

Northern Ireland Affairs Committee

Oral evidence: Funding and delivery of public services: follow-up, HC 477

Wednesday 15 January 2025

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[Watch the meeting](#)

Members present: Tonia Antoniazzi (Chair); Dan Aldridge; Sorchá Eastwood; Claire Hanna; Simon Hoare; Adam Jogee; Katrina Murray; Dr Al Pinkerton; Gavin Robinson; David Smith.

Questions 44 - 83

Witnesses

[I](#): Alexandra Brennan, Northern Ireland Women's Budget Group; Celine McStravick, Chief Executive, Northern Ireland Council for Voluntary Action; Ann Watt, Director, Pivotal Public Policy Forum.

[II](#): Dr Graham Gault, National Secretary, National Association of Headteachers Northern Ireland; Pamela McCreedy, Chief Operating Officer, Police Service of Northern Ireland; Dr Alan Stout, Chair, British Medical Association Northern Ireland Council.

Written evidence from witnesses:

– Pamela McCreedy, Chief Operating Officer PSNI [[FDPS0010](#)]

Examination of witnesses

Witnesses: Alexandra Brennan, Celine McStravick and Ann Watt.

Q44 **Chair:** I would like to welcome you to the funding and delivery of public services in Northern Ireland follow-up session. I would like to welcome our guests today. Could you say briefly who you are and what your role is?

Alexandra Brennan: I am Alexandra Brennan. I am the co-ordinator of the Northern Ireland Women's Budget Group. The role of the group is to demonstrate how spend affects women and men differently and try to create a gender equal economy.

Celine McStravick: My name is Celine McStravick. I am chief executive at NICVA. We are the umbrella body for the voluntary and community sector, with about 1,500 members throughout Northern Ireland.

Ann Watt: Good morning to the Committee. My name is Ann Watt. I am the director of Pivotal, the independent public policy think-tank for Northern Ireland. Thank you for the opportunity to give evidence today and apologies for not being in the room. It just was not possible with other commitments this week.

Q45 **Chair:** Thank you for joining us online. I am going to start with Alex, as she is in the room. What is your view on the state of public services in Northern Ireland?

Alexandra Brennan: I do not think that it is any secret that public services at the minute are in a really poor place. The impacts of that, particularly on women, are severe. That is no secret: in the news, we hear about the incredible waiting lists and issues with ambulances within the healthcare system. This also contributes to unpaid caring responsibilities on women, which increase with the lack of domiciliary care packages and other issues around the social care system.

We have an unaffordable and inaccessible childcare system that impacts on women's ability to not only get into work if they would like but engage within the public sphere. Particularly in rural areas, public transport is inaccessible for many women. We know that, if a household has one car, normally it is the man who uses it rather than the woman. There are also issues with the benefits system that keep women in particular out of participating in public life.

I know that that is quite a broad snapshot of the situation in public services, but it is worthwhile to say. It is not that we do not necessarily hear a lot about it, but this impacts on a lot of things that our Government in Northern Ireland want to attain, so, for example, economic growth or a stronger, more productive economy. We know that Northern Ireland has a particularly low productivity rate. All these barriers keep women out of work or out of engaging in public life.



We are nearly at full employment in Northern Ireland, but our economic inactivity rate is the highest in the UK at 28%. The female rate is sitting at over 31%, while the male rate is about 24.6%. We have conversations with relevant Departments about how to get women into work or engage them in upskilling, but we then do not have those barriers removed. Despite all those programmes and the resourcing that goes to those programmes, while it is still important to have them, women will not be able to avail themselves of whatever upskilling or education is available or whatever roles that they can get into with these barriers in place.

Q46 Chair: Thank you for highlighting those points, Alexandra, because the previous Committee stated that education, healthcare and policing especially need improvement. You have added the other public services that need improvement, particularly for women. I will put the same question to Celine first and then to Ann. Can you highlight which public services particularly need improvement as well?

Celine McStravick: I am delighted to be with the Committee today. Apologies for not being there in person, but I have a clash with another committee in Northern Ireland. It is good to see our politicians so interested in the voice of the voluntary and community sector.

One of the most significant challenges for us has to be health and social care in Northern Ireland. It is the waiting lists, the inability to see your GP and the inability to move through the system and even get early diagnosis for key issues such as cancer. The life of the citizen here in Northern Ireland is significantly different when they try to get in through the health and social care system. We often hear here that, once you get into the system, the service is excellent, but the problem is accessing those services because of the huge backlog.

I would also have to add issues regarding education, particularly for children with special educational needs. We have tried for many years—really tried—to anticipate the demands regarding special educational needs and to create a plan for those children. We know that they will need extra support and yet, year on year, we seem to fail at that miserably. Here, the parental voice, particularly through the voluntary and community sector, says that actually it is no longer good enough.

Alex has already highlighted childcare. That is a huge issue in Northern Ireland. In fact, many of our organisations, the members of NICVA, provide childcare solutions, and they are often at the brink of despair because they cannot get enough money to run the services they are running, while their demand is increasing day in, day out. There is that real perfect storm.

Of course, I have to add infrastructure. The list gets longer. In Northern Ireland we have a very small rail network. We rely heavily on buses for anything west of the Bann. If there is any bad weather or any issues at all, the whole region grinds to a halt. Even running up to Christmas, our



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capital city was gridlocked because we were not able to cope with the demands of infrastructure and transport.

I will add on to that the issues around the environment and not being able to solve issues such as Lough Neagh. There is also our need, I suppose, to look after our climate change issues, where we feel like we are not able to grasp the nettle in terms of delivering a really good solution for Northern Ireland. That is a bit of an introduction, Chair.

Ann Watt: I will not repeat what Alex and Celine have said. The outcomes in health are very poor compared with the rest of the UK in terms of access to consultants, emergency department waiting times, access to GPs and so on. One thing I would pick out is that more than half of people in Northern Ireland wait more than a year for a consultant appointment. That is only 3% in England, so that gives you a really stark comparison.

