Health Budget Oversight Group Minutes

17th December 2020 11:00am

Health Service Executive:	Stephen Mulvany, Colum Maddox, Mark O'Donoghue, Tim Cummins.
Department of Health:	Aidan Gilchrist, Claire Doyle, John O'Grady, Eoin Halpin, Denise McCarthy, Kevin Colman, Linda Learmouth, Louise Carrigan, Mark Behan, Paul Bolger, Shane Corr, Margaret Campbell, David R. Smith.
D/Public Expenditure & Reform:	Ronnie Downes (Chair), David Owens, Terry Jennings, Patrick Moran, Deirdre Collins, Seán Prior, Chris Ryan, Kevin O'Farrell.

1. Minutes of Meeting of 26th of November 2020

Minutes from the previous HBOG meeting on 26th December 2020, with minor amendments, were agreed by the group.

2. COVID-19

Winter Plan

The WP is published on HSE website – the €400m element for 2021 is built into the 2021 National Service Plan, and will be reported on via that framework.

Affirmed that flu incidence to date is significantly below normal years, and ICU and hospitalisation pressure due to flu is lower as a result. It is noted however that some risk remains that there could be a surge in flu cases over the remainder of winter.

Reporting - Flash Queries

Noted that further information on Private Hospital has been requested by DPER of DoH.

In addition, information was requested on NTPF and Access to Care; a response has been received on these and DPER will liaise with DoH.

3. Vaccinations – Estimates/Timelines

Plans for two vaccination campaigns are currently underway. Noted that 1.1m flu vaccines have been administered by GPs and pharmacists to date, and that these groups will be a major component in the administration of Covid-19 vaccination programme.

Queries concerning costs and options were raised, which will be forwarded to the vaccination Taskforce.

4. National Service Plan – State of Play

Min/Health has not yet approved 2021 NSP; an interim response has been issued. Outcome options for Min/Health are (1) approve as submitted, (2) reject as submitted, or (3) approve subject to specified amendments. Minister currently reviewing a number of areas for potential amendment. Officials in DoH are working closely with the Minster with a view to finalising the NSP as soon as possible.

HSE note that management processes have necessarily begun in planning based on broad outline of NSP draft released to Minister. Adjustments to these may be made based on amendments requested by the Minister of Health.

5. AOB

Discussion on progress of the HBOG, potential group format, and focus of group in 2021.

- It was noted that HBOG discussions have been effective during 2020 in facilitating streamlined communications among DPER, DoH and HSE in relation to the pandemic response and in raising, and pursuing, particular issues of information and clarification. The view was also expressed that it may be appropriate to return to monthly meetings; and that the HBOG's role could usefully be re-articulated and re-calibrated for 2021 to ensure it continues to play a useful role in such communications, and in maintaining focus on the continuing improvements in sound financial management in the health system, including with regard to issues of performance and recruitment.
- While acknowledging that HSE service representatives on the group have been necessarily occupied by work on the pandemic this year, it was raised that for 2021 it would be desirable to return to a full spectrum of senior service representation, either directly or on a delegated basis, so that HBOG has direct access to relevant information and context.
    - Proposed that agendas for more in depth discussion may be set out in advance by the secretariat and agreed, so that representatives for those particular areas may schedule their attendance at those points.
- Noted by DPER that there have been issues during the year with regard to timely transmission of essential business data. Suggested that a document schedule be developed by HBOG secretariat for routine reports, with timelines for delivery, and pre-agreed by all parties.
- Workforce planning and pay and numbers will continue to be a significant issue, and should once again become a regular feature for discussion on agendas in the New Year.

Discussion on Health Vote impacts of recent public service pay deal.

- Noted that implications of recent public pay deal are not captured in NSP 2021.
- DPER pay side clarified that the basis of the deal was the 2021 pay bill and staffing numbers, including consequential impacts of basic pay increases on overtime, allowances, premia payments and agency.
- Implications for 2021 are from 1) the return of overtime rates and premia payments to pre Haddington Road arrangements, to be met from within existing allocations and 2) a general round pay increase of 1% or €500, whichever is greater on the 1st of October 2021 for all staff not due FEMPI restoration under Section 19 of the Public Service Pay and Pensions Act 2017.
- The pay deal was concluded too late to make additional allocations within the Revised Estimates but alternative mechanisms to provide for additional in year funding exist if required.
- In relation to the Additional Hours worked under the Haddington Road Agreement, an Independent Body will be established by March 2021 to examine the issues and report to Government by end 2021. All parties will have the opportunity to make submissions to the Body and a fund of €150m has been held back to defray any operational costs that may arise from its recommendations in 2022.
- In regard to the measures that have effect in July 2021 (on overtime rates and premia payments), DPER pay side will engage with DoH early in the new year on the potential cost implications.