



Northern Ireland  
Assembly

Committee for the Office of the First Minister  
and deputy First Minister

# OFFICIAL REPORT (Hansard)

Victims and Survivors Issues: OFMDFM

8 October 2014

# NORTHERN IRELAND ASSEMBLY

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Victims and Survivors Issues: OFMDFM Officials

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**Members present for all or part of the proceedings:**

Mr Mike Nesbitt (Chairperson)  
Mr Chris Lyttle (Deputy Chairperson)  
Mr Alex Attwood  
Mr Roy Beggs  
Mr Alex Maskey  
Ms Bronwyn McGahan  
Mr David McIlveen  
Mr Stephen Moutray  
Mr Jimmy Spratt

**Witnesses:**

Mr Ricky Irwin	Office of the First Minister and deputy First Minister
Mrs Patricia McIntyre	Office of the First Minister and deputy First Minister

**The Chairperson (Mr Nesbitt):** I welcome to the table Patricia McIntyre and Ricky Irwin.

Ricky, we heard very telling testimony, particularly from Margaret, about what it is like to work in the Victims and Survivors Service (VSS). The relentless flow of telephone conversations — sorry, I pause to welcome to the Committee Mr Roy Beggs.

**Mr Beggs:** Apologies, I was at a neighbouring Committee.

**The Chairperson (Mr Nesbitt):** He was with the PAC. You are very welcome, Roy.

So, Ricky, if you work in the VSS, there is an unending demand to answer telephone calls. Some of those calls are from vulnerable people who have major issues, and some of them can last for up to 60 minutes. As Margaret said, staff are offered supervision, which is just another word for counselling, on a monthly basis. Does the Department have a duty of care to the staff of the VSS?

**Mr Ricky Irwin (Office of the First Minister and deputy First Minister):** Before I get into my opening remarks, I will answer that point, Chair. Absolutely, as it is an arm's-length body (ALB) of the Department, the Department clearly has a duty of care to the staff there. The VSS is a company limited by guarantee and has its own independent permanent board. It is primarily the responsibility of the board and the senior management team (SMT) to ensure that the structures are in place to protect staff there. Of course, the Department works very closely with the VSS on matters such as that.

Oliver and Margaret very clearly articulated the pressures that the organisation is under. I commend the two of them for their leadership over recent months and I commend the determination of all the staff in the VSS in recent months, particularly in light of the increase in phone calls, the number of unscheduled appointments and the financial context. This Committee has already acknowledged the pressure and the fact that they have been able to keep the service going through all of that. So, absolutely, we would be there.

**The Chairperson (Mr Nesbitt):** How do you discharge that duty of care?

**Mr R Irwin:** We work very closely with them, as Margaret and Oliver said. We have a good collaborative partnership. The commission has commented on the strength of the relationship between itself, the Department, the VSS and the forum, the architecture that you referred to earlier. So, we are in regular contact with them.

We have provided additional resource, and Margaret outlined what that was. We put in place the additional capacity to deal with the phone calls through NI Direct. As Margaret said, we are looking at a request for more resource to merge information within the VSS. So, we have been doing everything that we can. Within my powers and within the powers of the branch within the Department, we are trying to do as much as we can to support them through this time.

**The Chairperson (Mr Nesbitt):** Obviously, the key document between yourselves and an arm's-length body is the management statement financial memorandum (MSFM). Could we have sight of that key document to see where that duty of care is articulated?

**Mr R Irwin:** That is something that I will have to take back to the Department. I am not sure of the policy on sharing MSFMs between the Department and its ALBs, so I will have to take that request back.

**The Chairperson (Mr Nesbitt):** I make that a formal request and if there is a difficulty I am satisfied to see that part of the MSFM that covers the duty of care to the staff of the Victims and Survivors Service.

On the finances, I am still not clear, Ricky, on why we have the VSS saying that the opening budget position for 2014-15 was communicated in May 2014 as £11.7 million. Can you explain that, because it is at variance with what the Ministers are saying?

**Mr R Irwin:** Yes, obviously that is a point that will need clarification. I will address it in my opening remarks, and if further clarification is required after that we will try to address that.

**The Chairperson (Mr Nesbitt):** There was no indication that there would be opening remarks, I beg your pardon. If you had indicated, I would have started with those. Go ahead.