There are a few other things I would pick out that have not been mentioned so far. We have 47,000 households waiting for social housing. Connected to that, we have 19,000 homes unable to proceed in the build process because of waste water capacity constraints. If I had to highlight the two biggest challenges in public services in Northern Ireland, it would be the health system overall and the waste water capacity in our infrastructure.

Another thing I would say, which is really important, is that key to Northern Ireland's future prosperity is economic growth. That is driven by productivity. Our productivity is among the lowest of the UK regions. We have a high percentage of people with no qualifications or very low qualifications, a lower percentage of graduates and not enough people with mid-range vocational qualifications. All those things are important for the future prosperity of Northern Ireland. It is important that we talk not just about public services but about driving economic growth.

The final thing to say on this would be that of course many people are receiving excellent public services day to day, whether that is in the health service, schools, councils or the justice system. Public services are continuing to be delivered to the public and the staff are doing an excellent job in challenging circumstances. We have structural problems in how services are delivered, which are resulting in the outcomes and performance being very poor in a lot of cases. Perhaps we can talk a bit more about that in the rest of the session.

Q47 **Chair:** I am going to stay with you, Ann, because I would like to know what your view is on the impact of multi-year budgets on public service delivery and their outcomes.

Ann Watt: Multi-year budgets are essential for Northern Ireland. As elsewhere, multi-year budgets are the key to the planning of public services, workforce issues, and transformation and reform. You heard last week from Sir Robert Chote and others that we have had a series of



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single-year budgets in Northern Ireland—I think that there have been 10 or 11 single-year budgets.

We must move on to multi-year budgets in the future. That is absolutely essential. I think that that is the UK Government's expectation for the spending review this year. We need to see the settlement that is given to Northern Ireland then being passed on to Departments and others that are funded by the Northern Ireland Office, so that they can also plan.

We have had a real issue with stop-start Government in Northern Ireland, as many people will know. That necessitated a series of one-year budgets and, even worse than that, a series of really unsustainable budgets. We need the UK Government to work with the Northern Ireland Executive to get us into a situation where we have a fair and sustainable multi-year budget for Northern Ireland. We cannot keep going from one rescue package to the next. We need a much more sustainable system. It is absolutely key that the upcoming spending review delivers that.

Celine McStravick: You will be familiar that, when we had the stop-start Government, actually the voluntary and community sector did not stop. We had to continue to provide all of the services that were needed, irrespective of whether politicians were here or not. That has put huge pressure on the voluntary and community sector.

Multi-year budgets, as Ann has said, are absolutely essential, but real investment and transformation across Northern Ireland are also essential. I often get frustrated because we talk about public service or public sector transformation, and we use the two terms interchangeably. I want us to concentrate, as this Committee is looking at, on public service transformation, because our public services are delivered by more than just our public sector. The voluntary and community sector has been there through thick and thin.

When we faced huge conflict in Northern Ireland, the voluntary and community sector provided that steady hand, supporting communities most in need. We have also, as a sector, faced the result of Brexit and huge amounts of EU funding leaving Northern Ireland, in addition to the cost of living crisis, where our costs are going up. Multi-year budgets are essential, but they are definitely not the golden bullet. We need more.

Alexandra Brennan: Ann and Celine have mentioned some really great points there. We would be a massive supporter of multi-year budgets because they allow for proper resourcing of some of the longer-term strategies that we have. That would let us move out of that short-termism and more reactive way of thinking, as opposed to what we should be doing, which is preventive spend and policymaking.

Celine brought up a great point that, yes, the community and voluntary sector, in the absence of Government, or with cuts or reductions to Government services, has delivered public services. Multi-year budgets would obviously help. We have many women's centres in particular where



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workers do not find out until March that they will have another year of funding so will, year on year, get redundancy packages. That also leads to a lot of younger people who are perhaps not used to that sort of work in the sector leaving the sector immediately. We do not have a workforce coming up to replace people who are in that sector currently but who want to move away from that work.

We talk about transformation and that is important, but there are other aspects that we would want to see happen to our own processes with a multi-year budget and with more opportunity and more room to work, as I said, in the long term and preventively. That is about introducing transparency and accessibility within our budget process, which we do not really have. We are starting to see a move towards that within the most recent publication of the draft budget from the Department of Finance, which included a fact sheet that explained the budget process here. We would say that transparency, accessibility, improved participation and meaningful consultation would be incredibly important, so not just a transformation of our processes, but those aspects as well.

Chair: Because of time, if somebody has already said it, feel free to say, "It has already been covered" in your responses.

Q48 Simon Hoare: I want to continue this exploration of the voluntary and community sector. We know that, when public services or public sector-delivered services come under pressure, lots of people will look to the voluntary and community sector for the support that they are looking for. I wondered whether the panel of witnesses could say a word or two on how they assess the appetite for and commitment to public sector commissioning of services from the voluntary and community sector, particularly in relation to those multi-year settlements. As one gets cut, are we then finding that lots of people, or too many people, have nowhere to turn? I suppose allied to that, are you able to identify at this stage any particular groups that are more affected than others by the current situation?

Alexandra Brennan: Where there are cuts in Government, the community and voluntary sector, whether it receives funding cuts or not, continues to deliver those services and actually has added services that are not within its remit. For example, I work within a women's centre and, over the past five or so years that I have been working there, we have had to start a discretionary support fund for the students who come. It is a training centre. We have had a food bank table come in that we refill at least three times a week. Those are all services that the centre had never done before. In the absence of Government services and support, it has had to take on those services with the same amount of funding, which was given only to deliver the targets that were within the funding, whether it was Government funding, trust funding or whatever.

The community and voluntary sector is holding up the services that have been reduced or cut by Government, but that pressure is and has been



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mounting. When that crumbles—because I do not think that it can be sustained much longer—we will see the full brunt of the cuts that have been faced by the community and voluntary sector.

