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JFM Research says Magdalene healthcare provisions are a betrayal of survivors' trust

Magdalene survivors have provided Justice for Magdalenes Research (JFMR) with copies of the *Guide to Health Services under the Redress for Women Resident in Certain Institutions Act 2015*. The services outlined in this document merely replicate the ordinary medical card (which 90% of survivors already have). Once again, the government's action represents a serious betrayal of survivors' trust.

Survivors in contact with JFMR have expressed concern that the RWRCI Cards identify them as Magdalene survivors. This places additional hardship on women who do not wish to identify themselves as Magdalene survivors to their local GPs or pharmacists. Some women have indicated that they will now be forced to travel to avail of services under the scheme in order to conceal their past institutionalisation.

JFMR again asserts that the healthcare provisions as outlined in the RWRCI Guide do not provide Magdalene survivors with the same range of drugs and services made available to HAA cardholders. The 512 women who have signed up to the Magdalene scheme thus far have waived their right to take legal action against the State in the expectation that they will receive the full range of benefits and services recommended by Mr Justice Quirke and accepted in full by the government.

The deficiencies in services under the RWRCI Card can be summarised as follows:

- Drugs, medicines and appliances are limited to the Medical Card Reimbursement List
- Dental, ophthalmic and aural services are limited to Medical Card standard
- No complementary therapies
- Counselling services require a GP referral
- No counselling for family members
- No complaints or appeals mechanism
- No provision for women living overseas

In January of this year JFMR called on the HSE to provide survivors with a comprehensive guide to their entitlements under the scheme. Six months later, the HSE has sent survivors a five-page document which is an insult when compared to the comprehensive 48-page guide provided to HAA cardholders (**a detailed comparison is available in the Notes to Editors**).

Magdalene survivors living overseas remain low on the list of government priorities. In this regard the government has repeatedly said it is 'examining the practical arrangements' for the provision of health services to women living abroad, however no timeframe has been given as to when this 'administrative process' will be in place. The needs of elderly survivors who are part of our Diaspora appear to have dropped off the State's agenda. This is particularly the case for survivors based outside of Ireland and the UK.

JFMR calls on the government to introduce emergency legislation to bring the healthcare provisions under the *Redress for Women Resident in Certain Institutions Act 2015* in line with those provided under the *Health (Amendment) Act 1996*.

Ends.

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Notes to editors

Comparison between the services outlined in the RWRCI Guide and the HAA Card Guide*

*available at:

http://www.hse.ie/eng/services/list/1/schemes/hepc/Information_Guide_to_Services_Provided_with_the_HAA_Card

Summary of deficiencies in services under the RWRCI Card

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<p><i>Guide to Health Services under the Redress for Women Resident in Certain Institutions Act 2015</i></p> <p>(RWCI Card)</p>	<p><i>Information Guide to Primary Care and Hospital Services For persons who contracted Hepatitis C through administration within the State of contaminated blood and blood products</i></p> <p>(HAA Card)</p>
<p>General Practitioner Service This includes standard attendances for routine general practitioner services at a GP chosen by the RWRCI cardholder from the list of GPs participating in the General Medical Services (GMS) scheme or a non-GMS registered medical practitioner providing general practitioner services.</p>	<p>General Practitioner Services You are entitled to the following:</p> <ul style="list-style-type: none"> • To attend any registered GP of your choice. • To change GP if you wish (for health reasons it would be better to remain with a specific doctor who would have the primary responsibility for providing services to you). • To all general practitioner (GP) medical and surgical services, in relation to all medical conditions, provided by a registered medical practitioner chosen by you. <p>This service is provided by:</p> <ul style="list-style-type: none"> • All registered GPs (Doctors who are registered with the Irish Medical Council). • GPs that are members of the Primary Care Reimbursement Services Scheme (PCRS). Doctors who are members of the PCRS scheme are reimbursed for the cardholders visit from the PCRS.
<p>Drugs, Medicines and Medical and Surgical Appliances The cardholder is eligible to receive free of charge all medicines, medical and surgical appliances that are currently reimbursed by the community drugs scheme. This eligibility refers to items prescribed by a clinical professional. Cardholders are not required to pay any prescription fees.</p>	<p>Pharmacy Services Prescribed Drugs and Medications HAA cardholders are entitled to any prescribed drugs and medicines without charge. In order to avail of this service you should present your HAA Card to the pharmacy of your choice along with the relevant prescription. The pharmacy you choose is at your discretion. You do not have to attend a local pharmacy, or attend the same pharmacist each time you get a prescription dispensed if you choose not to. Your</p>

prescribing physician, that is your GP, Consultant or Dentist should write your prescription on a private prescription and not on the prescriptions used for medical cardholders.

