



Oifig an Straitéis Chúraim Phríomha agus an Phleanála
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18th October 2019

Deputy Bernard J. Durkan
Dáil Eireann,
Leinster House,
Kildare Street,
Dublin 2.

PQ Ref. No. 41524/19 -To ask the Minister for Health the extent to which modern health centres are available or are proposed to become available in all population centres nationally; and if he will make a statement on the matter – Bernard J. Durkan

Dear Deputy Durkan,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question (Reference 41524/19), which you submitted to the Minister for Health for response.

Primary care involves the promotion of healthy lifestyles and keeping people well, providing health care at the lowest level of complexity and as close as possible to where people live, and providing person-centred care based on assessed need and through multidisciplinary working. The primary care setting is considered the appropriate setting to meet the majority of health and social services needs with the potential to prevent development of conditions that might later require hospitalisation, and facilitation of earlier discharge from hospital.

Since 2001, a key strategic priority of the Department of Health (the Department) has been the strengthening of the primary care system in Ireland in order to provide;

- a system that is the first and ongoing point of contact for people within the health care system
- integrated, inter-disciplinary, high quality, team-based and user-friendly services
- enhanced capacity in the areas of disease prevention, rehabilitation and personal social services.

The model of primary care envisaged in the strategy included provision of a national network of primary care centres (PCCs) each accommodating one or more primary care teams (PCTs) supported by a wider network of health and social care professionals, collectively providing services to meet the needs of the local population.



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Services provided include health promotion, screening for disease, assessment, diagnosis, treatment and rehabilitation, and personal and social services. Primary care services available within PCCs are provided in the main by both contracted providers, such as GPs, and employees of the Health Service Executive (HSE).

The Department's stated strategic objective is to develop a national network of PCCs in around 350 locations, to accommodate just under 500 PCTs and extended primary care networks.

The total number of operating PCCs is 128 at the end of September 2019 which includes 2 PCCs which became operational in 2019 to date. A further 3 PCCs are expected to become operational in Q4 2019 bringing the total number of operating PCCs at the end of December 2019 to 131.

The Department has committed to consultation with the HSE and the Department of Public Expenditure and Reform to set an indicative timeline for the delivery of the PCC network. This will be carried out in full recognition of the fact that market factors exist that are beyond the control of the Department and may impact on anticipated delivery schedules.

The HSE has availed of a range of methods for the delivery of primary care centres.

- **Lease agreement** — the HSE enters into fixed term leases with developers for locations selected for the provision of PCCs. The developer provides the completed facility and has responsibility for maintaining it. The HSE pays annual rent and service charges and operates the facility.
- **Public Private Partnership (PPP)** — this is an agreement between the public and private sectors for the provision of infrastructure and/or services. A private sector company funds the construction, fit-out and equipping of the PCC with the exception of some specialist equipment. The HSE remunerates the PPP company in the form of periodic unitary payments.
- **HSE direct build** — PCCs built and owned by the HSE and funded from the HSE's annual capital allocation. The HSE will undertake an overarching review relating to PCCs that will encompass an update of the rankings of the target locations for PCCs and a determination of how further delivery is to be prioritised.

I trust this information is of assistance to you.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'G. Crowley'.

Geraldine Crowley,
Assistant National Director,
Primary Care Strategy and Planning