Briefly on the point of the groups that have been most impacted by these cuts, it is no secret that women normally bear the brunt and have borne the brunt of economic downturns and cuts to public services. I would like to say as well that it is not as though women are all affected equally; a lot of the protected identities within our own equality legislation, section 75, have also been impacted. It is just that, when women have those additional characteristics, the impacts are then greater. I highlighted some of those impacts on women in my answer to the first question.

Chair: Simon, would you like to aim your question?

Simon Hoare: With the greatest respect to Ann, Celine may have a more direct view on this question.

Celine McStravick: By way of background, I will note that the voluntary and community sector employs over 50,000 people in Northern Ireland, which is about 7% of the workforce here. We have over 7,000 organisations as registered charities. It is quite a significant bit of the infrastructure and framework in terms of delivering public services here.

In reference to the question about public sector commissioning, you will not be surprised to know that a lot of our large voluntary organisations here work very closely with our Government Departments, health and social care trusts and local councils in delivering commissioned pieces of work. What I would note most readily is the lack of consistency regarding that procurement across Northern Ireland.

If we consider health and social care trusts that commission services such as family support, mental health and working with people with learning disability—all those really critical areas of work with citizens—it has been mentioned to me on several occasions that, when you work across the health trusts, you will have the same organisation providing a very similar delivery model, but it will be procured very differently depending on which health trust it is. There is definitely room and scope for having some consistency regarding procurement. That would offer some efficiencies as well.

At the moment and over the past few years, we have had budget cuts. Last year was particularly tough for all of our sector. The autumn Budget did not help, with the introduction of the increase in national insurance contributions. We did a survey of our members recently when that announcement came out and over 76% of our members told us that that would have a severe impact on their service delivery. In fact, for some members it is going to cost them over £200,000 extra on their payroll. That creates a further burden in terms of service delivery. I suppose the overall message is that we would like to work much more closely



regarding procurement of these commissioned contracts and make sure we have better consistency.

- Q49 **Simon Hoare:** On that point of rising costs, particularly but not exclusively on the voluntary sector, Celine, as you have just highlighted, should we be concerned that current operators will retreat from the field of delivery, because it is too much of a hassle scrabbling around for every brass farthing and people are not content with the level of service that they are providing? That would leave a rather large black hole to be filled with nobody left to fill it; there would be a constriction within the sector as a result of public sector pressures.

Celine McStravick: Yes. We are very clear that the current picture is unsustainable. In the absence of a Government and during covid, our sector really was the frontline. It was our sector that came forward with the food parcels and the help for the most vulnerable. We have definitely come to a stage where we can no longer hold it together with unsustainable funding and a lack of involvement in strategic policy development. There is a whole ethos of, I suppose, not valuing what we have. I often say that, if you closed your eyes and imagined Northern Ireland without the voluntary and community sector, it would be a very dire place indeed. That is not where we want to get to. Alex rightly said that our organisations are hugely resilient, but we are running out of that patience and resilience. There is only so much we can take.

- Q50 **Simon Hoare:** All our communities would be impoverished without the community and voluntary sector. Let me ask this final question, if I may, to Ms Watt, so she can validate her appearance fee, as it were. There is a huge amount of hope pinned on the shared prosperity fund. What is your assessment as to how it is playing out?

Ann Watt: I think that I will actually pass that question to Celine, who will give a better answer than I could, if that is okay.

Celine McStravick: Thanks, Ann. Ann is doing that because NICVA has been leading a campaign regarding UK shared prosperity to make sure that we do not lose sight of the impact that those organisations are having in Northern Ireland. The fund has made a significant difference to Northern Ireland. For our sector alone, from the economic inactivity part of that funding, we have £53 million coming into Northern Ireland and over 60 organisations delivering pathway to employment projects with those most in need.

Again, unfortunately, we are looking at another cliff edge—I feel like a broken record at times—where we know the money is running out in March 2026. Even in this interim year, although we were glad to see a continuation for a year, we are looking at a 40% cut. What does that mean on the ground? That means that organisations are looking at, “Do we make staff redundant? Do we take on fewer people with learning disability? Do we work with fewer prisoners? What do we do?” Our sector



is left to try to, as you rightly said, look around for a few more brass farthings.

We need to take a step back and think about this strategically. These are people's lives we are dealing with. This is not about widgets. This has significant impact on the life of someone in Northern Ireland. We are very eager to make sure we see a new co-design process start, so we are ready and prepared for what comes next from shared prosperity. We are really looking forward to the spring announcement to see whether there is anything from the Government to give us more of a long-term vision for what is going to come next.

I have had meetings with all our Ministers here in Northern Ireland, and most recently with the Department of Finance, to say that we cannot sit on our hands. We cannot wait. We need to be part of the solution of the next stage. We have an economic inactivity coalition, which NICVA convenes. Our organisations are hugely eager to be part of developing what comes next and make sure that we do not lose the progress we are making regarding economic inactivity.

Q51 Katrina Murray: Thanks for joining us today. I want to pick up on what Alex and Celine have just been saying and explore a wee bit further. You have been quite clear that, effectively, the sector has been filling the gaps, but that cannot happen indefinitely, because there is only so much money and because of being able to identify those pots. Also, the fact is that it then becomes part of the core purpose. What I want to explore briefly with you is pay in the sector and how it compares with the public sector. Is there an expectation that more work is being taken on by volunteers, which then becomes a much more limited resource?

Alexandra Brennan: I do not have the figures exactly, but I do not think the pay in the sector is necessarily competitive with pay in the public—and definitely not the private—sector. Sorry, what was the second part of your question again?

Q52 Katrina Murray: It was about paid roles versus volunteer roles. Are more roles being taken on by volunteers?

