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End of Healthcare Apartheid in Ireland

One of the tragedies of the Celtic Tiger era was that the Government did not use the prosperity of those years to transform our health services on the basis of equality and excellence. Yes, spending on health was greatly increased. But much of this was to catch up and repair the damage caused by the cuts of the 1980s. In 2004 the OECD reported that Irish public spending on health was one of the lowest of any developed country, in spite of massive increases in health expenditure since the late 1990s.

We are now facing a devastating recession with health services that are still organised on the basis of an inequitable and inefficient, two-tier, public-private system. If this does not change then recession will greatly increase that inequity and inefficiency. Those with wealth will be looked after by the private system which the Government has built up while the majority dependent on the public health system will face longer waiting times, fewer hospital beds, staff cuts, closure of local hospitals and reduction of services in the community.

The recession will compound this. More people are becoming entitled to the medical card with diminishing State resources to fund them. The current system will become unsustainable.

Sinn Féin has a different vision. We believe that healthcare is a fundamental human right. We need to ensure that everyone has equal access to health

services that are both equitable and efficient. We also need to ensure that factors which lead to poor health for many people, including social and economic inequality, are tackled effectively.

Studies in Ireland and worldwide have shown that those with less wealth are far more likely to suffer illness and premature death than more privileged sections of society. Therefore Sinn Féin views health not just as an absence of illness but, in line with the World Health Organisation, as a “state of complete physical, mental and social well-being” and the enjoyment of health “is one of the fundamental rights of every human being without distinction”.

We translate our vision for the health services into three key proposals:

- A new universal public health system for Ireland that provides care to all free at the point of delivery, on the basis of need alone, and funded from general, fair and progressive taxation.
- Fundamental re-orientation of the health system to adopt a central focus on prevention, health promotion and primary care (including mental health care), and on ultimately eliminating the underlying social and structural causes of ill-health and premature death, such as poverty and inequality.
- Immediate establishment of a Health Funding Commission to report on the projected costs of the transition to an all-Ireland system of universal provision, taking into account all current health spending, including health insurance.

How would we begin the process of change? Real savings need to be identified. We need to distinguish real savings from thoughtless and savage cutbacks that diminish front-line services and end up costing far more in the long run, both in terms of people’s health and demands on State funds.

Our two-tier health system is wasting money. The Irish tax payer is subsidising private health companies to the tune of hundreds of millions of euros. The

National Treatment Purchase Fund (NTPF) is directly subsidising private healthcare, at a cost of € 92 million. Not only does the NTPF cost more per patient than public hospitals, it also gives hospital consultants perverse incentives to keep patients on public waiting lists until they are transferred to private practice.

More wastage is evident in the treatment of private patients in public beds. The Irish Nurses Organisation has stated that private patients are being subsidised by the tax payer to the tune of €113 million per year in public hospitals¹. Over half of the hospital beds in the Dublin Maternity Hospitals are private for-profit beds. It would be more efficient to reinvest the €100 million spent on the NTPF in public hospital services.

We would end all subsidies of private practice in public hospitals and charge practitioners for the use of public equipment and staff, making savings of €113 million².

Irish hospital consultants earn €250,000 per annum on the basis of a 33-hour week. The cap of 25% of the time spent by consultants in private practice is not monitored. We would propose a “clock-in” system for hospital consultants to ensure they spend their 33-hour week in public hospitals.

The state is promoting private healthcare through tax exemptions for private for-profit hospitals, such as the co-location scheme, have allowed investors to avoid large tax bills on their rental income. Tax exemptions should go and the co-location scheme should be scrapped. The savings should go back into the public hospital system.

¹ Irish Times 12 December 2008

² INU, Irish Times 18 December

In 2006, the drugs bill exceeded €1.84 billion or approximately 15% of total healthcare expenditure in this State. The cost of drugs is far higher in Ireland than in most other European countries.

I want to pay tribute to all who are campaigning for decent healthcare, especially those healthcare workers who have dared to speak out. All those working in our public health services deserve our gratitude. The vast majority of them provide excellent care, in spite of the huge difficulties they face because of the inequities and the inefficiencies fostered by successive governments.

Sinn Féin would like to be part of an all-party agreement on health to create of a single-tier, universal healthcare system, free at the point of delivery, with equal access for all based on need and state funded. We need a wider coalition for equality and excellence in our health services, to build up our public health system and harness the commitment and dedication of health services workers, communities, and patients groups and everyone in our society concerned with building better and fairer health services.

We have a positive message, there can be healthcare justice. We can have equality and excellence. We look forward to continuing this important dialogue and working together to achieve this aim.

Go raibh maith agaibh.