**Mr R Irwin:** OK; thanks. Since I last updated the Committee on 25 June there have been a number of developments. As I explained at my last appearance, the programme board that was established had agreed to stand down as it had carried out its terms of reference at that stage. However, we do have new structures in place and we continue to monitor the recommendations from the independent assessment of the VSS that the commissioner called for. I am pleased to report that 47 of the recommendations have been completed and 18 are partially completed. A further four are understood to have been completed and will be signed off very soon. The commission has again engaged with the Chartered Institute of Public Finance and Accountancy (CIPFA) and WKM Solutions to undertake a follow-up review, which actually commenced today.

In 2014-15, the VSS continues to provide funding to individual victims and survivors through the individual needs programme and to victims' groups through the victim support programme. Over the summer months the service opened a number of its schemes to help individuals, including the financial assistance scheme 6, care for carers and support for the injured. The financial assistance scheme 6 opened in two phases. Phase 1 was for the seriously injured and phase 2 was for all other applicants, both existing and new. Each successful applicant to phase 1 was awarded £1,000, as Margaret outlined. The amount of each award for phase 2 was calculated by dividing the total budget equally between the eligible applications received by the service. All eligible applicants to phase 2 were awarded and have been paid £650.

Other individual schemes — primarily respite breaks and education and training — have been deferred. Again, Margaret outlined that. The Executive applied a 2.1% reduction in resource budgets immediately in June monitoring and signalled a further 2.3% reduction in resource budgets in October monitoring. Consequently, the VSS was asked to apply 4.4% of efficiencies to its running costs and the running costs of the groups funded under the victim support programme.

The Department wrote to the VSS interim chair on 21 July to advise of its initial allocation for 2014-15 and to set out an agreed policy framework for it to apply operational discretion in the allocation of its budget. That framework indicated that VSS should take into account consultation with the victims' forum and the Commission for Victims and Survivors, that it should also continue to protect those victims and survivors with the greatest needs and suffering the most, and that it should continue to meet the needs of individual victims and survivors.

The service has consequently been proactively managing its budget to maintain front line services by seeking to achieve savings in administration. It is also working closely with groups and will continue to prioritise the needs of individuals in order to protect those with the greatest needs. The service is committed to maximising any cost savings internally to ensure a minimum impact on its operation.

The June monitoring Executive paper recognised concerns around resource funding for victims and survivors and the Executive agreed to return to the issue in October monitoring with a view to providing additional resources if at all possible. The Department therefore made a bid for £1.3 million in October monitoring in order to restore the VSS budget to a baseline of £11.3 million, which is the same as its opening 2013-14 budget.

I am pleased to report that we are at an advanced stage in the process of the competition to appoint a new Victims' Commissioner and interviews are scheduled to occur next week. Additionally, in relation to the appointment of a new VSS permanent chair and additional board members, the positions are currently advertised and we are seeking applications by the closing date of 17 October.

We are continuing to work closely with the service and the commission to ensure that VSS directs funding to those victims and survivors most in need. Indeed, the commission has recently reported that the tripartite relationship has significantly improved in recent months. Members should also be aware that we are in discussion with health officials on how best to meet the growing psychological needs of victims through the potential enhancement of service provision in the primary healthcare sector. We intend to carry out a collaborative design approach with key stakeholders across the victims sector in the coming weeks to look at how best to meet the needs of victims going forward. Valuations are being carried out, commissioned by the commission itself, in relation to the individual funding programme and the group funding programme, and that will inform our work in terms of the collaborative design approach and how best to structure services in the future. That concludes the opening remarks. I am happy to take any questions that members have.

**The Chairperson (Mr Nesbitt):** Thank you very much. Can I take you back to the letter that you said was written on 21 July advising VSS of its budget for 2014-15? Unless I am mistaken, I think that you had an Ed Miliband moment, because you did not mention the money.

**Mr R Irwin:** In the letter?

**The Chairperson (Mr Nesbitt):** Yes.

**Mr R Irwin:** There was a letter at the end of July that said that the initial allocation for the service was £10 million. At this point, I should maybe clarify the financial position by looking at how it was explained by the Department's accounting officer last week. I will use his words to explain how that position has come about:

*"As part of planning for our budget at the start of the year, we identified all the programmes that we had to take forward. In the past number of years, it has been the case that we have received fairly significant funding in-year because a number of our programmes are not baseline-funded. That is partly because they started after the Programme for Government was put in place. So, we have been fairly heavily reliant on in-year funding. Part of our budgetary planning for the year is to live with a certain degree of pressure and for that to be picked up through in-year bids. As part of that, we were bidding for the VSS in June with the intention of restoring it to the baseline that it had in the previous year. Unfortunately, that bid was not successful in June, but, as I mentioned earlier, the Executive have committed to looking at it again in October".*

We remain optimistic that the £1.3 million inescapable bid will be met as an outcome of an October monitoring process. You have already reflected the fact that there are two bids in October monitoring of £1.3 million and £1.7 million.