You will be required to sign a receipt for the items dispensed to allow the pharmacist to be paid. Pharmacists are paid through the PCRS (Primary Care Re-imburement Service) of the HSE. There are certain items which your GP/Consultant/Dentist may prescribe for you and which the pharmacist cannot get reimbursed for from the PCRS. In this case the pharmacist needs to get refunded by the HSE directly via your Hepatitis C Liaison Officer and they should not under any circumstances ask you to pay for these items yourself once they have been prescribed. It is a matter for the Pharmacist to address with the Liaison Officer and not with you.

All pharmacists have been advised that if there are any questions regarding the recoupment of individual items, these should be brought to the attention of either the PCRS, or to the relevant Hepatitis C Liaison Officer, and not to the HAA cardholder. Every effort will be made by the HSE and the PCRS to sort out any problems that might arise without recourse to the individual cardholder if at all possible.

What Pharmacy products are not covered?

Cosmetic type toiletries (e.g. perfume etc) are not covered under the HAA card, this does not include creams and lotions used for certain skin conditions, which may be prescribed by your GP or Consultant in certain circumstances. Your Hepatitis C Liaison Officer can advise you on whether or not certain items are available to you on your HAA card and you should discuss any queries with them in the first instance.

High Tech Drugs

The High Tech Drugs Scheme provides for the dispensing of High Tech Medicines through Community Pharmacies. These medicines will generally only be prescribed or initiated by a hospital consultant. Examples of high tech medicines are: anti-rejection drugs for transplant patients, chemotherapy and growth hormones.

If you are prescribed a high tech medicine, the hospital will ask you to indicate the community pharmacy from which you wish to obtain these medicines. This does not have to be your local pharmacy or the pharmacy that you normally attend.

However, it is a good idea to get all your medicines from the one pharmacy so that your community pharmacist will be in a position to monitor your overall drug therapy having regard to other medicines that you may also be taking.

	<p>If you wish to change your nominated pharmacy, you will need to notify your local HSE high tech liaison officer of your new pharmacy. Details of your local liaison officer will be issued to you when you are prescribed the high tech medicine initially.</p> <p>Aids and Appliances You are entitled to receive any necessary aids and appliances under your HAA card, regardless of whether they are required because of your Hepatitis C, or for another condition. These must be prescribed by your GP, Consultant, Occupational Therapist or Public Health Nurse/Clinical Nurse Co-ordinator.</p> <p>What types of aids and appliances am I entitled to? There are many different aids and appliances used nowadays by people to assist them inside and outside their home with mobility, movement etc. These include walking sticks and frames, wheelchairs, grab rails, shower seats, bath and bed hoists etc. Depending on your need, the GP/Consultant/ Occupational Therapist will decide what suits you best. Training may be required in the use of certain appliances and in most cases this will be arranged by the Occupational Therapist providing the appliance.</p> <p>In some cases, medical and surgical aids and appliances might be stocked by pharmacies and can be obtained on foot of a prescription in the same way as drugs and medicines. However, most aids and appliances are specialist in nature and are not routinely available from local pharmacies. In many cases such items can be obtained from the HSE's community services or they can order the item for you. In case of difficulties, the Hepatitis C Liaison Officer will assist.</p> <p>Certain persons may also be entitled to avail of a grant through the Disabled Persons Grant Scheme which is administered by Local Authorities and this may assist with house modifications etc. Your Local Authority will be able to provide you with further information on this scheme.</p>
<p>Dental Services Service [sic] under the Dental Treatment Service Scheme include:</p> <ul style="list-style-type: none"> • A free oral examination every calendar year • Two fillings every calendar year • All extractions • Free emergency dental treatment for relief of pain and sepsis • Dentures (every 5 years, if clinically necessary) • Additional fillings, prophylaxis, 	<p>Dental Services HAA Cardholders are entitled to all</p> <ul style="list-style-type: none"> • necessary routine and emergency dental treatment • full denture treatment and appliances <p>Dental treatments will be provided by dentists who participate in the Dental Treatment Services Scheme (D.T.S.S.) operated by the Health Service Executive. (A list of participating dentists is given at the back of this Guide or from your Liaison Officer). If the dentist of your choice participates in the D.T.S.S. s/he must provide you with services at the agreed D.T.S.S. rates.</p>

