



**BRIEFING NOTE:
REDRESS FOR WOMEN RESIDENT IN CERTAIN INSTITUTIONS BILL 2014**

MEDICAL

Completely contrary to Judge Quirke’s recommendation, the Redress for Women Resident in Certain Institutions Bill 2014 seems to provide **little more than the regular medical card. Judge Quirke found that 91% of the Magdalene women already have a medical / GP visit card.**¹

Judge Quirke’s FIRST recommendation was that women who signed up to the Magdalene scheme should receive:

- a CARD
- entitling them to “the full range of services currently enjoyed by holders of the Health (Amendment) Act 1996 Card (“the HAA card”)”.

1ST RECOMMENDATION

Magdalen women should have access to the full range of services currently enjoyed by holders of the Health (Amendment) Act 1996 Card (“the HAA card”).

As an integral part of the ex gratia Scheme a card entitling its holder to health services equivalent to those provided to the holder of a HAA card should be given to each of the women who were admitted to and worked in a designated Magdalen laundry.

Details of the range, extent and diversity of the community services to be provided to the Magdalen women are described within Appendix G.

Primary legislation similar to the Health (Amendment) Act 1996 or a statutory amendment to that Act is required in order to implement this recommendation. (A draft Heads of Bill is provided within Appendix E).

See page 7, Report of the Magdalen Commission:

<http://www.justice.ie/en/JELR/2.%20THE%20MAGDALEN%20COMMISSION%20REPORT.pdf/Files/2.%20THE%20MAGDALEN%20COMMISSION%20REPORT.pdf>

¹ See Report of the Magdalen Commission, page 34,
<http://www.justice.ie/en/JELR/2.%20THE%20MAGDALEN%20COMMISSION%20REPORT.pdf/Files/2.%20THE%20MAGDALEN%20COMMISSION%20REPORT.pdf>

The women had a **legitimate expectation of receiving the following services** (see Appendix G of Judge Quirke’s report), **which are omitted from the Bill**.

The women have signed legal waivers agreeing not to sue the State on the basis that the government agreed in public and on the Dáil record² to implement Judge Quirke’s recommendations in full. If the government reneges on its promise to implement Judge Quirke’s recommendations in full, JFM Research believes that the women’s waivers will be rendered legally unenforceable.

All of the following services are available to HAA cardholders. None of these services are provided for in the Bill:

1. Private GP services.
2. Any and all prescribed drugs, high tech drugs, medicines, aids and appliances (rather than being restricted to the Reimbursement List within the meaning of the Health (Pricing and Supply of Medical Goods) Act 2013, as stated in the Bill).
3. Any and all chiropody/podiatry services from any qualified (including private) chiropodist/podiatrist, without the need for a GP’s referral.
4. Complementary therapies, including massage, reflexology, acupuncture, aromatherapy or hydrotherapy, once referred by a GP.
5. Counselling, “including psychological and psychotherapy services”, from any professionally accredited counsellor, available to the woman and her immediate relatives, with “no restriction or limit on the number of sessions” attended. No GP’s referral is required under the HAA card scheme.
6. Comprehensive dental care, including access to private dentists not within the Dental Treatment Services Scheme (medical card scheme).
7. Audiology services from private practitioners where services are not available within the public health service.
8. Dedicated liaison officers, such as those available to HAA cardholders, to help obtain optimum home nursing and home support services.³
9. The enhanced ophthalmic services provided to HAA cardholders (rather than being restricted to medical card services).
10. Private physiotherapy services.

² Department of Justice press release, 26 June 2013, <http://www.justice.ie/en/JELR/Pages/PR13000256>

³ Page 35 of Judge Quirke’s report states:

“In addition to the HAA card, each of the HSE areas provides a person, described as a hepatitis C liaison officer, whose role it is to ensure that persons who are entitled to the HAA card receive the services to which they are entitled under the legislation. The liaison officer fulfils an important role and is responsible for coordinating and assisting the card holder to access primary care services only – these are the services provided outside of the hospital setting.

In practical terms every card holder is entitled to pick up the phone and to contact the liaison officer assigned to their area. The liaison officer is provided in order to ensure that card holders receive the services to which they are entitled and to provide advice and assistance in relation to those services.”

³<http://www.justice.ie/en/JELR/Redress%20for%20Women%20who%20were%20in%20Certain%20Institutions%20Bill%202014%20-%20General%20Scheme.pdf/Files/Redress%20for%20Women%20who%20were%20in%20Certain%20Institutions%20Bill%202014%20-%20General%20Scheme.pdf>

There is no commitment to provide a physical card to the Magdalene women, such as the HAA card.

The Private Secretary to the Minister for Health has written to state that “Judge Quirke did not recommend that a medical card would issue to participants of the *ex gratia* scheme” and that “It will be a matter for the HSE to decide on the practical arrangements to be put in place under this scheme.”

This is patently not the case. Judge Quirke recommended (page 7 of the Report of the Magdalen Commission):

“As an integral part of the ex gratia Scheme a card entitling its holder to health services equivalent to those provided to the holder of a HAA card should be given to each of the women who were admitted to and worked in a designated Magdalen laundry.”

CAPACITY

Contrary to Judge Quirke’s recommendation, the **Bill makes no provision whatsoever for the appointment of care representatives under the Nursing Homes Support Scheme Act 2009** so that applications may be made to the Magdalene restorative justice scheme on behalf of women lacking full capacity and their payments “secured, protected and used exclusively for their benefit” in a regulated manner with judicial oversight (see para 2.13, page 14 of Judge Quirke’s report).

A significant number of Magdalene women lack full capacity and many of these women are still institutionalised in nursing homes or hostels run by the religious orders responsible for the Magdalene Laundries. According to Judge Quirke, “**Representatives of the Religious Congregations responsible for the management of the Magdalen laundries have concerns as to the capacity of some of the women within their care who appear to be eligible for inclusion within the Scheme**”. Judge Quirke found that “a significant minority [of the women eligible for inclusion within the Scheme] will face difficulties managing their affairs” (see paras 6.01 and 6.02, page 49 of Judge Quirke’s report).

The Government needs to explain why it is not providing for the appointment of care representatives.

- Have appropriate assessments being carried out to determine which women have sufficient capacity to manage their affairs and which women do not?
- Has the Department of Justice accepted any application from a religious order and made a payment in respect of a woman who lacks full capacity but who is not already a ward of court or the subject of an enduring power of attorney?

PENSIONS

The government has also **failed to implement fully Judge Quirke's recommendation regarding the State Contributory Pension.**

The scheme provides the women with the State Contributory Pension backdated to August 2013 only. However, Judge Quirke's recommendation was that the women should be "put...in the position that they would have occupied had they acquired sufficient stamps to qualify for the State Contributory Pension" (see page 40 of Judge Quirke's report).

This recommendation should be read to require back-dating of pension payments to the women's retirement age.