Alexandra Brennan: Again, I do not have the figures. Celine might be able to speak better on that as the head of the community and voluntary sector. I know that sometimes the term "community and voluntary sector" makes it seem like a lot of it is volunteer work. It is not that you are suggesting that it is not delivering public services, but you could say that even a lot of the people who are getting paid for their roles are either working part-time roles or working very precariously. They are working overtime that will never get paid back. Even if they get time off in lieu, they will never get that back. While I do not know exactly the breakdown between paid roles and voluntary roles within the sector, overall the sector works very precariously.



Celine McStravick: Last year, NICVA was incredibly concerned regarding our workforce and the value of our workforce. We conducted a piece of research across the sector and a bit of a workforce overview. It was hard reading. When we went out to the sector and held various workshops across Northern Ireland, we were told repeatedly about the huge issues regarding retention of staff and recruitment of staff. That was for a number of reasons.

One reason, of course, is absolutely salary. It is impossible to compete with the public and private sector, but in our sector we also try to sell the other benefits, so the huge rewards of working in a sector that is very values-based, where you can see your impact readily. You have scope to be entrepreneurial and see the change you are making day in, day out, but that only goes so far. That is why our sector told us that 50% of them are really struggling to retain and recruit staff.

A lot of our staff are moving into the public sector, particularly local government, and then, when they take those jobs, coming back out to our sector to ask, "Now can you help us deliver?", which is a position you do not want to be in. We have seen a pattern where the public sector is advertising roles that could have been commissioned out into our sector, such as roles regarding poverty and running food banks and social supermarkets. Those are all best placed in our sector. We would like to see that trend change and for the best people to deliver the roles to be commissioned to do that work, rather than keeping the money in the public sector.

Regarding volunteers, in Northern Ireland we have over 200,000 volunteers involved in our sector, and that is the very least. Those volunteers are largely involved in running the organisations as trustees and board members. The organisations that rely on volunteers can also then offer good value for money. It is a hugely efficient model of getting more done for less. There are definitely lessons that could be learned there in terms of using the public money even more wisely by investing in our sector, rather than keeping it in-house.

Ann Watt: I do not have much to add to what Alex and Celine have said. Celine's reporting of NICVA's workforce survey was very important. The voluntary sector is key to public service delivery and beyond in Northern Ireland. It has been hampered in many ways by no Government, covid and the periods of very tight funding. It has been very difficult for the voluntary sector to retain their staff, and as a result of that they go above and beyond, holding public services together in a lot of cases, but the main points have already been made.

Q53 **David Smith:** I will start by declaring an interest, having worked in the voluntary and community sector for the last 23 years, seven of which were in Northern Ireland, albeit in the early 2000s, so way back in the mists of time. I was going to ask about the UK shared prosperity fund, but we have touched on that already, so I will broaden out my question a



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little and try to be as straightforward as possible. We have heard about the value of the voluntary and community sector in Northern Ireland: 50,000 employees, 200,000 volunteers, 7% of the workforce. Do Government understand the value of the VCSE in Northern Ireland and, if not, why not?

Alexandra Brennan: I do not think so. It is talked about a lot: "We value the community and voluntary sector". You always hear that, especially maybe at a strategy launch or when you engage with Departments or officials. Practically, we are talking about actually resourcing the community and voluntary sector, or even taking the research that the community and voluntary sector does, because we have an issue of data collection in Northern Ireland. In the community and voluntary sector, the research that NICVA has done, and research that colleagues of ours in the women's sector at the Women's Regional Consortium do, covers a lot of the gaps that we see within Government, but that research is not given the same weight as government research would.

For example, I was on the gender equality co-design group and obviously there would never be funding for it, but an amount of money went into that strategy development, which at the minute is sort of in limbo. You had so many experts on that group; imagine if you paid them a consultative fee, but we would never even expect that. That is the relationship between us and Government. The community and voluntary sector is lucky to be in the room and you still have to push your way in. It is nice to have kind words, but having the actual resourcing and a valued relationship would give support to those kind words, if that makes sense.

Q54 **David Smith:** Absolutely, yes. Celine, how would you answer that question?

Celine McStravick: Yes, I concur. I would offer some examples where our sector has really stepped up and demonstrated its value, because we do not have that sense of entitlement. We do not think we should just be valued; we are really evidence-based. If I give an example with the review of children's social care in Northern Ireland that was conducted a few years ago, that review was done by Professor Ray Jones. It showed significant issues regarding social care for children in Northern Ireland in a number of workstreams. To be really truthful, it was our sector that galvanised around that and actually said, "Enough is enough and we want to see change".

Our sector brought itself together under the Reimagine Children's Collective, with no extra funding. We were not asking for money. Those children's organisations went back to the heart of what they exist to do, which is to make outcomes better for children. They moved through the process that the Department of Health had set up. As a result, the Department of Health then recognised them and accepted the value of



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the sector. It was a hard challenge for the children's organisations to come together, but they really showed their true value.

That should be absolutely normal behaviour. We should not have to ask to be at the table or push ourselves into rooms. I am convinced that our sector is full of hugely entrepreneurial, problem-solving individuals. We are the answer to policy issues. We are not the organisations that are going to make things more difficult. We will always make things easier because we see the problems day in, day out. As Alex said, there are lots of kind words; I would love to see more action.

Q55 David Smith: I have one final question, if you can try to answer this in a sentence. What is the solution to the funding of the sector? That is to anyone who wants to answer it, including Ann.

Celine McStravick: I can answer that. It is to stop treating the sector differently. When we talk about transformation, it is transformation of public services. It is not about the health and social care trust or the education authority. It is about saying, "These are the services our citizens need. Who is best to deliver those services?" That should provide part of the solution.