**The Chairperson (Mr Nesbitt):** Ricky, sorry to interrupt. You are saying that the VSS was first advised of its 2014-15 budget on 21 July and the figure was £10 million. VSS told us in a briefing paper that the opening budget was communicated to it in May 2014 and it was £11.7 million. I still do not see the explanation.

**Mr R Irwin:** You are absolutely right. They are the facts. The Department and the accounting officer issued an initial letter to the accounting officer of VSS, as it did with all its ALBs, and said that its budget was £11.685 million. Subsequently, after June monitoring, there was a letter at the end of July that said that the initial allocation that VSS has to work within is £10 million, and that is because of pressures right across the Department's budget.

**The Chairperson (Mr Nesbitt):** So, it received a cut following June monitoring when it had asked for an extra £1.3 million.

**Mr R Irwin:** It received a reduction in its budget.

**The Chairperson (Mr Nesbitt):** So, rather than gaining £1.3 million, it lost £1.685 million. So, there was effectively a swing of £3 million.

**Mr R Irwin:** It saw a reduction in its budget and a commitment to restore it to the original 2013-14 baseline by October monitoring.

**The Chairperson (Mr Nesbitt):** OK. I think that I have got it now.

**Mr Lyttle:** How does that £1.685 million reduction equate to a 4.4% reduction?

**Mr R Irwin:** If you apply a 4.4% reduction to the £11.685 million, it is broadly down to around £11.3 million, which is the baseline for 2013-14.

**The Chairperson (Mr Nesbitt):** It is £11.171 million.

**Mr R Irwin:** Yes, but the Department wants to restore it as close as it can to the original baseline for 2013-14, which is the more favourable position of £11.3 million as opposed to £11.1 million. The reality is that this is not a position that I wanted to be in in terms of the budget for VSS. We know, having worked closely with it over the past long while, the pressures that it is under because of the levels of demand emerging. I would have liked to have been able to say, "Here is more money". That is not within my gift. However, I can convey the impact that it is having on victims and survivors to those in the Department who need to know and who make the decisions around the budget.

**The Chairperson (Mr Nesbitt):** The £1.3 million bid, or was it £1.6 million. What was the bid in June?

**Mr R Irwin:** I think that it was £1.6 million or £1.7 million.

**The Chairperson (Mr Nesbitt):** Yes, £1.6 million. As I understand it, that was an inescapable bid. That is the top priority, and the expectation was that inescapable bids would be met. It was not met, but not only was it not met, there was a drop from £11.685 million to £10 million. So it is well over £3 million. It is £1.685 taken off and £1.6 not given. We are talking about way over £3.2 million of a swing from where they felt that they needed to be to where they were told they had to manage the account.

**Mr Attwood:** This will probably surprise you, Ricky, but in one way I have a little bit of sympathy with you because, given all of the issues around the VSS, you did not want the VSS so reliant on in-year moneys and then, at the beginning of this financial year, to discover that it did not have all that money. However, it raises a more fundamental point, which is that, somehow or other in your Department, you were telling an arm's-length body that its baseline was its baseline plus monitoring moneys. At the beginning of a financial year when you notify arm's-length bodies of their budget allocation, is there a practice in your Department to tell them that their budget allocation is the baseline plus whatever they

got in monitoring rounds in the previous year? If that is the financial practice in your Department, then it is a very irregular one.

**Mr R Irwin:** I could not answer that question. It is probably more suited to the Department's accounting officer in terms of the practice across all the ALBs.

**Mr Attwood:** What happened here is irregular. An arm's-length body was told that its baseline for the year was its baseline from the previous year plus its monitoring rounds.

**Mr R Irwin:** I do not know whether the term "irregular" in terms of public expenditure applies in this case.

**Mr Attwood:** How would you describe it?

**Mr R Irwin:** As I said, this is not a preferred position to be in when you are acting as a senior sponsor for a fairly important front line service in the VSS. Nevertheless, the reality is that we have to support VSS in trying to stay within its allocated budget, which, at this time, is £10 million, and we have worked very hard to try to do that.

**The Chairperson (Mr Nesbitt):** On your point, Alex, the historical institutional abuse inquiry's budget is entirely dependent on monitoring rounds.

Ricky, I am sure that you are aware of 'The Detail', the online journalist facility, talking about the impacts of cuts to services for victims and survivors. I got a response out of Sir Kenneth Bloomfield who wrote 'We Will Remember Them', which was the original report that kicked all this off. Sir Kenneth said that what was going on was:

*"evidence of a dysfunctional system of government and ought to be of great concern to every caring citizen."*

How do you respond to that statement?

