Health Budget Oversight Group

Meeting: Monday, 30th January 2023, 14.30

DPER, 7-9 Merrion Row

1. Minutes from Previous Meeting

HSE intend to come back to DPER with detailed comments on minutes of the meeting of December 30th in writing. Revised minutes to be circulated in advance of next meeting.

2. Review of HBOG

DPER introduced an item on a review of HBOG including lookback on progress of the previous year, strengths, weaknesses, and proposed changes including updated reporting mechanisms and timelines. The aim of the review was to propose actions to enhance the operation of HBOG.

HSE raised the issue of predictability of scheduling, suggesting the setting out of a provisional timetable of meetings at the start of the year.

DOH emphasised the importance of realism of aims and ensuring the feasibility of assessing information within the established timeframes and noted that information flows need to improve to facilitate productivity of HBOG, so that participants come to HBOG with a good understanding of data rather than time being taken up by discussing delivery of data. DOH stated that they are keen to lock in an enhanced reporting schedule with the HSE and then with DPER.

DOH noted an intention to follow up in writing in the coming days with regard to possible technical groups/subgroups, and were supportive of the idea to develop such groups to work through service specific issues outside of HBOG, which DPER expressed agreement on. In addition, DoH proposed to revert with their views on a reporting schedule/information flows.

There was some general discussion about the utility of current reporting and what areas members view as important to have greater reporting on as the group develops.

DPER suggested that group members have further discussion between now and next HBOG on information flows.

There was some general discussion about composition of HBOG attendees, with DPER emphasising the value of having a core set of participants with the potential to invite other specific participants as

needs arise. HSE suggested that there be a quarterly meeting where HSE operational colleagues attend. DPER noted the fact that a flexible approach could be taken.

3. Emergency Department Crisis

DOH noted that exceptional pay related measures were put in place from the 23rd of December to the 31st of January in order to manage higher than anticipated volumes of presentation at emergency departments, and noted that these measures will be stepped down this week as intended i.e. these measures will cease at the end of January. There was a discussion about the planning approach taken to develop these measures. It was agreed by DOH that these measures were short term actions introduced on a once off basis.

DOH informed DPER that HSE are now doing an action review on these measures with the intention to use this review to feed into advance planning for next year. In addition to this the HSE are doing a longer term analysis on rostering. DPER requested that the public service position in relation to pay and terms and conditions be reflected in the review.

DOH noted that work to assess total costs of exceptional measures is ongoing in collaboration with the HSE, and will be circulated to DPER once completed by end February. DPER queried the possibility of knock on costs later in the year as a consequence of these measures, to which the HSE responded that these costs could be variable and that it was not possible to fully determine this at the current time.

DPER raised the issue of high levels of management and administration n grade recruitment in the context of pressures on health care worker staffing. DOH and HSE provided context on how these grades feed into to the delivery of services.

DPER queried if work is ongoing to redistribute excess management and administration capacity. HSE noted that this work is ongoing at lower levels and is not reported centrally unless it occurs on a large scale.

DPER requested that the department be provided with the action review when it is completed. DoH agreed to provide this along with the update on the costs of exceptional emergency department measures as previously requested.

4. End Year Position

DPER asked for an update on the cash position at year end

DOH provided an update including the detail on the delivery of measures identified as requiring a supplementary estimate.

There was some general discussion of the components of the end year position and timelines for the payment of expenditure related to funded items.

DPER sought an explanation on the substantial year on year change on issues. DOH and HSE noted that this is partially due to an increase in the overall vote and cash requirements. DPER queried the level of cash holding in January, the HSE noted that this relates to timing.

HSE informed HBOG that they are expecting end year reports after they go through the HSE board and expected a broadly balanced position.

DPER sought an update on 2023 expenditure profiles which are due shortly. DOH noted that they are working on this with the HSE.

DPER requested that clarity be provided on the relationship between end year position and January expenditure in the form of a "walk" from end December to end January which considers the key cash transactions and also takes into account the January profile.

DPER raised the issue of the core deficit in the acutes sector and the spend increase between October and November. DOH and HSE noted that pay awards may have impacted spend as the backdated 3% pay award would have been paid out at this time. In addition, HSE noted that this is a period where many student nurses enter the workforce following qualification.

5. AOB

a. Covid-19

There was come discussion around covid-19 acute and community expenditure, as well as on covid-19 expenditure more broadly.

DPER asked for an update on the status of covid-19 flash reporting. HSE noted that it is expected in February, with DOH suggesting that they could potentially be reduced from weekly reports to monthly reports.

b. Pay and Numbers Strategy

DPER queried the status of the Pay and Numbers Strategy which has not yet been provided. DOH noted that work is ongoing and they are expecting a first draft in early February.

c. Transfer of Functions

DOH noted that engagement is ongoing on the transfer of functions and that they are working on a document which they plan to circulate shortly.