I will just give, briefly, one example. I know that I am stealing another sentence. I am really sorry. We have talked a lot in our programme for government around digital transformation of our public sector. That is a perfect example. Why would we take out one piece of Northern Ireland and talk about digital transformation? Why does that automatically exclude digital transformation in the voluntary and community sector? That is so shortsighted. It does not see the whole ecosystem of how we run Northern Ireland better and already creates a division between the haves and have-nots. I would say, "Just treat us equally". We do not want special treatment. We just want equal treatment.

Alexandra Brennan: Celine covered most of it. It is nothing about the question, because we always say "community and voluntary sector funding", but it is even the word "funding" as opposed to "investment". We would see investment in other sectors. Again, like Celine is saying, treat us equally, but with the view that there are experts who work in the community and voluntary sector and that we have equal value to bring, just as much as any other sector. There should be investment in the community and voluntary sector, as opposed to just pots of piecemeal funding.

Ann Watt: There is real expertise in the voluntary and community sector in delivering lots of public services. If that was not there, public services in many areas would fall apart in Northern Ireland. We need to respect that expertise, involve them in a real way in policy development and, as Celine and Alex have said, put in place funding arrangements that are fair for them, longer term and not hugely burdensome and restrictive.

Chair: Before we move on, to be mindful of time, can we keep our



answers as concise as possible?

- Q56 **Gavin Robinson:** Good morning to you all. Ann, I want to ask you this question and it is around assessed levels of need. You will know that, as with all things in life, not least public services, there is a big difference between want and need. Over the last three or four years, it has taken quite some time and a lot of effort, in this Committee and many other fora, to press the argument around need. That argument has been landed for this year and future years, but obviously it did not go back to the start of the spending period.

The argument on need has been secured. My question is whether it has been secured adequately, which is different from wanting more for every service that we have. Has it been secured adequately? More importantly, if it is still not adequate, is the focus on need sufficient, or does there need to be a focus on reform, political decisions and hard choices?

Ann Watt: Those are all very important points there. I will make several points about need to start with and then talk a little bit about reform. To summarise, reform is absolutely essential. That is the most important thing for public service delivery in Northern Ireland. Sorry, there are two important things. One is a fair and sustainable funding arrangement from the UK Government. The second thing is reform of public services. I will try to keep this brief. This is obviously a complex subject.

The Fiscal Council says in its independent analysis that Northern Ireland is currently getting 125% to 127% of funding per head in England. That is the amount that Northern Ireland is above England at present, which includes, importantly, the one-off uplifts from the 2024 restoration financial package. Is that adequate to meet Northern Ireland's need? The Fiscal Council asked a separate question: "What is need for public funding in Northern Ireland?" It said that it is around about 124%.

You put those two things together and you would conclude that Northern Ireland is getting around about its level of need at present, compared to England. Obviously you can look at different methodologies and data, and come up with a different number, but I would put a lot of weight on what the Fiscal Council has said in its analysis. I would say that, at the minute, Northern Ireland is funded around about its level of need.

Very importantly, as you heard last week from the three experts who were witnesses then, there is a cliff edge in 2026-27, where the one-off additions from the financial package fall away. It is essential that the UK Government address that cliff edge in 2026-27, because that would plummet Northern Ireland from somewhere around 125% of need to something like 120%. That has to be addressed. It would be a drop-off of something like £520 million. You cannot countenance that in terms of a fall in funding, so the cliff edge in 2026-27 must be addressed.

The final thing I would say about this, which links into reform, is a really important point where we ask ourselves, "If Northern Ireland is getting



the amount of funding to cover its current needs, why are we in such a dire situation in public services at present?" My answer to that would be that public services, as currently configured in Northern Ireland, are not sufficiently funded to deliver what is required, but the answer there is not necessarily more money. The answer is reform in public services, which we have not done sufficiently in the past.

We do not seem to have enough money to deliver public services as they are currently configured, as we can see in the problems that we have right across the health service and in other areas at present, so we need to change how we deliver public services. We have not done that in the past, perhaps because of unstable or absent Government. Realistically, we have to be honest about a failure to make difficult decisions. We need to look at how we deliver public services, not just at the amount of money that is going in, but how we spend that money. That is where the case for transformation is extremely strong and, I think, unavoidable.

Q57 Adam Jogee: Good morning to all of you. Thank you for your answers so far. You have touched a little bit on what I am going to touch on, so that is quite helpful. I will not detain colleagues longer than necessary. On the points about reform and not requiring more funds as a rule, can I ask you which public services in Northern Ireland you think are operating effectively?

Alexandra Brennan: Truthfully, I do not know whether any of them are operating effectively. That can be demonstrated by the Finance Minister, within her statement on the draft budget, saying, "No Department has received the level of funding it has bid for". I suppose that the question of which Department works effectively and which does not forces Departments into silos. Because of the way that Northern Ireland works, where we have five Governments in power, that can already create a siloed approach to policy making, especially in the absence of a programme for government where we do not have a consistent policy line that runs across all levels of Executive Departments. That can make even what Ann is talking about—public service reform and change—really difficult. I will finish there because I know we are tight on time.

Q58 Adam Jogee: None was the answer. Ms Watt, what about you?

Ann Watt: I would struggle here. We have missed opportunities over decades to make choices about reform and change, particularly in the health service. If I had to pick out one area that has improved and improved its efficiency, I would point to the prison service, which has been very challenged in recent years in terms of its budget. It has possibly then been forced into a situation where it has had to make reforms and become much more cost effective.

This is possibly unfair, but otherwise I am struggling to pick out examples of where we are leading the way. There are plenty of areas where we know what should happen, particularly in the health service with the Bengoa and other reports. We know what we should do, but we have not



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done it. My encouragement to the Northern Ireland Executive would always be, "No more reports, please. No more strategies. Let us deliver the strategies that we have". We know the changes that need to happen. It just has not been actioned yet and we have not taken the tough decisions.

Q59 **Adam Jogee:** That is interesting. Thanks. Celine, what about you?

Celine McStravick: I do not think that I have anything more to add.

