

### **That Dáil Éireann:**

Recalls that the National Cancer Strategy 2017-2026, the third such strategy, was launched in 2017 with a then-estimated cost of €140 million additional current expenditure by 2026;

### **Notes that:**

- The Government has only properly funded the National Cancer Strategy in two of the last five years and has not revised the funding requirements in light of inflation, unpredicted demographic changes, or the impact of the Covid-19 pandemic;
- Only one of the 23 objectives of the National Cancer Strategy has been met according to the latest progress report;
- According to the European Cancer Inequalities Registry, Ireland has the second highest rate of cancer incidence in Europe and is ranked mid-table of the 27 EU member states for cancer survival, and performs poorly in comparison to western European peers in terms of uptake of cancer screening programmes;

### **Further notes:**

- Remarks made to the Joint Oireachtas Committee on Health on the April 10th, 2024, by the Chief Executive Officer of the Irish Cancer Society, Ms Averil Power that:
  - “Inadequate Government funding and the impact of Covid-19 on cancer diagnosis and treatment means that we are no longer confident that will be the case. In fact, we are concerned that Ireland's cancer outcomes may have stagnated or even disimproved since the strategy was published.”
  - “In some areas, things have significantly disimproved since 2017. Waiting times for radiotherapy have increased, with expensive equipment lying idle in several hospitals due to an ongoing shortage of radiation therapists. Inequality between public and private patients is growing, particularly in terms of access to new medicines.”
  - “Our key recommendation to the committee today is a call for multiannual funding. One cannot plan for workforce, for capital or for anything properly without multi-annual funding” and
- Remarks made to the Joint Oireachtas Committee on Health on April 10th, 2024, by the Chair of the National Cancer Strategy Steering Group Professor M. John Kennedy, when asked why life-saving equipment was left lying idle due to the shortage of radiation therapists, that:
  - “The basic answer is we are not training enough of them because we have not reacted to the increased requirement over the past several years. That is true in many areas of infrastructure in the health system. It is the predominant reason;”
  - “Owing to the difficulties we have with unscheduled care, by which I mean sick people coming to the ED, time-critical surgeries are continually delayed because we cannot get patients into the hospital for them ... because the hospital was overwhelmed by urgent care.”
- Responses given to the Joint Oireachtas Committee on Health on April 10th,

2024, by the National Director of the National Cancer Control Programme Professor Risteárd Ó Laoide confirming that the Health Service Executive sought €20 million in funding for the National Cancer Strategy in 2024 but “did not get anything for 2024”;

-Considers that the failure to properly fund the strategy, to properly plan and grow the workforce, and to resolve hospital overcrowding are the consequences of conscious political decisions made by this and previous Governments;

-Condemns the Taoiseach Simon Harris for his failure as Minister for Health and as a member of this Government to properly fund the National Cancer Strategy, and as Minister for Further and Higher Education to put in place a workforce plan to address staffing deficits in the health service; and

**Calls on the Government to:**

- Immediately revise the health budget for 2024 to provide the funding needed to deliver the National Cancer Strategy.

- Commit to full multi-annual funding of the National Cancer Strategy;

- End the recruitment embargo across the Health Service Executive;

- Fund the 1500 acute hospital beds which are needed to reduce overcrowding; and

- Implement a medium- and long-term workforce plan for the health service to address staffing deficits, including in cancer services