**Mr R Irwin:** I am not sure that it is within my gift to go into defining what is dysfunctional in government. As I said, I have to work within the parameters that I am given. We have an MSFM with the ALB, we have a budget allocation, we have a number of pressures and we have to manage those, so that is what we are doing.

**The Chairperson (Mr Nesbitt):** There are the two bids in October monitoring for £1.3 million and £1.7 million. Which ministerial commitments need that money for you to be able to fulfil every ministerial commitment? What are the outstanding ministerial commitments?

**Mr R Irwin:** The primary ministerial commitment was explained by Oliver and Margaret, and it was around the 24-hour telephone call key performance indicator. We are pleased that Margaret was able to say that that has now been restored. There was a short period during September when they were not able to meet that because of the influx of phone calls, even with the assistance of NI Direct. That would be the primary ministerial commitment that would have been impacted.

**The Chairperson (Mr Nesbitt):** Can I suggest that there is another one that, perhaps, trumps the telephone line? It was in the October monitoring papers that we received and discussed with your colleagues in the finance side of the Department last week. On the £1.7 million, the second bid, the box headlined "Consequences if not met" states:

*"The VSS will be unable to meet all targets as outlined above."*

Above we read:

*"Meet the basic needs and demands of victims and survivors."*

I would suggest that is more important than a phone line. Without the second bid, without the full £3 million, the VSS will be unable to meet the basic needs and demands of victims and survivors.

**Mr R Irwin:** The bid is for £3 million. I put forward the bid on the basis of the information that VSS put to me, including all the consequences and impacts. You heard today that VSS are trying to manage the operational delivery on a day-to-day basis. I think they are doing a good job based on the resources that they have. That is not to say that there will not be an impact on front line delivery — and there will be — so that line is reflecting that it is not possible to meet the needs of every single victim and survivor.

**The Chairperson (Mr Nesbitt):** But it is "basic needs". Did you write this?

**Mr R Irwin:** I did not write that, no.

**The Chairperson (Mr Nesbitt):** Meet the basic needs and demands of victims and survivors. You cannot do that without £3 million. Kenneth Bloomfield says that what we have is evidence of a dysfunctional system of government.

**Mr R Irwin:** Chair, it is important to put that into context in terms of the needs of everyone who has presented to VSS. As explained, there has been a significant increase in the number of people who have come forward. In order to meet everybody's needs there would need to be money as outlined in those bids.

**The Chairperson (Mr Nesbitt):** Ricky, you are forgetting that it is "basic needs". That is what disturbs me. It does not say meet the needs and demands of victims of survivors because those could be enormous. Some demands might even be reasonable but this is "the basic needs".

**Mr R Irwin:** The service has prioritised its budget in such a way, based on the policy framework provided by the Department, to target those most in need, including their basic needs.

**The Chairperson (Mr Nesbitt):** On your previous visit, you talked about gateway processes. Could you just remind me how that works?

**Mr R Irwin:** Is that the revised assessment process?

**The Chairperson (Mr Nesbitt):** The VSS ran a gateway process in March of this year. Could you just remind us of that?

**Mr R Irwin:** That was explained, I think, by Oliver and Margaret in terms of the follow-on to the original individual needs review. That was in response to the recommendations arising from the independent report from the commissioner, which said that the individual needs review needed to be more simplified for victims coming forward. That is what the gateway is.

**The Chairperson (Mr Nesbitt):** As a consequence of that gateway process that was run in March, new victims came forward to the VSS but they have been told, "The cupboard is bare, we have nothing for you."

**Mr R Irwin:** I am happy to be very frank and say that figure is around 3,700 additional people who have come forward to the VSS this year.

**The Chairperson (Mr Nesbitt):** Three thousand seven hundred people who came forward having been encouraged by yourselves and now they are being told, "We do not have anything for you currently".

**Mr R Irwin:** It is back to my original point. Decisions around the allocation of the budget unfortunately are outwith my control. We have to manage as best we can with the budget that has been given to the service.

**The Chairperson (Mr Nesbitt):** I thank you for being frank about that. Three thousand seven hundred new victims and survivors have come forward having been encouraged by the Department, VSS and the support groups, and there is nothing for them.