Adam Jogee: Therein lies the challenge. Thank you very much.

Q60 **Sorcha Eastwood:** I think that we can all agree that the work done by the community and voluntary sector across the north is invaluable. Celine, you will know that it is a frustration of mine also that we hear about co-design and co-production, and then, when the rubber hits the road, you guys often are not at the centre of these decisions in terms of helping with transformation.

When Gavin talked about reform, I nearly died for a second. I thought, "We have got through here", but, no, it was a different sort of reform. I was going to talk about reform of the institutions, because I think reform of the institutions is key to all of this. Ann, the last time we met, you were not convinced of the need necessarily of reform, or something along those lines. For me, the issue of the single-year budgets is core to that.

Celine, you have touched on the issue of procurement. At the minute, we do not have a single strategy for Northern Ireland in terms of looking at that. Surely it defies logic to suggest that we continue on in a system that could collapse at any point in the future. That surely is not the way to embed transformation and longevity of improving public service delivery, is it? That was an "is it" with a question mark, by the way, to anybody who is brave enough to answer.

Ann Watt: I am happy to come in there. We absolutely need stable Government in Northern Ireland. We have had one year of the Executive being back. They seem to be functioning reasonably well. They seem to be functioning better than in the past. We do not just need the Executive to be there. We need them to be effective in Government and to start making difficult decisions that are going to improve the delivery of public services and transform public services. The current arrangements can work. They have worked in the past.

Q61 **Sorcha Eastwood:** They have not worked a lot, Ann, to be fair, in the past.

Ann Watt: There are periods where they have worked. With sufficient leadership, trust and strong relationships, they can work. I am not going to take a particular view on whether reform of the institutions is necessary. They can work if there is sufficient commitment to them. The thing I would emphasise is that the institutions, as currently configured, are the only thing that has been accepted in a referendum of all the



people in Northern Ireland and after, obviously, a very difficult, complex negotiation process.

Q62 **Sorcha Eastwood:** Do you have any views on that?

Alexandra Brennan: I would probably take the same position as Ann that it would be maybe outside my remit in terms of reform of institutions. It was a really important point that was brought up, and that you yourself had made, that, because of political instability and single-year budgets, we find ourselves recreating strategies over and over again and trying to pick up pieces, whether that be because of collapse or financial instability and single-year budgets. For example, we had a gender equality strategy that was drafted and all this money spent on it. It was never implemented and then they started the process again. Within the remainder of the three-year mandate, that may not be implemented, and we will start that process again.

Either Ann or Celine mentioned before that we see a lot of reports and strategy development but then no action. When we are talking about funding of public services and how we make up some of that funding, we have strategies that only need tweaking. They are sitting there, dusty, on shelves. The money that is spent on recreating those from scratch, when you see that that could be implemented or directed towards actually delivering some of those pre-existing strategies, could be an area that we would direct Government to looking at.

Celine McStravick: I would further add that, as Ann said, we want stable Government. We are often at risk of distracting ourselves from the matter at hand. There are huge issues regarding lack of consistency and oversight of how we run Northern Ireland. I am not just saying that that is the Northern Ireland Executive. We have people working in local government and each local council operates completely differently from the other. Our health trusts operate completely differently. We created one education authority that still feels very regional. Our Public Health Agency still operates differently depending on where it is. There is a bit about looking at the machinery of how we make things work, so our existing systems, and maybe taking some of the politics out of it, introducing more evidence and asking, "What could work better and how do we make that work?"

From the viewpoint of the voluntary and community sector, we sit around absolutely thousands of different tables, whether it is integrated care services for health, labour market partnerships or community planning partnerships. The list could go on. At all those tables, our sector is sitting there asking, "What is different as a result? Where is the 'so what'?" The sense for me is a bit of impatience. Although I am up for a political discussion any time, at the minute I think that we have a sense of urgency of getting on with making this place work better.

Chair: That leads nicely on to our last question, from Dr Al Pinkerton.



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Q63 Dr Pinkerton: Thank you very much, everybody, and good morning. I guess that it is in the spirit of the co-design that we have been talking about this morning, but also taking Ann's and Celine's, and indeed Alex's, point that you all recognise the need for reform and the possibility of cost saving and efficiencies there. The Executive also have a challenge that they need to raise revenue in order to pay for services as they are. In the spirit of bringing you into that conversation, do you have any ideas of how the Executive might effectively try to raise revenue locally? Perhaps put another way, would you recommend that they avoid particular reproductions of unjust or unfair revenue raising strategies that you may have seen in the past and recognise as problematic for your particular communities?

Ann Watt: I will keep this brief, given the time. Revenue raising is not a popular topic in Northern Ireland, but it is something that needs to be given fuller consideration. Northern Ireland households pay less in local household charges than in the rest of the UK. The Fiscal Council estimated in 2021 that that was between £550 and £900 a year less, largely because our rates are generally slightly lower than council tax and there is no charging for water in Northern Ireland. That, as a little aside, is part of the reason why we have a catastrophe in our water infrastructure at present. The topic of revenue raising needs to be addressed more fully in Northern Ireland. It has been resisted so far.

However, I suppose the caveat would be that, even if you raised domestic rates by, say, 20%, you would raise about £150 million a year. This is not the answer to all of Northern Ireland's public finance problems. It is part of the answer, but it is not all of the answer. Any politician in the room will know that a rise of 20% would be hugely unpopular and resisted. Revenue raising needs to happen more in Northern Ireland. It needs to be considered properly and not just be dismissed by our politicians, but it is not the whole of the answer.

Celine McStravick: To add to what Ann said, our concern is that revenue raising often impacts those who are most in need. We would want to see an equitable distribution of any revenue raising. I suppose what is often shocking in Northern Ireland is our level of poverty. It would be remiss of me not to remind people that 19% of children are living in absolute poverty in Northern Ireland. There are quite shocking figures from Trussell Trust talking about how last year, from April 2023 to March 2024, over 90,000 emergency food parcels were delivered, which was an 11% increase on the previous year. Statistics can often be deceiving, but those two statistics are something we need to constantly bear in mind. We need to look after those who are particularly vulnerable in our communities.