<p>other more complex dental treatments if clinically indicated</p>	<p>How do I avail of services from a participating dentist? Once you have checked with your Liaison Officer that your chosen dentist is on the list of dentists participating in the DTSS scheme, you may begin attending them for treatment and then simply present your HAA card to them as payment.</p> <p>Note: Before you leave the dentist's surgery, you will be asked to sign a form that will enable the dentist to be paid for the consultation.</p> <p>If you require a prescription - your dentist should write your prescriptions on a private prescription form (not on the form used for medical card prescriptions). You are then entitled to have these prescriptions dispensed without charge on production of your HAA card by a pharmacist. (please see page 33 for further details on pharmacy services)</p> <p>Can I attend a Dentist who does not participate in the Scheme? If your dentist does not participate in the D.T.S.S. you can continue routine treatment with this dentist, provided you have the prior approval of the Hepatitis C Liaison Officer. Hepatitis C Liaison Officers will look sympathetically at such applications, particularly if you have been attending the dentist for some time or there is no D.T.S.S. participating dentist in your local area.</p>
<p>Ophthalmic Services This service includes:</p> <ul style="list-style-type: none"> • Free eye examination by an optometrist or an ophthalmologist • Any necessary standard spectacles (frames and lenses, once every two years, more often if required in certain medical circumstances). Lost or broken spectacles may be replaced within two years. 	<p>Ophthalmic Services Treatment and Appliances If you require eyesight tests and/or spectacles, you can attend any Ophthalmic Optician of your choice. You are entitled to any optical appliance or service that is clinically necessary. The HSE will reimburse the optician directly for the cost of the sight test and spectacle lenses (the rates are agreed annually between the HSE, Department of Health and Children and the Irish Association of Optometrists). Details on allowances you are entitled to are outlined in this section below.</p> <p>Prior approval from your Hepatitis C Liaison Officer is not required when you avail of ophthalmic services as forms are available in all opticians, which allows your HAA card number to be recorded. Your optician will ask you to sign the form when you receive a service or are dispensed a pair of spectacles, this will enable the optician to be paid for the goods or service. A list of contracted opticians in your area is available from your Liaison Officer.</p> <p>What am I entitled to?</p> <ul style="list-style-type: none"> • An eye examination without charge, whenever necessary. • Spectacles required for either distance or reading,

or both, with plastic lenses if desired. Bifocal and varifocal lenses are also covered.

- The full cost of any clinically necessary lenses.
- A grant of €90 towards the cost of the frames (from 1st July 2005)
- You are entitled to two pairs of new spectacles per prescription within any two-year period, unless of course you need to have them replaced more often because of a change in your prescription.

The cost of any lenses that are clinically necessary in your glasses are covered. In the case of varifocal lenses, a grant of €249 is available for a complete pair (including €90 towards the frames) which should cover the full cost. However, in the case where the complete cost of the varifocals is not covered by the €249 grant, the balance will have to be paid by you and then once you provide receipts to your Liaison Officer you will be reimbursed.

In the meantime the HSE are reviewing the situation with the Association of Optometrists Ireland, to agree a grant, which will cover the total cost of varifocals so that you will not need to be re-imbursed by your Liaison Officer

Any cardholder requiring a specialist medical eye examination must be referred by his/her GP or hepatologist to an appropriate consultant (this does not apply to straightforward sight tests), the optician may provide assistance with this in certain cases. The cardholder will receive priority treatment from the HSE's Community Ophthalmic Physician, or will receive their first appointment with a hospital consultant within two weeks. In some cases, an ophthalmologist might do specialist tests in conjunction with your eye examination.

Any special requirements not covered in this guide will be dealt with on the basis of individual need, and the Hepatitis C Liaison Officers will consider each case on its merits. Any problems which arise in the course of obtaining ophthalmic services can be resolved through the Hepatitis C Liaison Officer.

What if I wear contact lenses?

If you choose contact lenses (standard or disposable) instead of glasses, a grant is made towards the cost of dispensing and materials, and the cost of the examination (these costs include VAT). Where disposable lenses are chosen, the grant applies to the initial testing, dispensing and initial supply costs only, and not for further supplies or testing within a two year period, unless clinically necessary. In circumstances where it is clinically necessary for you to wear contact lenses instead of glasses, the cost of these lenses will be fully covered, provided you have a doctor's recommendation.

Aural Services

The HSE provides aural services, including hearing tests, hearing aids and repairs of hearing aids.

HEARING TESTS AND AIDS

Hearing tests and aids (sometimes referred to as aural services) are available to all HAA cardholders.