**Mr Maskey:** Thanks, Ricky and Patricia, for being here and for your presentation. It is a bit unfortunate; I do not recognise the remarks that you attribute to Ken Bloomfield. The shortfall of

funding is one issue. I do not see the jump from that to dysfunctional government. There may well be other examples of problems around government but I do not necessarily see that as one, so it was unfortunate that was introduced because I do not share that.

I share the concerns, like everybody else around the table, including you, about the lack of funding to meet everybody's needs. I took from what Ricky said earlier that the issue around the baseline was because the growing demand has outstripped the commitments made in the Programme for Government, which is why you then try to rely on additional money in-year to meet those growing needs.

I do not think anybody would have anticipated 3,000-plus additional cases this year alone. I do not think anybody would have predicted that. Maybe we should have when the Haass negotiations were going on for a considerable time. That might have heightened people's awareness that they would like something done. I think that all of us round the table need to take note of that.

Is there any sense of trying to work out whether a new baseline can be established? It is not applicable just to here; other Departments do likewise. A week ago, Danny Kennedy explained problems that he has. He has a baseline and then he tries to get additional money in-year for the services. Is there any sense of whether we can reach a new realistic baseline, given the increasing demands? If we can, you might have some views around that.

There is another point that is important for us given the work that has been going on, and I thought that it was a very positive presentation earlier on from Margaret and Oliver. When do you envisage all the structures being fleshed out and, in other words, being complete again? That has been a big focus of the Committee for some time now and for you in particular.

**Mr R Irwin:** Those two issues are linked in terms of whatever a new baseline would be and then what the structures would look like. We are in the preliminary stages of this collaborative design approach. Nothing has been agreed. We want to make sure that we talk to all the key stakeholders including individuals and victims groups, the commission, the forum, yourselves and the service about what a sustainable model would look like going forward. Oliver said that demand will increase, and that is not sustainable in terms of finding the additional resource in the current climate. So, when we know what the model will look like, we will then be able to establish the baseline funding for that to deliver the model and to meet the needs of victims who present through that model.

This is not about rushing into anything. To be clear, the Department has taken on the chin the criticisms and the mistakes made in the establishment of VSS. When I was here with Denis before, we went through all of that. Let us not make the same mistakes; let us make sure that we get this right. We need to make sure that any model is client-centred, is about the victims and is responsive to meeting all of their needs. I am very clear that, as we go forward, that is my vision and my aim for getting this right. Whatever amount of money that costs, that will be what we have to bid for and ensure that we secure as the baseline.

**Mr Maskey:** The second point is the issue with the structures. You mentioned earlier that you are close to appointing a new commissioner and then talked about the CEO — you have an interim one at the moment — the service, the board, the chair and all the rest of that. Do you have any time frame for when all that might be complete?

**Mr R Irwin:** I cannot go into too much detail about the commissioner competition because I chair the selection panel and the interviews are next week. Based on that, I would like to think that decisions will flow quite quickly over the coming weeks in terms of an incoming commissioner, subject to the outcome of the interviews. The advert for a new permanent chair and additional board members is live and does not close until the middle of October. Again, I will be chairing the selection panel, and we will obviously make recommendations to Ministers after that. I would like to think that, over the next few weeks, we will be able to announce new board members for the VSS.

**Mr Lyttle:** Ricky, in an effort to be fair to you, I do not think that any of us can forget the scale of the challenge that the Department is endeavouring to respond to given the number of people who were killed, seriously injured or affected as a result of that. But it is our responsibility to try to drill down into changes. In April, the VSS was notified that it had a budget for this financial year of £11.685 million. In July, it was advised that that was being reduced to £10 million. That is a £1.685 million reduction, which, by my calculations, is 14.4%. Can you tell me why it is a 14.4% reduction, given that the standard reduction requested of Departments was 4.4%?



**Mr R Irwin:** I have gone over how it was £11.685 million and why in July it became £10 million. It was £10 million with the intention of restoring it to £11.3 million as quickly as possible. The £11.685 million figure, when you apply the 4.4 % reduction, is broadly in line with £11.3 million. I cannot go into any more information than that.

**Mr Lyttle:** You are making public financial statements based on money that does not exist. Factually inaccurate public finance statements are being made.

**Mr R Irwin:** In what context? The £10 million —

**Mr Lyttle:** What context is there to that?

**Mr R Irwin:** The £10 million is the allocation. That is the reality. That is the budget that the VSS has to work within. Alongside that allocation, a commitment was made by the Executive to revisit the position in October monitoring. We do not know what the outcome of October monitoring will be —

**Mr Lyttle:** We know that a previous inescapable bid was not successful.

**Mr R Irwin:** The sense that I got, which we conveyed very strongly to the VSS, was that an October monitoring bid would have a successful outcome.

