 2001 and 2010 the birth rate has increased from 57,854 to 73,724 (16.5 per 1,000)

# Life Expectancy

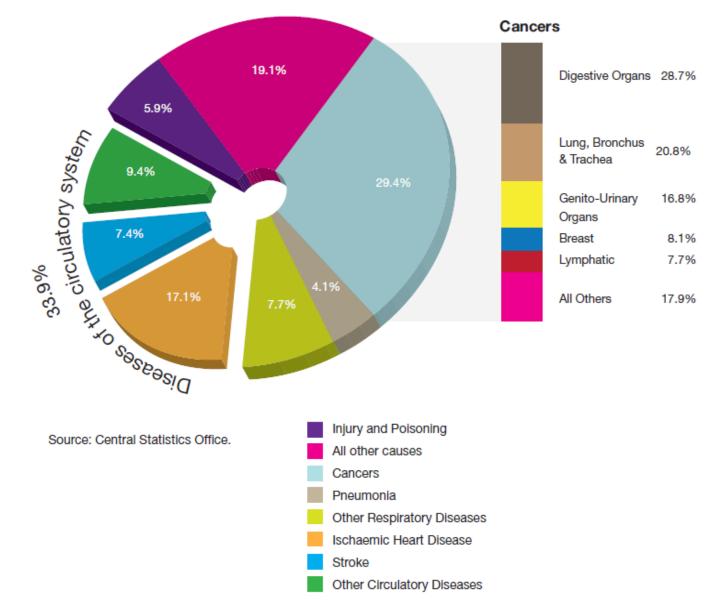
- Life expectancy in the 1950's
  - 64.5 for men and 67.1 for women

- Life expectancy in 2005 2007
  - 76.8 for men and 81.6 for women

## **Our Ageing Population**

- Each year the total number of people over the age of 65 grows by 20,000
- The population aged over 65 will more than double over the next 30 years
- This will have major implications for health service planning and delivery

FIGURE 2.3
DEATHS BY PRINCIPAL CAUSES, PERCENTAGE DISTRIBUTION, 2010



# Decrease in Health Budget

2002

€8.4billion

2009

2010

2011

2012

€15.52 billion

€14.82 billion

€14.08 billion

€13.54 billion

# Programme for Government

#### 3. Equal Care

A Single Tier UHI System

#### 2. Higher Quality Care

Clinically Lead, Rigorous Performance Management

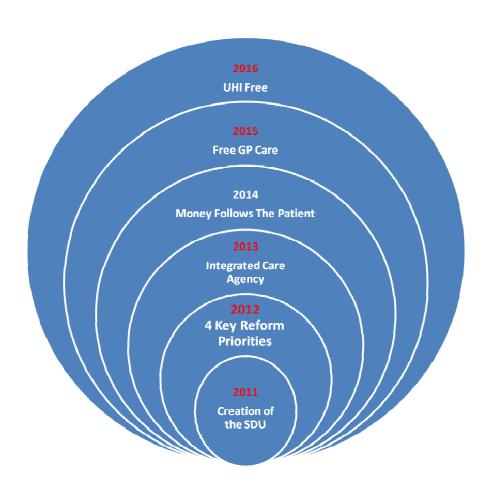
#### 1. A New Model of Care

Treatment at the Lowest Level of Complexity that is Safe, Timely, Efficient and as Close to Home As Possible

# Change within the Health System

- The Minister's goal is to devolve as much power as possible within the health system
- A shift the focus from:
  - Inputs to Outcomes
  - The Centre to the Local
  - The System to the Patient

### **Timeline for Reform**



#### **Reform Priorities**

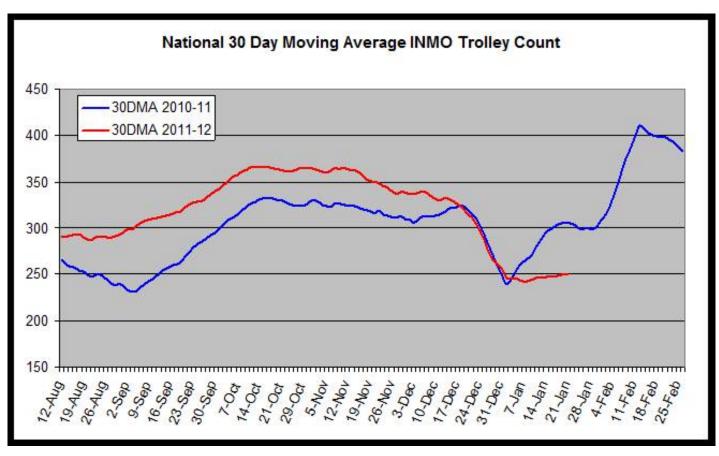
 Deliver on Special Delivery Unit's agenda

Overhaul System of Governance

Change the Model of Care

Reform the Health Insurance Model

# **Special Delivery Unit – Hospital Waiting Times**



### Targets for 2012

- No one should wait longer than 9 months for elective treatment in hospitals (down from 12)
- No one should be longer than 9 hours in an Emergency Department
  - 95% should be no longer than 6 hours
- By 31 December 2012 or earlier

#### What about the HSE?

- 7 New Directorates
  - Hospitals, Primary Care, Social Care, Mental Health, Children, Public Health, Shared Services
- Directors will have a crucial job of work
  - To prepare the system for move to the *Integrated Care Agency* in 2013

### **Change in Structures**

- Continue the move to hospital groups across the country
  - This is already happening in the West
- The Clinical Care Programmes will move to the Department of Health
  - To ensure linkage between the SDU and the Clinical Programmes
- The National Cancer Control Programme will come back in with the Clinical Programmes

## **Model of Primary Care**

- First phase of Free GP Care
  - For people who receive medicines under Long Term Illness scheme
- First phase of Chronic Disease management for diabetes
- Cut the cost of medicines
  - For consumers and the State

### **Social Care**

- Mental Health
  - Implement "Vision for Change"
  - Shift to Primary Care
- Older People
  - A whole of Government approach
  - Shift to Home Care
- Disability
  - Value for Money reform
  - Shift to Personalised Budgets

# Changes in Insurance Model

 Full Risk Equalisation will be introduced

 Work with the Insurance Companies to significantly reduce costs

 The unbalanced market for insurance will be addressed

# Why Change?

- Reform is working: We can see evidence of progress - Haemophilia Model, National Cancer Control Programme
- Change, not for its own sake, but to give people a fairer, higher quality, more efficient health system

# Thank You