

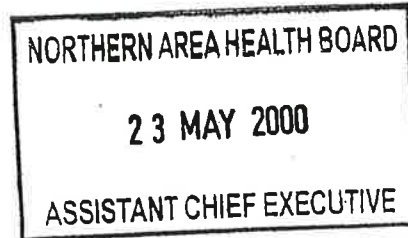


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\* NORTHERN AREA HEALTH BOARD

Bord Sláinte an Limistéir Thuaidh

Mr. Michael Walsh,  
Assistant CEO,  
Northern Area Health Board,  
Dr. Steeven's Hospital,  
Dublin 8.



18<sup>th</sup> May 2000.

Re: Asylum Seekers – Direct Provision.

Dear Mr. Walsh,

Further to my previous correspondence in relation to the above, I met with Mr. Frank Mills, General Manager, and we have formulated the following proposals for consideration.

1) It was agreed that the cost of making the “residual” payment of £15 per adult and £7.50 per child through the SWA system by CWO, was very cost prohibitive. (It is estimated that it cost approximately £7,000 in administration costs to process payment of £4,000 - £5,000).

2) Consideration should be given as to whether this “residual” income payment should be made through the SWA or DSCFA system. Difficulties arise due to the McLoughlin case, where the Supreme Court ruled that an individual assessment of need and means must be carried out in respect of each application under the SWA scheme. It is therefore proposed that an alternative administration scheme to process these fixed payments to Asylum Seekers be set in place. It was recognised however, that if an administrative scheme is to be set up under DSCFA, using ISTS to make payments there will be no reduction in staffing costs as only CWO's and DSCFA officials have access to the ISTS system.

**It is therefore proposed that payment of the “residual” income to Asylum Seekers in direct provision be administered by DASS staff. DASS currently have responsibility to meet Asylum Seekers needs, i.e. accommodation and food so it is logical that they should also have responsibility for making these residual payments.**

It is proposed that an initial cash payment to cover the Asylum Seekers stay in the short stay reception centre (max 2 weeks) could be made by staff in the DASS and the payment could be made to the Asylum Seeker once they have arrived at the reception centre.

Once persons are dispersed to long stay reception centres throughout the country, arrangements could be made with the proprietors of the premises to make the payments in return for an administration fee (perhaps a % of the amount paid out).

It is further proposed that contracts negotiated with the owners of establishments providing accommodation for Asylum Seekers would include for the provision of special diets to appropriate residents, and that a rate could be negotiated with the owners to include the provision of baby food and nappies to under 2 year olds.

This would considerably reduce the need for CWO's to administer Exceptional Needs Payments. However, ENP's for other than diets, nappies and baby food should continue to be the responsibility of the Community Welfare Officer.

I am available to discuss these proposals at your convenience.

Yours sincerely,

Maria Mulheal

**Jim Murphy.**  
**A/Senior Administrative Officer.**

**Ref: Jm/mm2/5011**



NORTHERN AREA HEALTH BOARD

Bord Sláinte an Limistéir Thuaidh

24<sup>th</sup> May, 2000.

*Boh*  
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Ms. Berenice O'Neill,  
Director,  
Directorate for Refugee and Asylum Support Services,  
Department of Justice, Equality and Law Reform,  
94 St. Stephen's Green,  
Dublin 2.

*Re: Welfare Services to Asylum Seekers*

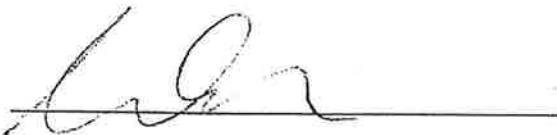
Dear Ms. O'Neill,

I attach for your perusal, submission made to me by Mr. Jim Murphy, our Board's Senior Administrative Officer in charge of community welfare services. We had discussed this with Mr. Murphy prior to his making the submission. From my point of view, it makes good sense, both from a management perspective and also in the context of use of resources overall. The proposal is based on the manner in which health boards operate their long-stay institutions; in reality the process is somewhat similar to that which would be required in reception centres and centres of direct provision.

- (a) Accommodation which includes catering, cleaning, laundry, heating and facilities for social recreation.
- (b) Personal income (provided in cash to all residents of long-stay institutions).
- (c) Clothing and personal effects are usually supplied from stores - children's nappies, toiletries, etc..
- (d) Personal clothing can be supplied from stores or in recent years, is done by an order to a retail outlet, e.g. Dunnes Stores, to supply Mr./Mrs. X with items specified by a contract which would have already been discussed and put in place with the manager of the specified retail outlet.