**Mr Lyttle:** Which is also already halfway through the financial year.

**Mr R Irwin:** Unfortunately, that is outwith my direct control. All that I can say is that that is not our preferred way of doing it.

**Mr Lyttle:** That is a mild way to describe it, to be honest.

**Mr R Irwin:** Nevertheless, we have to work within the budget that we have, and we have to support the VSS. That is what we are trying to do.

**Mr Lyttle:** In line with my opening comment, has there ever been any undertaking to try to map the number of victims and survivors who fall within the definition in the Victims and Survivors Order and for whom the Victims and Survivors Service might be expected to provide services? It seems as though we are grossly out when it comes to the resources available, set against the number of victims and survivors who may be in legitimate need of the services.

**Mr R Irwin:** I go back to the point about the 3,700 before I answer that. Those are additional people who presented to the VSS, but we do not know how many of them are already receiving support through the groups. I suspect that a large number of them are, and they now feel that they can come forward to the VSS as well as receiving support from the groups. It is very difficult to get a grasp of the hard numbers and statistics around the number of victims. The VSS gathers information from the groups that it funds. There are numbers of people who are being supported, but we do not know whether a person goes to multiple groups — that happens — to get the best possible support.

There has not been a mapping exercise done per se, but the evaluation currently being carried out by RSM McClure Watters on behalf of the commission is looking at the group funding and the individual needs funding, so we will want to take a close look at the recommendations that come out of that to try to maximise value for money.

**Mr Spratt:** Ricky, I acknowledge the amount of work that you and the Department have put into sorting out many of the problems that existed just a year ago. I think that other members have acknowledged that also. Given that, I suspect, there will be a press release about 3,777 victims not getting any money or being looked after, I assume that they are on a list and will be dealt with when finance becomes available. With all the extra people coming forward, the amount of money for others may get smaller in the future.

One of the issues raised before was the psychological problems that people are suffering from. A discussion took about signposting people to, for instance, the Department of Health or areas within other Departments. How much has that been taken on board and how much is that happening? I am not criticising any of the groups, but, in many cases, those who are not properly trained may not be the

best people to deal with those who have serious psychological difficulties and real trauma. They may well approach groups and express the problems that they have, but they need to be moved on to the expert who is trained to deal with the sort of trauma or psychological problem that exists over many, many years. What discussions have taken place? Is there a possibility of other Departments being able to take on some of this? That, in another way, would help some of the victims who are coming forward, and that is something that was raised some months ago.

**Mr R Irwin:** Absolutely. On the first point, I reiterate that, of the figure that I have quoted, I expect a large number are already receiving support through groups. If the VSS is successful in securing additional money, its intention is to try to meet that additional demand.

On the second point, I think that you are absolutely right. We have been talking to Department of Health officials about how we might look at mainstreaming some psychological trauma provision in the primary health-care sector. That would be about ensuring that victims receive the support that they need in a safe and regulated environment. That is very important for people who have deep psychological needs.

The groups are doing an awful lot of work on health and well-being and on social support. Some of that health and well-being work includes counselling. A large number of groups have registered and accredited counsellors on their books who provide step 1 and step 2 care for victims with psychological needs. When it comes to a higher intensity of need — steps 3, 4 and 5 — you move into the primary health-care sector and the professional sphere, which is where those people should be looked after. Signposting goes on, and people are signposted to their GP or to other provision funded through the Department of Health. However, we are talking to senior officials in health about how we can enhance a trauma care model that would provide not only good outcomes for victims but good outcomes for the mental health of the entire population here. There is an opportunity to look at the amount of money that is available for victims and ask whether it is being spent in the best way.

Those discussions are at an early stage. The Health and Social Care Board has proposed a model for trauma care. That is a model that would work in partnership with the groups as well, because we have to recognise the capacity that exists there. Therefore, that is our direction of travel. I do not want to rush things and get this wrong, because we have to make sure that we get this right. I am confident that we will be able to put in place a model that will provide better value for money and meet people's needs when they need them met.

**The Chairperson (Mr Nesbitt):** A model that takes society on board — the mental health and well-being of the entire community — is well worth pursuing, Ricky.

**Mr Attwood:** You said that we have to get this right, and everybody will obviously agree with that. Oliver said that, over the next two years, the VSS can become what it was meant to be, and I differ from him on that point. My view is that it is better to devolve responsibilities to the most authoritative groups in the world of victims and survivors than to concentrate and institutionalise them in the VSS. Therefore, I differ fundamentally on the direction of some of this.

