

(Second Supplementary Order Paper)

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DÁIL ÉIREANN

Dé Máirt, 8 Meán Fómhair, 2020
Tuesday, 8th September, 2020

2 p.m.

GNÓ COMHALTAÍ PRÍOBHÁIDEACHA
PRIVATE MEMBERS' BUSINESS

Fógra i dtaobh Leasú ar Thairiscint: Notice of Amendment to Motion

21.“That Dáil Éireann:

notes that:

- this State has the third highest rate of cancer in the world with more than 43,000 cancers diagnosed on an annual basis;
- the importance of catching cancer early is indisputable;
- fewer than 100,000 people were screened in the first half of this year compared to 500,000 in all of 2019, with the National Screening Service saying that they are ‘unable to screen people at the same numbers’ as they did pre-Covid-19; and
- medical oncology services are operating at about 70 per cent with cancer surgeons treating a much-reduced number of patients than usual;

agrees that:

- before Covid-19, crucial targets in the National Cancer Strategy were missed relating to timely access to diagnostics, surgery, radiotherapy and screening;
- there have been significant delays in cancer screening at CervicalCheck, BreastCheck and BowelScreen with the phased resumption of services varying depending on the screening programme and capacity; and
- the postponement of screening and lack of clarity is causing huge additional anxiety for patients and their families while also contributing to growing waiting lists for cancer tests and treatment; and

calls for:

- an immediate review of the National Cancer Strategy to address capacity deficiencies and to lay out a timeline for catch-up on new and delayed cancer care with targets;
- the reversal of historic underinvestment in cancer care to meet targets set under the National Cancer Strategy; and
- additional funding to be made available for capacity protection measures to deliver cancer care in a Covid-19 environment.” — *David Cullinane, Chris Andrews, John Brady, Martin Browne, Pat Buckley, Matt Carthy, Sorca Clarke, Rose Conway-*

P.T.O.

Walsh, Réada Cronin, Seán Crowe, Pa Daly, Pearse Doherty, Paul Donnelly, Dessie Ellis, Mairéad Farrell, Kathleen Funchion, Thomas Gould, Johnny Guirke, Martin Kenny, Claire Kerrane, Pádraig Mac Lochlainn, Mary Lou McDonald, Denise Mitchell, Imelda Munster, Johnny Mythen, Eoin Ó Broin, Donnchadh Ó Laoghaire, Ruairí Ó Murchú, Louise O'Reilly, Darren O'Rourke, Aengus Ó Snodaigh, Maurice Quinlivan, Patricia Ryan, Brian Stanley, Pauline Tully, Mark Ward, Violet-Anne Wynne.

Leasú:

Amendment:

1. To delete all words after “Dáil Éireann” and substitute the following:

“notes:

- that the National Cancer Registry of Ireland records that over 23,000 people are diagnosed with cancer annually, with a further 20,000 people diagnosed with the common but rarely fatal non-melanoma skin cancer;
- the lack of clear comparable data on incidence across jurisdictions given variations in the nature of data collection and registration;
- that survival for Irish cancer patients continues to improve according to the National Cancer Registry’s Annual Report, with an estimated 180,000 people living after a diagnosis of invasive cancer other than non-melanoma skin cancer at the end of 2017;
- a 15 per cent improvement in breast cancer survival over the twenty years to 2015;
- that in a report by the International Agency for Research on Cancer (IARC) on cancer survival rates across seven high-income countries, Ireland showed the greatest improvement in survival for stomach and oesophageal cancers and the second highest improvement for rectal and ovarian cancers;
- the Government’s commitment to continued improvement in cancer outcomes, through research, prevention, early diagnosis and high-quality safe care;
- the progress made in implementation to date of the National Cancer Strategy published in 2017 including:
 - legislation on standardised retail packaging for tobacco;
 - the passage of the Public Health (Alcohol) Act 2018 in October 2018;
 - the development and launch of Ireland’s first National Skin Cancer Prevention Plan in 2019;
 - the commencement of the roll-out of the National Cancer Information System which was launched in November 2019;
 - the appointment of National Clinical Leads for Psycho-Oncology, cancer nursing, children, adolescents/young adults to provide leadership and focus on planning, development and implementation of key areas of the National Cancer Strategy;
 - the publication and launch of the National Clinical Guidelines for Ovarian and Oesophageal Cancer in August 2019 to help healthcare professionals with the diagnosis, staging and treatment of patients and to standardise practice;
 - the delivery and expansion of the Cancer Thriving and Surviving Programme in acute and community settings to provide patients with a programme to help with the transition from active treatment to living well