If you have difficulty with your hearing, you are advised to contact your GP or hepatologist in the first instance, so that any medical problems can be ruled out. If necessary, your hepatologist or GP might decide to refer you to an Ear, Nose and Throat (ENT) specialist. This referral as with all referrals to another specialty should be facilitated within 2 weeks and you should liaise with the Hepatitis C Liaison Nurse in your Liver Unit.

Alternatively, you might be referred to an audiology service for further investigation and treatment, or for the supply of a hearing aid. In general, this service is provided by the HSE's own professionals but, in some cases, it can be provided by private practitioners, who have an arrangement with the HSE or where the service required is not available within the public health service.

If any cardholder requires hearing tests and/or hearing aids/he should initially contact the Hepatitis C Liaison Officer for details of how to access the service, as arrangements for audiology services vary from region to region.

Home Nursing Service

The cardholder can access the home nursing service, which is provided by the HSE under section 60 of the Health Act 1970, (as amended). The nursing service, which is defined as care provided at home, can provide advice on matters relating to the cardholder's health and assist her if she is sick.

Home Nursing Service

(the Service specified in Section 60 of the Health Act, 1970)

Home nursing is available in respect of all conditions affecting the health of eligible persons, not just Hepatitis C.

In 2006 the HSE began developing a co-ordinated approach to home nursing services for HAA cardholders. This involved appointing a dedicated person within the greater Dublin area whose role is to establish and develop a specialist home nursing service to all HAA cardholders residing within the greater Dublin area with a view to extending the co-ordinating role nationally. It should be emphasised that requests and referrals for home nursing services as one of the HAA statutory entitlements will be facilitated throughout the country by the HSE.

All referrals for home nursing services should be facilitated through the office of the clinical nurse coordinator in the greater Dublin area and outside this area should be brought to the attention of the Hepatitis C Liaison Officer in the first instance. These referrals can come from the Liver Consultant in the relevant hepatology unit, the client themselves or their family, clients support group, liver transplant coordinator, GP, Public Health Nurse, social worker, Hepatitis C Liaison Officer etc. However, referrals from non-clinicians will be brought to the attention of the hepatology team so that a shared care plan can be developed in collaboration with the relevant health care professionals.

Following referral, the clinical nurse coordinator/designated HSE nurse will carry out an assessment in consultation with the client and family, from which it will be decided what type of care plan is required and fits in appropriately with the client's needs. The home care plan will be an individualised, client focused, flexible and easily accessible plan of care which meets the assessed needs at any given time of each client and which is reviewed on a regular basis to reflect changing needs. The aim of the careplan is to provide and support client focused care in the community to enable the individual to be cared for at home and to reduce unnecessary admissions to hospital. Critical to the success of the care plan will be the involvement of the client and where relevant, his/her family/carer, with the professionals in determining what supports are needed in each individual case.

From time to time it may arise that the circumstances of referral may not give ample time for a full care at home plan to be put in place immediately, and in such a case, services will be put in place as quickly as possible. An interim care plan may be put in place while a full needs assessment is taking place. Each home care plan will be

	<p>monitored by the clinical nurse coordinator or designated nurse with responsibility for arranging home nursing care and will be reviewed at regular intervals and as client's needs alter.</p> <p>As the establishment of this dedicated home nursing service is still in its development stage it is important that you link in with your Hepatitis C Liaison Officer and Hepatitis C Nurse Specialist to determine what is available to you in your area and as the service develops you will be notified of arrangements in place locally for you. Further details on the home nursing service available from Maria Breton, Clinical Nurse Co-ordinator Hepatitis C on 01 620 1803</p>
<p>Home Support Service The cardholder can access the home support service, which is provided by the HSE under section 61 of the Health Act 1970, (as amended). This service assists her to remain in her own home and provides assistance with personal care. The extend of support will be determined following an assessment by a registered medical practitioner or a registered nurse that the service is so required.</p>	<p>Home Support Service If as a result of your condition, you are having difficulty in carrying out normal household chores, you are entitled to avail of home support services. If your normal household responsibilities include cooking for a family, cleaning the family home or looking after children, the home support service can cover any or all of these duties. Access to home support services is available to both male and female HAA cardholders on production of supporting documentation from your general practitioner or consultant. Supporting documentation should be forwarded to the Hepatitis C Liaison Officer.</p> <p>The number of hours of home support to be provided is based on your needs and that of your family. The support provided should also be flexible, and fit in with your particular circumstances. For example, cardholders with school-going children might require additional support during the school holidays, or patients undergoing antiviral therapy might need more support during this time. Home support services can be provided at evenings, weekends or bank holidays in exceptional circumstances, but only if the</p>

nature of the support required means that it cannot be provided during normal working hours. Home support provided out of hours is usually paid at premium rates, however, if the reason why the support is provided out of hours is to facilitate your home support worker (for example a family member who is otherwise engaged Monday to Friday) rather than because of your condition, then the premium rate does not apply.