The proposals, as outlined by me, are very efficient, cost effective, reduce the bureaucracy and number of agencies involved in the delivery of services from a practical perspective.

Yours sincerely,



**Michael Walsh**  
Assistant Chief Executive

Enc: 1

cc Mr. Brian O'Raghallaigh, DSCFA

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Department of Social,  
Community and Family Affairs,  
Áras Mhic Dhiarmada,  
Store Street,  
Dublin 1.



☎ : (01) 8748444

An Roinn Gnóthaí Sóisialacha,  
Poball agus Teaghlaigh,  
Áras Mhic Dhiarmada,  
Sráid Stórais,  
Baile Átha Cliath 1

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14<sup>th</sup> June 2000

Ms Catherine Byrne,  
Principal,  
Directorate for Asylum Seeker Services,  
Department of Justice, Equality and Law Reform,  
94 St. Stephen's Green,  
Dublin 2.

Dear Catherine,

Re: Direct Provision arrangements

Further to our meeting on 7<sup>th</sup> June, I wish to set out in more detail the point I made with regard to the Directorate taking responsibility for making the residual payments to asylum seekers in Direct Provision.

Direct Provision was first formally identified as an option for meeting the basic needs of asylum seekers by a Working Group that reported to Government in February 1998. The main objective was to remove the need for asylum seekers to have recourse to the social welfare system because that was thought by some to be a "pull factor" and because the UK authorities were planning to introduce a direct provision system for similar reasons. The following extracts from this Department's letter of 5<sup>th</sup> February to your Department's John Hurley, Secretary of Chair of that Working Group, sets out the background:

*"There is concern at Government that direct access to the welfare system on the same basis as Irish citizens should be addressed. The only practical proposal identified by the Working Group for achieving this in a manner consistent with the State's obligations to asylum seekers is direct provision of support ..... They have access to the social welfare system only because there is no other mechanism in place to discharge the State's obligations towards them. If priority is to be given to removing access to the social welfare system, then the only practical course of action open to Government is to provide for their needs directly".*

#EX-101-1000  
DP  
DP payment IS SWA!!

While Direct Provision has been introduced with effect from 10<sup>th</sup> April, "removing access to the social welfare system" has not been achieved because residual payments are still made through the social welfare system (by Community Welfare Officers). The Minister for Justice, Equality and Law Reform has stated, in his letter to the Minister for Social, Community and Family Affairs of 3<sup>rd</sup> May 2000, that he fully accepts "that the most effective way in the long term of dealing with the income maintenance issue would be to remove asylum seekers from the scope of the social welfare legislation altogether." Minister Ahern responded on 23<sup>rd</sup> May stating that:

"The most effective way of providing asylum seekers with a residual income when they are in Direct Provision is for the payment to be made in cash at the Reception Centre – any objective analysis would, I believe, support this view. I agree that this cannot be done overnight but such a system could be implemented within weeks. This approach should be incorporated in the draft policy document that your Department is currently preparing. It would remove the need for the social welfare system to be involved through Community Welfare Officers. It would be more sensible from the asylum seeker's point of view also, as they would be getting their income directly without having to claim it at the Post Office or at the Bank. It would also be more efficient from an administrative viewpoint as the cost of administering these payments through the social welfare system is a very high proportion of the value of the payment."

Mr. Michael Walsh, Assistant Chief Executive of the Northern Area Health Board wrote to Ms. Berenice O'Neill on 24<sup>th</sup> May in similar terms.

I am anxious that we should make progress on this in the next few weeks, with a view to the Directorate assuming sole responsibility for making residual payments by 1<sup>st</sup> September 2000. It is not desirable that the present temporary arrangements should continue for a prolonged period because, with the passage of time, it will become increasingly difficult to disengage Community Welfare Officers from the process of making residual payments through the SWA system at Reception Centres. The situation would be exacerbated if the numbers of asylum seekers to be served were to increase, leading to an increase in the number of CWOs dealing with them.

A further reason for putting new arrangements in place quickly is that Community Welfare Officers who are currently engaged in that work will have to be redeployed elsewhere within the Community Welfare Service. For reasons unrelated to the asylum issue, the scope for doing so will diminish greatly after September.

I would be grateful if you could arrange to have this matter advanced as soon as possible. I would be happy to meet with you or your colleagues to discuss the issue and to provide any assistance I can in the matter.

#ExploringDP

On another topic, please see enclosed a copy of my letter to Paul McDonnell, for your information.

Yours sincerely,



Brian O Raghallaigh  
Principal,  
Planning Unit.