



**An Bille Sláinte (Infhaighteacht Seirbhísí Lia-
Chleachtóirí Ginearálta), 2025**
Health (Availability of General Practitioner Services) Bill
2025

Meabhrán Míniúcháin
Explanatory Memorandum



**AN BILLE SLÁINTE (INFHAIGHTEACHT SEIRBHÍSÍ LIA-
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**HEALTH (AVAILABILITY OF GENERAL PRACTITIONER
SERVICES) BILL 2025**

EXPLANATORY MEMORANDUM

Purpose of the Bill

The HSE makes available free of charge a general practitioner medical and surgical service under section 54 of the Health Act 1970. Broadly, access to primary care services is means-tested and is made available throughout the State to persons who are unable without undue hardship to arrange such services for themselves and their dependants. Although it is not fixed by law, it seems that full eligibility for health services will usually extend to about 40% of the population. As well as the full medical card issued to persons with full eligibility, legislation also provides for a more restricted GP visit card.

Primary care services are not generally provided directly by the HSE but rather through general practitioners (GPs) who remain self-employed, are free to establish practices at places of their own choosing and are free to treat private as well as public patients. The terms and conditions pursuant to which primary care services are provided are governed by a common contract.

The result is that State-funded services operate as an adjunct to a service that is already in place and provided by private practitioners. The HSE is a service funder rather than a service provider. The State does not regulate either the maximum number of GPs that can, or the minimum number that must, set up in a particular town or community. The HSE cannot direct service providers to set up practice in particular areas, as it does not have a statutory role in relation either to increasing the overall number of GPs practicing in the State or in improving access to primary care services in local areas. And so local access to public services, notwithstanding a statutory entitlement, may be restricted or non-existent due to a shortage in GPs in that locality.

On foot of changes made by the Health Service Executive (Governance) Act 2013, there is provision for information gathering to enable an overall health needs assessment for the State and for populations within the State. The Minister for Health may direct the HSE to provide reports, information and statistics on the effects on the accessibility and effectiveness of healthcare strategies of:

- changes to national or regional distribution of population
- demographic profile of population
- lifestyle factors affecting health

- patterns of morbidity across population
- patterns of mortality across population
- social determinants of health status.

But there is no statutory obligation to apply the findings of these reports in shaping service provision so as to improve the level and quality of services made available by the HSE.

The purpose of this Bill is to provide for a direct statutory link between the HSE's assessment of the level of need for primary care services in specific areas and the level of service provided in response by the HSE in those areas.

Provisions of the Bill

Section 1 of the Bill is headed "Objective in relation to availability of general practitioner services". The section creates a new statutory objective for the HSE: in performing its functions, the HSE must have regard to the objective of securing, in so far as practicable and subject to the resources available to it, that the primary care service made available by it is accessible throughout the State on a fair and equitable basis, in a manner that has regard to the nature and extent of local need for those services.

For that purpose, the HSE must have regard to all information available to it relating to the distribution of the population of the State, the distribution of general practitioner medical and surgical services in the State and the likely impact on local need of social determinants of health status.

Further, the HSE must include within its corporate plan, submitted to the Minister for Health for approval under section 29 of the Health Act 2004—

- an assessment of progress towards or achievement of this objective within the period of the previous corporate plan,
- if in its opinion the objective has not yet been achieved, the strategies proposed by the HSE for achieving the objective within the period of the new plan, and
- the manner in which it proposes to measure progress towards and achievement of the objective.

It is provided that the HSE, in performing these functions, must ensure that the cost can be met from within the resources available to it and on the presumption that its budget will not, by reason only of the passing of this Act, be increased.

Section 2 provides in standard form for the short title, collective citation and construction of the Bill.

Marie Sherlock TD,
Iúil, 2025.