Basically there are 2 options open to you when accessing home support services. You can request the HSE via your Liaison Officer to arrange for the provision of home support service or you can decide to directly employ a person of your choice.

If you opt for a home support service as provided by the HSE, either the Public Health Nurse or Home Help Organiser (depending on the HSE area) will liaise directly with you to ensure that your needs are met. You should be aware that your home support worker may be made aware by the HSE that you have Hepatitis C, but will be obliged to maintain the confidentiality of this information and any breach of this would result in disciplinary action by the HSE.

The HSE are obliged to provide you with a suitable service, and the onus is not on you to find a home support worker for yourself. Even if you do source your own home support worker, the HSE may be prepared to undertake the role of employer on your behalf and to pay the worker directly but this should be discussed with your Hepatitis C Liaison Officer in the first instance.

IMPORTANT note re employing your own home support worker/workers.

If you wish to employ your own home support person, you can do so, on the understanding that you will be responsible for fulfilling the usual employer's requirements, in relation to P.R.S.I., TAX and Public Liability Insurance. The onus will also be on you to advise your home support worker/workers of your medical condition.

This is a serious legal responsibility and you should think carefully before you take it on. Because of this, the preferred option is that your HSE area undertakes the direct sourcing, employment and payment of your home support worker. If you decide to go ahead and employ someone yourself, the HSE will pay the home support grant to you directly and you will be responsible for paying your home support worker yourself. All HSE areas will require a regular form returned from cardholders confirming that the specified hours of home support have been undertaken. On receipt of these signed details, payment will be made at the

	<p>appropriate rates.</p> <p>Home support workers are paid on the home help national payscale rates. Details on these rates of pay are available from www.dohc.ie/publications/salaryscales</p> <p>If you have any queries about any aspect the home support service, you should contact your Hepatitis C Liaison Officer directly.</p>
<p>Chiropody Service The cardholder can access chiropody services, which are provided by the HSE, following a referral made by a registered medical practitioner, registered nurse or Primary Care team.</p>	<p>Chiropody / Podiatry Services Chiropodists assess, diagnose and treat diseases and abnormalities of the foot. Chiropodists work will vary greatly from one chiropodist to another and will depend on the individual clients needs. Podiatry is a medical term used that means more or less the same as chiropody and is now becoming more widely used. The aim of chiropody/podiatry services is to cure the patient's problem and where possible, prevent recurrence of existing foot problems or the development of new foot problems. Health promotion is another important aspect of the chiropodist's work.</p> <p>The type of services which are offered by most chiropodist / podiatrists include the following:</p> <ul style="list-style-type: none"> • foot-care and footwear advice; • pain management in the foot; • nail surgery; • verrucae treatment; • diabetic footcare and continuous assessment; preventative footcare by the use of customised orthotics. <p>Arrangements for chiropody and podiatry services vary from area to area. Some HSE areas provide chiropody/podiatry services through their own clinics, others arrange for private contractors to provide it on their behalf. Some hospitals also provide chiropody/podiatry services under certain circumstances, and on the basis of medical need. There are a small number of Chiropodists who have given their contact details to Liaison Officers and who are willing to provide services, and bill the HSE directly. You should check with your Liaison Officer to see if there is a list of Chiropodists from your area available. In any case the Liaison Officer will assist you in accessing chiropody services.</p> <p>HAA cardholders can also avail of chiropody/podiatry services from any qualified chiropodist/podiatrist. You can avail of as many visits to the chiropodist/podiatrist as you need and there is no requirement to obtain prior approval or a GP's referral. You can then either recoup the cost of your consultations with the chiropodist on production of</p>

receipts with your Liaison Officer or alternatively the Liaison Officer can arrange to pay the chiropodist directly on your behalf. You should discuss with your Liaison Officer whichever arrangement suits you best and it will be facilitated. If the chiropodist/podiatrist is unwilling to be paid directly or go onto the Liaison Officers list of Chiropodists, or if you would prefer that the Hepatitis C Liaison Officer did not get involved, you are still free to attend this chiropodist/podiatrist and have the cost recouped. You do not have to attend a local chiropodist/podiatrist, or to continue attending the same chiropodist/podiatrist if you choose not to.