Alexandra Brennan: I would refer to what some experts at the Nevin Economic Research Institute have talked about when talking about the revenue raising issues and some of those super parity issues that were brought up in the previous year. Some of them could be viewed as



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anti-poverty measures. Like Celine has demonstrated, we have a serious issue of poverty in Northern Ireland. There are things like the five-week wait, which, as we have talked about, disproportionately impacts women. We would be concerned that, if it was removed, it would only worsen the situation that is already dire for many people, in particular women, in Northern Ireland.

There is something that we have not heard in this conversation, which is not necessarily a silver bullet. Like Ann said, even the revenue raising powers would not be able to completely fix the finances in Northern Ireland, but we have really poor compliance with our section 75 equality obligations. We believe that better compliance in the way we assess how resourcing can improve or might actually hurt equality in Northern Ireland, and how to mitigate that from the start of the policy process until even the monitoring phases, could better determine and direct resourcing to have more targeted outcomes. I suppose that is what I am trying to say.

That also coincides with poor data collection. We need to improve our data collection, whether that be a data audit of what data we are collecting that we do not need or where the data gaps are, because we need to have decision making driven by data that is accurate and covers all different equality and disaggregated groups. Something that we would promote within the Northern Ireland Women's Budget Group is a thing called gender budgeting, which demonstrates how spend affects women and men differently and is a gendered lens of equality analysis. There are other issues at play here, but we really believe that better compliance with our equality legislation and bringing in some other analysis techniques could better assign resourcing to where need is felt.

Chair: Thank you very much. I would like to thank Alexandra Brennan, Celine McStravick and Ann Watt for your time. If there is anything else you wish the Committee to know that you feel that you may not have had the opportunity to say today, please could you put it in writing to us? We would welcome any other comments. Thank you.

Examination of witnesses

Witnesses: Dr Graham Gault, Pamela McCreedy and Dr Alan Stout.

Q64 **Chair:** Welcome to the second session of the funding of delivery of public services in Northern Ireland, our follow-up. I would like to welcome our witnesses, Dr Graham Gault, Pamela McCreedy and Dr Alan Stout. Could you briefly say who you are and what your role is?

Dr Gault: I am Graham Gault. I am the Northern Ireland national secretary of NAHT, which is the National Association of Headteachers. I represent school leaders across all our sectors in Northern Ireland.



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Pamela McCreedy: I am Pamela McCreedy. I am the chief operating officer of the Police Service of Northern Ireland. Thank you for the opportunity to be here today.

Dr Stout: I am Alan Stout. I am a practising GP in Belfast and I am chair of the British Medical Association in Northern Ireland.

Q65 **Chair:** I will start with a very bold question. What is the state of education, health and policing in Northern Ireland? If you want to mention funding being adequate or not, please do.

Dr Gault: Thank you for the opportunity to come and talk to you. I was at this Committee around five years ago and I was appealing to the Northern Ireland Affairs Committee at that time because, as a serving principal, I felt the state of school funding and the allocation of money to our schools at that time was in crisis. My school and others were being subsidised and held together, basically, by the good will of parents who were supplying basic materials to keep schools running. At that stage I could not imagine the situation could have deteriorated, but it has deteriorated significantly since then.

Indeed, at the end of March in 2024 at least 50% of our schools in Northern Ireland were operating from a deficit position. The Education Authority at that time estimated that without any additional allocation of money that would rise to 80% of our schools. There has been no additional allocation of money. That was also without calculations around national insurance rises, pay increase, inflationary increases and so on. Our schools are really struggling and our most vulnerable children are paying very heavily for this situation.

Dr Stout: Our health service is not in a good place at all. That is well recognised and has been reported very clearly over the past couple of weeks. It has been reported UK-wide, but Northern Ireland is in a particularly bad place. The two windows to our NHS, the two most fundamental reasons that you would access the NHS, are if you are sick, where you would try to get an appointment with your GP, or in an emergency situation, where you would go to the emergency department. Both are really struggling at the moment, and we hear that every day from our patients. We know the real-time harm that that is causing to people and, as a practising GP, I see that every single surgery that I do.

We have two problems with funding of the NHS in Northern Ireland. One is that the total amount is not correct; again, all of the projections have shown that. When we project back, even to 2013-14, we know that we have always had to allow for a roughly 6% growth in NHS funding. Based on that calculation we should be sitting at about £8.7 billion. At the moment we are well short of that.

The 6% is a very conservative measure in that it allows for 1% in terms of inflation. We all know how much of an underestimate that has been over the past number of years. It allows for 1% in terms of new



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technologies, new drugs and so on. Again, that is a massive underestimate, given what has happened recently. It allows 4% for demographic change and change in demand. Again, Northern Ireland actually sits slightly outside of the UK. In Northern Ireland we are more successful at keeping our elderly patients or elderly friends and colleagues alive, so we have had a greater growth of the over-85s than anybody else has.

The other fundamental difficulty with funding that we have within the NHS in Northern Ireland is that we put the money in the wrong place. Plan after plan has shown that with the demographic change we need our patients, particularly elderly patients, at home, and we need to deliver the care as close to home as we can. Year after year we put it into the acute sector. The acute sector cannot deal with those patients. They cannot discharge those patients. They eat and swallow more and more resource, and then we wonder why we end up with crisis after crisis in our acute sector while we have a starved primary and community sector.

Pamela McCreedy: The first point is that policing is crucial in Northern Ireland. In many ways it is the peace dividend and the fabric of the society that we are there to support. It is becoming an emergency service of first and last resort at the moment. For us, since 2010, and certainly since devolution, our budget has actually been cut by 3%. It is standstill at best and, with inflation, that is a 36% reduction. Alan makes reference to the almost 90% increase in health budget, and, indeed, the education budget, but that has stood still for us.

