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Meeting 10:30am, 13-Jul-04 D/Justice E&LR, St. Stephen's Green

Present:

| | | | |
|-------------|-------------|------------------|---------------------|
| <u>DSFA</u> | | <u>D/H&C</u> | |
| B Friel | SWA Section | M Walsh | A/CEO ERHA |
| J Ryan | " | R Tighe | SCWO NAHB |
| D Redmond | RDO | D Hughes | Fin/Accountant NAHB |
| | | E Doody | St Ita's Hosp |

D/JELR
P Whyllie RIA
F Black "
D Brennan "
J Kinsella ASU

D/JELR

D/JELR said Travel Supps are mainly for Unaccompanied Minors and Diet Supp payments were mainly for compelling medical reasons to persons in self-catering units. These supps are small in number and are not an issue. Payments for nappies are the main issue. Estimated cost for nappies is Eur 80,000 per month. D/JELR have already indicated a willingness to arrange for provision of nappies in DPs. Stated that DSFA changes such as A/Seekers & R/Supp have increased DP occupancy with accompanying funding issues; HRC also has cost implications.

The issue of payment methods was discussed. D/JELR stated that cheques could be difficult to cash if a large number issued in a particular centre e.g. 300 cheques for Mosney being presented on the same day in a bank in Drogheda. Cash payments by proprietors is another option.

D/JELR stated that this is not just a matter of taking on payments but that a new scheme with a right of appeal may need to be drawn up. A/G has stated that DPA should be put on a statutory footing.

Health boards got additional resources to deal with direct provision - might they continue in DPs working on an agency basis for D/JELR? The reported D/Finance view is that there should be no additional resource implications. Numbers in DP are falling so any any large expenditure will not be acceptable.

D/JELR confirmed that they have already agreed to take on DPA. This meeting is addressing the broad principles.

DSFA

Supplements are only payable as a supplement to a basic SWA payment (not DPA) and ENPs are to cover once-off exceptional needs (not appropriate for nappies). Accordingly, the Midland HB are strictly correct in not making any payments for nappies.

A/G letter (copy provided) states that A/Seekers should have all of their needs met in direct provision and that they should not need to have any recourse to any social welfare payments. Also, that direct provision is regarded as a form

of social welfare payment and it fulfils international obligations on the rights of children.

Direct provision itself is a welfare support scheme - A/G has stated that social welfare provision can be in kind as well as or instead of cash.

Accordingly, direct provision needs to cover Direct Provision Allowance plus all Supplements and all ENPs.

DSFA is agreeable in principle to transfer funds to D/JELR to cover DPA payments and payments for nappies. It is a matter of how this can be worked out.

Regarding payment methods, DSFA has had cash payments made by agents - BEOs & Post Offices. Another option is the new E-Card (electronic purse) which is being developed as part of DSFA's Accounts Branch PARP project.

Regarding Unaccompanied Minors in DP, the D/H&C has agreed to take over the full care of U/Minors.

St Ita's

E Doody from St Ita's gave details of weekly payment of Eur 18.16 to patients. Payments are made in cash which is withdrawn from the Central Accounts Office by Charge Nurses (Housekeepers) and distributed by them. Any monies not distributed is kept in "personal savings accounts" for the patients.

ERHA

D Hughes, Financial Accountant ERHA, reported funding problems for direct provision centres for previous years with D/JELR & local authorities. He will draw up a position paper. This will be dealt with as a separate matter (and not by working group).

AGREEMENTS/ACTION ITEMS

D/JELR willing to to arrange for provision of nappies in DPs.

D/JELR confirmed that they have already agreed to take on DPA.

Direct provision needs to cover Direct Provision Allowance plus all Supplements and all ENPs.

DSFA is agreeable in principle to transfer funds to D/JELR to cover DPA payments and payments for nappies.

D/JELR to draft a template of a scheme, with issues.

Brendan Friel requested that it be cleared by Dec-04 to allow arrangements for VOTE transfers put in place for 1-Jan-05.

A working group chaired by D/JELR is to be set-up.

R Tighe to identify ENPs in DP centres.

Next Meeting 30-Aug-2004 @ 2:30 pm.

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| <u>D/JELR</u> | |
|---------------|-----|
| P Whyllie | RIA |
| F Black | " |
| D Brennan | " |
| J Kinsella | ASU |

- . D/JELR estimate cost of Eur 80k pm for nappies
- . Supplements are only payable as a supplement to a basic SWA payment (not DPA) and ENPs are to cover once-off exceptional needs (not appropriate for nappies). Accordingly, MHB are strictly correct in not making any payments for nappies.
- . D/JELR have indicated a willingness to arrange for provision of nappies in DPs.
- . DSFA agreeable in principle to transfer funds to D/JELR to cover this. It is a matter of how this can be worked out.
- . D/JELR state DSFA changes such as A/Seekers & R/Supp have increased DP occupancy with accompanying funding issues; HRC also has cost implications.
- . D/JELR said Travel Supps are mainly for Unaccompanied Minors. DSFA responded that the D/H&C had agreed to take over the full care of U/Minors.
- . Diet Supp payments were mainly for compelling medical reasons to persons in self-catering units.
- . These supps are small in number and are not an issue. Nappies are the main issue.
- . B Friel said that A/G letter said that A/Seekers should have all of their needs met in direct provision and that they should not have any recourse to any social welfare payments. Also, that direct provision is regarded as a form of social welfare payment and it fulfils international obligations on the rights of children.
- . Accordingly, direct provision needs to cover Direct Provision Allowance plus all Supplements and all ENPs.
- . E Doody from St Ita's gave details of weekly payment of Eur

18.16 to patients. Payments are made in cash which is withdrawn from the Central Accounts Office by Charge Nurses (Housekeepers) and distributed by them. Any monies not distributed is kept in "personal savings accounts" for the patients.

The issue of payment method was discussed. D/JELR stated that cheques could be difficult to cash if a large number issued in a particular centre e.g. 300 cheques for Mosney being presented on the same day in a bank in Drogheda. Cash payments by proprietors is another option. DSFA has had cash payments made by agents - BEOs & Post Offices. Another option is the new E-Card (electronic purse) which is being developed as part of DSFA PARP project.

D/JELR said that this is not just a matter of taking on payments but that a new scheme with a right of appeal needs to be drawn up.

B Friel said that direct provision itself is a welfare support scheme - A/G has stated that social welfare provision can be in kind as well as or instead of cash.

D/JELR felt there may be a need to draw up a duplicate system. Health boards got additional resources to deal with direct provision - might they continue in DPs working on an agency basis for D/JELR? Reported Finance view is that there should be no additional resource implications. Numbers in DP are falling so any any large expenditure will not be acceptable.

D/JELR confirm that they have already agreed to take on DPA. This meeting is addressing the broad principles.

A/G has stated that DPA should be put on a statutory footing.

D/JELR to draft a template of a scheme, with issues. B Friel requested that it be cleared by Dec-04 to allow arrangements for VOTE transfers put in place for 1-Jan-05.

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