If you attend a chiropodist/podiatrist other than those on the HSE list, you should be careful to check that he/she is professionally qualified. Hepatitis C Liaison Officers will not refund the cost of chiropody services provided by an unqualified or unregistered practitioner. If in doubt, check with the Hepatitis C Liaison Officer before incurring any expense.

The Department of Health and Children is in the process of establishing a revised assessment mechanism for those chiropodists/podiatrists who wish to work in the public health service. This will involve establishing minimum standards for acceptable practice and assessment of chiropodists/podiatrists against this standard.

There are four separate professional bodies representing chiropodists/podiatrists in Ireland:

- Society of Chiropodists and Podiatrists in Ireland;
- Irish Chiropodists/Podiatrists Organisation Ltd.;
- Institute of Chiropodists and Podiatrists in Ireland;
- Irish Branch of the British Chiropody and Podiatry Association.

If you require further information about chiropody or wish to check whether your practitioner is a registered member of one of these organisations, you should contact them directly. The telephone numbers are given at the back of this Guide.

In Summary

- You are entitled to all chiropody/podiatry services provided by qualified chiropodists.
- You can avail of services whenever and as often as you wish and do not need referral from a GP or prior approval from your Liaison Officer.
- Payment can be arranged by the HSE directly with your chiropodist if you wish or you can be reimbursed by your Liaison Officer on production of receipts.
- If you have any queries on any aspect of chiropody

	<p>services you should speak with your Liaison Officer</p> <ul style="list-style-type: none"> • Officer
<p>Physiotherapy Service The cardholder can access physiotherapy services, which are provided by the HSE, following a referral made by a registered medical practitioner or Primary Care team.</p>	<p>Physiotherapy Services Physiotherapists are specialised members of the healthcare profession who use methods such as exercise, manipulation, and massage to treat pain, injury and disability associated with a wide variety of conditions and illnesses that can affect people of all ages.</p> <p>Physiotherapy services are available to you either privately by a chartered physiotherapist or else in the hospital setting once you are referred by your GP/Consultant. Chiropractic, osteopathic and hydrotherapy services are also available to you and can be availed of once they are performed by a registered chartered Physiotherapist.</p> <p>How do I avail of services and arrange payment? Once you are referred by your GP/Consultant you should contact your Liaison Officer who will advise you on private chartered physiotherapists in your area that already provide physiotherapy services to HAA cardholders and can make an initial appointment for you if you wish. The HSE will then pay this Physiotherapist directly for you each time you attend.</p> <p>Alternatively you may attend a Physiotherapist of your choice and if you wish, the Hepatitis C Liaison Officer will contact the physiotherapist on your behalf to check whether he/she wishes to be added to the HSE list, or if not, will agree to bill the HSE directly for your own treatment. If the physiotherapist is unwilling, or if you would prefer that the Hepatitis C Liaison Officer did not get involved, you are still free to attend this physiotherapist and have the cost recouped. You do not have to attend a local chartered physiotherapist, or to continue attending the same physiotherapist if you choose not to.</p> <p>If you attend a chartered physiotherapist other than the ones on the HSE list, you should be careful to check that he/she is professionally qualified. Hepatitis C Liaison Officers will not recoup the cost of physiotherapy or any other associated services provided by an unqualified or unregistered practitioner. If in doubt, check with the Hepatitis C Liaison Officer before incurring any expense.</p> <p>The Irish Society of Chartered Physiotherapists is the professional body representing chartered physiotherapists in Ireland. You can find out more information on physiotherapy in Ireland, including contact information for chartered physiotherapists nationwide through their web site or by contacting the Society. Details are included in the Useful Contact Details section in chapter 4 of this Guide.</p>

Counselling Service

The cardholder can access a counselling service, relative to her admission to and/or work in any of the institutions specified in the Schedule to the Redress for Women Resident in Certain Institutions Act 2015. The counselling service is provided by the HSE, following a referral made by a registered medical practitioner, e.g. the woman's GP.

Counselling Services

Who can avail of counselling services?

Counselling is a very personal and important aspect of the overall care of persons with Hepatitis C and their immediate relatives. Access to counselling services is provided in a way which flexible and fits in with the needs of clients so that they can avail of counselling wherever and whenever it is needed.

Counselling, including psychological and psychotherapy services, can be availed of at any time by HAA cardholders and their immediate relatives. Counselling is also available to persons who received infected or potentially infected Anti-D, blood or blood products but who have tested negative for Hepatitis C.

