Health Budget Oversight Group Minutes

29th October 2020 11:30am

Health Service Executive:	Stephen Mulvany, Colum Maddox, Damien McCallion, Seán Bresnan.
Department of Health:	Caoimhe Dolan, Breda Rafter, Aidan Gilchrist, Claire Doyle, John O'Grady, Denise McCarthy, Evan Walker, Kevin Colman, Linda Learmouth, Louise Carrigan, Mark Hennessy, Paul Bolger, Eoin Halpin, Mary Campbell.
D/Public Expenditure & Reform:	Ronnie Downes (Chair), David Owens, Terry Jennings, Patrick Moran, Deirdre Collins, Seán Prior, Helen Murphy, Kevin O'Farrell.

1. Minutes of Meeting of 1st of October 2020

Minutes from the previous HBOG meeting on 1 October 2020 were agreed.

2. Update of COVID action plan

Testing and Tracing

The group discussed expected costs arising from Testing and Tracing (T&T) up to year end and into 2021. It was queried whether all costs in the pipeline are being covered in current reporting; the HSE affirmed that upcoming Flash Reporting will contain T&T costings up to end-October.

In recent weeks the primary driver of T&T has been suspected community transmission/GP referrals; this is expected to decline as a proportion of testing (relative to Healthcare Workers, residents of congregated living settings etc.) in the coming weeks as the effect of Level 5 restrictions reduce community transmission trajectory.

In relation to testing capacity it was affirmed that while on some days the number of COVID tests carried out exceeds 15k, this reflects surge capacity. 15k tests per day is the sustainable capacity amount, in line with Government sanction.

DPER noted the absence of detailed material relating to staffing plans for T&T operations.

DoH affirmed that it will communicate with DPER as appropriate regarding any costs arising from T&T exogenous to approved envelope. Costings used were based on two scenarios (1) 75k tests per week and (2) 100k per week.

Personal Protective Equipment

DPER queried existing PPE stock levels, and whether there is the possibility for shortages this year. DoH affirmed that reporting on this matter had not been fully reflective of the up-to-date situation, and noted that additional PPE sanction request is within envelope approved by Government.

The group discussed Viropro handgel; the HSE noted that they have issued a recall notice to the health system, mandating that use of the product ceases. At present arrangements are being made for uplift of the product over coming days. The supplier is on notice that HSE are requesting direct refund.

DPER noted that there are a number of outstanding queries relating to expected PPE costs for the remainder of 2020, requested six weeks ago. DoH affirmed that they will share the information when it becomes available.

The group noted that Min/Health has ordered an audit of PPE expenditure; the HSE are currently in a tender process for an independent body to undertake this audit. It is expected that there will be a tender awarded toward end-November. A letter on this would be issuing to Min/Health in coming days.

Accommodation and Isolation Facilities

It was noted that HSE is currently at advanced stage of procurement process with individual private hospitals for additional capacity in event of a surge. In addition, at present temporary funding is being made available for treatment in PHs.

DPER raised queries around final costs of the previous agreement and consultant pay agreements – and requested expected costs from ongoing tender processes and how they compare to HPO. It was noted that final costs are still uncertain (in the case of PH a court case is ongoing). The HSE have a document outlining worst case scenario which it was agreed would be sent on to DPER.

3. Health Budget Profile and Monitoring

Post Budget Follow-Up

The group discussed options for effective monitoring of expenditure by category, as per budget settlement. DoH proposed to use the National Service Plan as a basis of reporting to organise and source information.

The question was discussed of the most appropriate manner of dealing with a possible first surplus in 2021, with options to be addressed and resolved in particular as between HSE and DoH.

2020 Outturn

The group noted a need to refine and finalise the expected 2020 end position in coming weeks for purpose of Supplementary Estimate. The first week of December is the provisional deadline for SE (position to be agreed prior to this).

Consultant's Contract

The group was informed that DoH are taking steps to liaise with relevant bodies to finalise implementation of the Sláintecare consultant contract. It is expected that a plan will be in place before the end of 2020.

AOB

DPER requested a note on funding of daytime disability services – DoH to provide.

DPER queried the level of HSE expenditure on external/private consultants, and how this fits into the overall delivery strategy. Item to be revisited.