You said that the programme board has been stood down and that, as of today, there is a new structure in place.

**Mr R Irwin:** Not as of today. That has happened over recent months.

**Mr Attwood:** Yes. What is the new structure?

**Mr R Irwin:** We have regular meetings where the commission meets senior officials, including me, and special advisers (SpAds) to provide an update on its assessment of where things are with victims and the VSS. It is what we call a victims update meeting, and it is held monthly.

**Mr Attwood:** A programme board that was taking forward recommendations around the VSS has been stood down and replaced by a monthly meeting among officials, SpAds and the VSS.

**Mr R Irwin:** That is right, but, to follow the process through, the implementation of the 70 recommendations is still on the agenda of that monthly meeting. Following every meeting, I write to Oliver, as interim chair, to outline what has been discussed and where the main focus, from the Department's perspective, lies. Alongside that, of course, we continue to meet the VSS directly every

month around governance, performance targets, and all of that. It is a fairly robust structure, and its aim is to ensure follow-through on all the recommendations.

**Mr Attwood:** My sense is that, if the Victims' Commissioner formally alerted you to her concerns a year ago, and you now concede that she, to use your language, had to take it on the chin, it was a bit more than that. It seems that all hands needed to stay on deck to get the situation rectified. A monthly meeting without a programme board seems to be less of a dedicated way to do that work.

By the way, Chair, the monthly meeting does not seem to involve junior Ministers; rather, it is at official level only. I worry about that structure, frankly, given the scale of where we were. Given that you say that the structure is robust, throughout all those meetings, did anyone ever say to the VSS, "By the way, the baseline figure that you're working from might be wrong"?

**Mr R Irwin:** I have covered the issue of —

**Mr Attwood:** I know that you have, but, in the robust process that you have now adopted in place of the programme board, did it not come up in some meeting somewhere that, despite the letter of grant in May, the baseline was just wrong? If it did not, it does not seem to me that the process that we now have is very robust.

**Mr R Irwin:** It absolutely comes up in the report provided by the commission on what the impact of the budget reductions are. That is a very transparent report, which clearly —

**Mr Attwood:** I appreciate that.

**Mr R Irwin:** — outlines what those impacts are. The core study is taken on board.

**Mr Attwood:** The new process that followed the standing-down of the programme board somehow missed such a fundamental issue as being given the wrong figure in the baseline that it was operating from.

**Mr R Irwin:** To be clear, the VSS is an arm's-length body of the Department. It has its own board, is a company limited by guarantee and has an amount of operational discretion. It is important that the Department remain within its remit and that the VSS be allowed to use that operational discretion. That is part of the rationale for the change in the structure as well. It is not about stepping back and taking your foot off the gas over what needs to be done; rather, it is about respecting the relationship with the VSS. We now have confidence in the board members and the senior management team. I appreciate that Margaret and Oliver are both in interim posts, but they have really stepped up to the challenge. They have to be commended for that.

**The Chairperson (Mr Nesbitt):** Sorry, Alex. Without sight of the management statement and financial memorandum (MSFM), we do not know what the proper relationship is.

**Mr Attwood:** You were at the earlier session, and we all acknowledged that. I am just pointing out that we replaced one robust procedure with one that you say is robust, but, somehow, in all of this, it missed what the true baseline was.

Has there been any discussion at a ministerial level, following June monitoring, about the VSS being ring-fenced from any reductions?

**Mr R Irwin:** Those may be discussions that are above my head. I have not been party to any meetings at which that was discussed.

**Mr Attwood:** Given your knowledge about all this and the scale — I do not know how many times you have been before the Committee on the issue, probably too many — should officials not just say, "Ring-fence the VSS moneys"? It is in the gift of Ministers.

**Mr R Irwin:** You are absolutely right to say that it is in the gift of Ministers, but it is a ministerial decision and not one that I am going to make on their behalf.

**Mr Attwood:** You might want to consider passing a paper to them that states that it is one of their options.

We keep getting told that so many recommendations of the review have been implemented partially and now three or four have been implemented fully. We just do not know the hard detail. We raised that previously. There was probably some process whereby you were going to get that information. We need to see it.

**Mr R Irwin:** Sorry, I thought that the service had provided the report directly, so I thought that you had it.

**The Chairperson (Mr Nesbitt):** Yes.

**Mr Attwood:** With the full detail? Then, I stand corrected. We will come back to questions on that later.

**The Chairperson (Mr Nesbitt):** You were going so well.

**Mr Beggs:** Thank you for your presentation. You indicated that considerable numbers of victims new to the service have been coming forward and that you have been having difficulty catering for their needs. For a lot of psychological issues under step 1 and step 2, people are dealt with by the groups, but those with higher levels of need might be directed towards the health service. Are you able to put a figure on the number of individuals who have come forward via that route who require additional work with the health service to try to address issues of violence that they met in their life during the years of terrorism?