Many people attend a counsellor directly after they have been diagnosed, or when they are preparing to attend the Hepatitis C & HIV Compensation Tribunal or the High Court. However, you are not confined to seeking counselling at these times; you can attend a counsellor whenever you feel you need to. You do not have to remain with this counsellor if you would prefer to attend another, nor do you have to attend a local counsellor if you choose not to do so. The choice of Counsellor is entirely yours.

How can I access counselling?

You do not need to be referred by your GP or consultant for counselling and you do not need prior approval from the Liaison Officer, as long as you attend one of the counsellors on the HSE list, which is available from your Liaison Officer. This also applies to counselling services for your spouse or partner and children (including adult children). In the case of children who contracted Hepatitis C, counselling services will also be available to their parents, brothers and sisters, without prior approval or referral.

Under certain circumstances, counselling for adults with Hepatitis C can also be extended to other close family members, particularly relatives or carers who are living with you or who are in close contact with you, with the prior approval of your Hepatitis C Liaison Officer.

Each Liaison Officer in the HSE has a list of counsellors who are available to provide counselling under the Health (Amendment) Act, 1996. The Liaison Officers have checked the credentials and qualifications of these counsellors to ensure that they are professionally trained and accredited. At the moment, accreditation from the following bodies is acceptable and recognised by the HSE.

- Psychological Society of Ireland (PSI)
- Irish Association for Counselling and Therapy (IACT)
- Irish Council for Psychotherapy (ICP).

The Liaison Officer pays the counselling fees directly to the counsellors registered to provide this counselling service. To avail of this service, you should contact the counsellor of your choice directly to arrange your appointment. S/he will ask you to sign a form that will allow him/her to be paid by the HSE for the consultation.

If you are already attending, or wish to attend, a counsellor who is not on the HSE list you will have to pay the counselling fee directly to the counsellor yourself. By providing your Liaison Officer with registration/ accreditation details of your counsellor you will be able to recoup these payments but you should always discuss with them in advance if that is possible to make arrangements. You should also satisfy yourself about the qualifications and professional accreditation of any counsellor you attend who is not on the HSE list.

In general, the HSE will not refund payments in respect of counsellors who do not have professional accreditation. However, under exceptional circumstances, the HSE has the discretion to refund such fees, particularly if you have already built up a relationship with a counsellor. However, you should note that this does not mean that the HSE is endorsing unaccredited counsellors in any way and you attend an unaccredited counsellor at your own risk. Such counsellors will not be added to the HSE's list and the Liaison Officer will not refund any other HAA cardholder to attend this counsellor. In other words the Liaison Officer will deal with each client and their preference for accessing a particular counsellor on an individual basis.

Any queries with regard to this service should in the first instance be directed to the Hepatitis C Liaison Officer.

What about counselling services/psychological support in hospital?

Although you do not need a doctor's referral for counselling, your liver specialist might decide that you need additional psychological support, and will refer you to an appropriate professional, either within the hospital, or in the community. Most of the designated units have a Hepatitis C Nurse Counsellor. In some instances s/he may not have the facility to offer counselling on a regular basis, although this can vary from hospital to hospital. However, s/he will be happy to talk you through any specific problems you have, perhaps in conjunction with your hospital visit (it would be advisable to phone first to make sure that the nurse counsellor will be available). Even if a unit does not have a qualified nurse counsellor, the dedicated Hepatitis C Nurse will be happy to talk you through any specific problems you might have. Some

	<p>hospital units also have the services of a Psychologist.</p> <p>Counselling can also be availed of to address special needs. If you are undertaking anti-viral treatment, support will be available from a specially trained treatment nurse and in some liver units support from the units psychologist may be available; your hospital will give you details when your planned treatment is being discussed with you. Counselling can also be necessary to address problems caused directly or indirectly by Hepatitis C within a marriage, or within a family. The Liaison Officer in your area will be able to advise whether counsellors on their lists have particular skills in these areas.</p> <p>Psychiatry services are also available to HAA cardholders, referrals are made on very specific medical needs and only by your GP/Consultant. Access to this service is generally separate to counselling services and normally provided on an out-patient basis in the hospital setting.</p> <p>In summary</p> <ul style="list-style-type: none"> • Counselling is available to all HAA cardholders and immediate relatives. • Prior approval and referral from a GP/Consultant is not required. • There is no restriction or limit on the number of sessions you attend, this is a decision only you and your counsellor can reach. • Counselling is available to family members of children who were infected with Hepatitis C. • Counselling and /or psychological support is available in the hospital setting also, you will need to check with each unit to see what supports are in place. • In all cases if you are unsure of your access to counselling or if you wish to see the list of counsellors on the HSE list you should speak to your Liaison Officer.
<p>Complementary Therapies Not provided on RWRCI Card</p>	<p>Complementary Therapies</p> <p>What are complementary therapies?</p> <p>There are a wide variety of complementary therapies, and the term generally refers to therapies that are not used as part of conventional medicine. However, the position is now changing, and some healthcare professionals are now offering and providing complementary therapies to their patients as part of their overall care. Many people have found complementary therapies beneficial in dealing with a number of conditions as part of their overall care and well-being. Complementary therapies may include for example;</p> <ul style="list-style-type: none"> • Massage