- with and beyond cancer;
- the publication of the National Cancer Survivorship Needs Assessment in August 2019, which will underpin improvements in meeting the needs of the increasing number of cancer survivors in Ireland;
- the establishment of a National Cancer Research Group in June 2019; and
- the construction and opening of a new radiation oncology facility in Cork in 2019, with work commencing on a new facility in Galway in 2020;
- the establishment and continued work of the Cancer Patient Advisory Committee, the role of which is to ensure the patient’s voice is heard, and to provide input into the development of programmes for patients with cancer;
- the introduction of the Human papillomavirus (HPV) vaccine for both boys and girls in their first year of secondary school, as a key element in prevention of cervical cancer and other related cancers;
- that Ireland has three advanced cancer screening programmes, namely BreastCheck, CervicalCheck and BowelScreen which have evolved and expanded over the years since their establishment, in line with international best practice; and
- that the CervicalCheck Screening Programme transitioned to HPV cervical screening on 30th March of this year which means that any test taken after this date is a HPV cervical screening test with follow-up cytology if required;

recognises:

- the unavoidable impact of the Covid-19 pandemic on cancer services, and the significant worry that it is causing cancer patients, their family and friends;
- that the National Action Plan on Covid-19, published on 16th March, identified the protection of cancer care as a key priority;
- the significant additional funding provided to the health services in 2020 to manage the response to Covid-19 and to maintain time-critical essential services including cancer services;
- that cancer services continued throughout recent months, albeit at reduced capacity, with the significant focus on maintaining these critical services through the use of:
 - national agreed guidelines for the continued provision of cancer treatment during Covid-19;
 - the use of private hospital facilities to maintain urgent cancer surgery and facilitate medical oncology in some instances;
 - initiatives such as relocation of day wards as necessary for medical oncology;
 - continuation of radiation oncology with provisions for physical distancing in place;
 - recruitment of acute oncology clinical nurse specialists to facilitate hospital avoidance where appropriate and support timely, streamlined access for cancer patients to services;
 - virtual/telephone clinics where possible; and
 - provision of support to cancer patients and their families through the Together for Cancer Concern, a joint initiative between the Irish Cancer Society and the Health Service Executive (HSE) National Cancer Control

Programme;

- the initial public reticence to attend for cancer services due to fear of infection and efforts to address this including through public advertising campaigns, and the collaborative approach taken between the National Cancer Control Programme (NCCP) and the Irish Cancer Society in that regard;
- that in light of the unprecedented public health challenges posed by the Covid-19 global pandemic in March 2020, the National Screening Service's (NSS) four national screening programmes - BreastCheck, CervicalCheck, BowelScreen and Diabetic RetinaScreen were paused in March; and
- that during the pause clinical staff continued to work within the screening programmes and people who were in the system at the time of pause have continued to be treated as hospital resources allowed and women availing of BreastCheck screening services who had been screened continued to have their assessments completed and their treatment plans mapped out by the service, surgeries continued to be scheduled and completed, and with regard to CervicalCheck, colposcopy assessments and follow-up treatments continued for women who had been screened before the pause; and

supports:

- the restart of a phased reintroduction of screening services;
- the NSS to continue to prioritise the safe and effective resumption of the screening programmes, with regard to addressing the postponement of screening which has already occurred for people affected during 2020;
- the NSS in taking measures to protect both participants and staff and in monitoring the delivery of screening to ensure their continuing safety in order to ensure a safe resumption and delivery of screening services in the context of the Covid-19 pandemic;
- the priority focus now, in the context of the next phase of the pandemic, of facilitating cancer services to return to pre-Covid-19 levels, and in a safe and effective way in the context of overall HSE planning on increasing delivery of non-Covid-19 services; and
- the full implementation of the widely supported and evidence based National Cancer Strategy 2017 – 2026, as is committed to in the Programme for Government and in line with Sláintecare to underpin continued improvement in survival for cancer patients.” — *An tAire Sláinte*.