**Mr R Irwin:** Unfortunately, I would not have that data. That is probably a question that could have been put to Oliver and Margaret in the session before ours today. They may have been able to provide that information. I can try to come back to you on that.

**Mr Beggs:** Yes, that would be useful. You mentioned that there were discussions with the health service about this area of work. Last week, I unearthed from the health trusts that there is a projected deficit of £130 million, so what is the likelihood of them providing that additional service in the area of mental health, which is already relatively underfunded, as is recognised in the Bamford report etc?

**Mr R Irwin:** Health officials will be talking to us in the context of their pressures right across their service. For us and for me personally, this is about trying to make sure that we can get a model that will have better outcomes for victims. If that should be sitting within a regulated and safe environment, which I think it should be — I think that that was acknowledged by the previous commissioner as well — it will be up to us to make sure that whatever model is implemented delivers for victims.

I do not want to pre-empt the direction of travel and outcome of those discussions, but that is what I am aiming to achieve.

**Mr Beggs:** Do you see step 1 and step 2 staying with the various groups, where they have that better access to individuals to help them get initial assistance and, after drawing them in, perhaps signpost them towards other services where other professionals would be available?

**Mr R Irwin:** Possibly. We need to acknowledge that the groups provide an invaluable service, particularly around social support, befriending and respite breaks. That is because certain victims feel more confident going to those groups, so of course we have to consider how best to utilise that going forward, and that may look like a model that involves the groups. We absolutely have to look at that.

This goes back to a point that was made yesterday in the debate in the Chamber and here again today: there are more groups than ever. There are groups that have split and become other groups. There are increasing pressures on the budget in the VSS, and it simply cannot provide letters of offer to all the groups that have presented to it. Therefore, we now have to look at a model that is more strategic in nature. What we do not want to have is provision of funding to groups where there is an overlap, where there are gaps in communities and where we know there is need. I am not sure that that has been done before, but it is certainly something that we want to look at now. I am keen to get the report from RSM McClure Watters, which has started on behalf of the commission and will hopefully guide us in the direction of how to address that particular problem. That is all in the mix.

**Mr Beggs:** You mentioned gaps. When I look through the groups that are funded in different counties and towns in Northern Ireland, I notice few, if any, from the Carrickfergus area, yet, in that area, there is a preponderance of police officers and those who perhaps served with the Ulster Defence Regiment or the Royal Irish Regiment.

**Mr R Irwin:** Yes.

**Mr Beggs:** Do you recognise that as a gap?

**Mr R Irwin:** I have not got into that level of detail. I suppose that that is where we need to rely on the experts and on those who deal with victims day and daily. We need to try to tackle that and to have that strategic approach. If such gaps exist, they need to be dealt with.

**The Chairperson (Mr Nesbitt):** I have just two questions to finish with, Ricky, if you do not mind. We have these two bids for a total of £3 million in October monitoring.

**Mr R Irwin:** Yes.

**The Chairperson (Mr Nesbitt):** Are there any contingency plans should either or both fail?

**Mr R Irwin:** The primary concern is to mitigate the impact on front line services. That is where we need to support the service as it works with those groups to implement the 4.4% reduction. Being a company limited by guarantee, the service will have to meet certain legal and statutory requirements. We will have to make sure that that happens. Unfortunately, beyond saying that, I cannot give any more detail, because this is about having the resources. We do not know the outcome of the October monitoring round, so I cannot go into it any more than that.

**The Chairperson (Mr Nesbitt):** OK. That sounds like there is not a contingency plan.

Finally, there is a 10-year strategy for victims and survivors. It was published five years ago. Is there to be a mid-term review?

**Mr R Irwin:** We have entered a period in which we are reviewing the strategy. We have talked about the architecture. We have talked about the need, in the context of constrained budgets, to look at how best to provide services. Although no formal review has been announced, we are, in effect, doing a mid-term review five years into a 10-year strategy.

On the previous point about contingency, I can say that we will want to work closely with the VSS, because its people are on the front line of service provision, and they will help us put together a contingency plan. I will have those discussions with Margaret over the coming weeks. In fact, to be fair, we have been having those discussions over previous weeks as well, so that will continue.

**The Chairperson (Mr Nesbitt):** OK. Ricky and Patricia, I thank you very much.