- Reflexology
- Acupuncture
- Aromatherapy
- Hydrotherapy

How can I avail of complementary therapies with my HAA card?

Complementary therapies are available to all HAA cardholders as part of the overall range of healthcare services provided to you. These services are available to you in a number of settings including some of the hospitals where there are designated liver units and also in some private practices. There are a number of complementary therapists who provide therapies to HAA cardholders in the private setting and contact details for some of these are available from your Liaison Officer. Some of the patient support groups have lists of registered practitioners who also work as complementary therapists and if you are a member of one of the groups you should contact them for further details.

In order for you to avail of complementary therapies privately and to have the cost of this covered under your HAA card, it is important that you ensure the therapist providing the particular therapy is a registered medical practitioner. This can include a GP, RGN or in the case of massage for example, a Physiotherapist. A small but growing number of GP's now provide acupuncture and similarly some chartered physiotherapists provide massage-based therapies, manipulation-based therapies, or hydrotherapy. Registered nurses may have appropriate qualifications in massage-based therapies. Some registered chiropractors may have appropriate qualifications to provide reflexology.

It is essential that your liver specialist approves of any complementary therapy that you are proposing to avail of. You should keep your liver specialist informed of any service or treatment you are undertaking, regardless of whether the HSE are refunding all or part of the cost or you are paying for it in full yourself.

In general, you should talk to your Hepatitis C Liaison Officer first to check the position regarding payment. The Hepatitis C Liaison Officer will refund the cost of complementary therapies under the following criteria:

- the therapist is a currently registered general practitioner, currently registered nurse or chartered physiotherapist
- in the case of reflexology the therapist must be either a registered general practitioner, a registered general nurse, chartered physiotherapist

or a currently registered chiroprapist.

- the general practitioner, nurse, chartered physiotherapist or registered chiroprapist has appropriate qualifications in the therapy being offered, copies of qualifications will be validated by Liaison Officers

If you have been referred by your GP or Liver Specialist to undertake a course of complementary therapy, one referral is necessary and then it will be at the discretion of the therapist as to how many, which type and for what duration you need to attend sessions. In the hospital setting the Liver Unit which you attend may refer you to complementary therapies that are available within the hospital and in certain cases there are therapy services provided within some of the liver units.

If you are thinking about using complementary therapies of any kind, always discuss with your liver specialist first. Even therapies, herbs or supplements that seem harmless can cause unexpected problems, or can react badly with other conventional medicines or therapies that have been prescribed for you.

For your own protection, you should check that your therapist has an acceptable level of professional indemnity or insurance.

At the moment, no complementary therapy is regulated by the Department of Health and Children, or by any recognised regulatory agency acting on its behalf including the Health Service Executive. Neither are there any statutory registration bodies for persons offering these services. As a result, it is not possible to give any advice on appropriate qualifications for persons who are not registered GPs, nurses or chartered physiotherapists. The Report of the National Working Group on the Regulation of Complementary Therapists, launched in May 2006 by the Department of Health and Children, makes a number of recommendations on strengthening the regulatory environment for complementary therapists.

At the same time as the launch of the Report in 2006, an Information Guide for the Public was also launched. It offers guidance for members of the public when choosing to see a complementary therapist. Copies of this leaflet are available from www.dohc.ie/publications.

In Summary

- Complementary therapies are available to you under the terms of the Health Amendment Act card and can be availed of once referred by a GP or Consultant.
- One referral is sufficient to allow you to attend

	<p>sessions as often as required and agreed by your therapist.</p> <ul style="list-style-type: none">• Therapies can be availed of in both the public and private setting.• Therapies availed of in the private setting must be performed by a therapist who is qualified as a registered practitioner, i.e. GP, RGN, Physiotherapist, Chiropodist.• Your Hepatitis C Liaison officer can advise on qualified therapists in your area and will make arrangements to pay them directly on your behalf or reimburse you on production of receipts/ evidence of qualifications.
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