The recommendation coming out of Patten was that we would have in the region of 7,500 officers and 3,000 police staff. We are sitting at below 6,300 officers at the moment and just over 2,200 staff. That is a significant problem for our ability to respond to our communities, which is what community and neighbourhood policing is about in Northern Ireland. We have a 300 reduction in our neighbourhood policing teams. We are having to merge teams. We are not able to give that commitment to 16 hours availability of a day. There are extractions of those teams, in much the same way as health, to respond to the emergency response aspect of that on our local neighbourhood policing teams. We have had a drop in the pure numbers and availability of officers to our tactical support teams, which is our public order. In the summer that resulted in us requiring mutual aid from our colleagues in Scotland to be able to deal with that.

We need to be able to respond to our communities and, indeed, our victims. Our murder inquiry teams—our MIT—are dealing with caseloads in the excess of 20. The national recommendation is to hold six. That slows down the ability for us to get justice to perpetrators at large. We see that having an impact on our workforce. In many ways we are breaking our workforce, just not being able to moderate at-rest days and not getting leave. For, us that is having an impact on our attendance ability and, indeed, our ill-health retirement aspects.



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Our funding is fundamentally not there in line with what Patten would have recommended, the 7,500. We are making a case with our Department to seek to recover to that over the next three years, but we are fundamentally short from a sustainable policing model in Northern Ireland.

Q66 **Chair:** Pamela, you are seeking to recover that money, but how would you propose that the police are funded adequately?

Pamela McCreedy: We have said that we need to get back to those figures. We are not even saying that is growth. If we had held pace with investment into policing in England and Wales we would now be sitting at 8,000 to 8,500. Our ability to get there really quickly is challenging, so we are proposing to increase our recruitment over the next three years at a reasonable pace. We are about to launch our new recruitment campaign to get that mobilised and get new recruits into the college, so we do anticipate the business case over the next five years, fully costed, would require an additional £200 million into PSNI to get our headcount and officer level at a pace that we can actually respond to the needs of the population.

Q67 **Chair:** Alan, in health, how do you propose to be funded adequately?

Dr Stout: I see the funding as threefold. First, we need to properly understand the funding that we have. I am not actually convinced that we do. Secondly, we need to then spend what we have as efficiently and effectively as possible. That includes prioritisation, because we do not prioritise the absolute fundamentals that we know our patients and our population want to see from a health service. We spend it far too widely without prioritising particularly well.

Then and only then do we need to have a sensible conversation about the need to increase the funding and revenue raise or anything else. Far too often we go straight to that third point without understanding and doing the other two well. It is particularly relevant in Northern Ireland, but it is UK-wide with the pressures on the whole national health service. We need a proper public conversation on what can be realistically expected from the NHS at this point in time.

Q68 **Chair:** Graham, how can education be properly funded?

Dr Gault: There simply needs to be a lot more money. I find it very unsavoury every time we are talking about budgets and financial provisions in public services that the three points of delivery of public service find ourselves competing for money like three hungry children scraping around for a meal. It is not the way public services should be run. Public services should be run by the identification of need and for the professionals who are at the frontline point of delivery in any public service saying, "This is what I need to meet the need in front of me". This is what should happen in education and across all the public service. There simply needs to be an opening of taps. In terms of education, money needs to go directly to schools, not to the system, but to the point



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of delivery where outcomes for children can actually be attained and measured.

Q69 Simon Hoare: I hope it is not contentious to suggest that all public services require continual review, transformation and modernisation. Quite a lot of that depends upon political stability and mutual political trust. We have been more than aware of the shortage of that capital in recent years. Thank heavens Stormont is now back up and running, but there is a hell of a lot of ground to catch up on, as the three of you would probably recognise.

I wanted to ask briefly, please, what your hopes were and are for the Public Sector Transformation Board. What is your level of engagement with it? Where do you think it might lead in terms of political appetite once the initial journeys of transformation have commenced? Shall we start with Ms McCreedy?

Pamela McCreedy: Interestingly, Alan and I were speaking before about how I had been involved in a lot of the attempts at health reform a number of years ago. Within PSNI we recognise that we still need to modernise our service and look at how we support our communities in a more digital environment, for instance.

For policing, the Patten recommendations were implemented, so post 1999 a lot of that first-off transformational aspect of policing has been achieved. I am not saying there are not still things to do. We want to look at our call grading. We are looking at a lot of our digital aspects such as voice to text, digital files, online reporting and, particularly, platforms for citizens to interface with us.

In Northern Ireland and PSNI, there is still a way to go compared to UK colleagues around workforce modernisation, looking at police staff roles to police officer roles. We certainly want to do that. Right Care, Right Person is a project that interfaces with the health system, whereby we take on a lot of pressure, particularly with regards to mental health and vulnerable people.

Not to walk away from it at all—thankfully I would not meet an officer who would walk away from that—but we are not the best people, standing with firearms, a flak jacket and handcuffs, to deal with someone in a vulnerable state and a mental health crisis. We do need to look at how we do that differently, and we are progressing with that.

Public Sector Transformation Board departmental colleagues are very much driving towards speeding up justice and we are part of that programme, but separate to that as an organisation we are focused on key areas of modernisation as well. For me, honestly, a lot of those significant changes have been achieved in PSNI in the changes post Patten.

Dr Stout: I will follow on quite neatly. As she mentioned, Pamela was involved in TYC. Was that in 2009?



Pamela McCreedy: It was 2011 and 2012.

Dr Stout: Transforming Your Care was one of our plans. It was followed by the Bengoa report, which is widely mentioned. I myself sat on the expert panel for the Bengoa report and the similarities are astonishing. We have known what we have needed to do for many, many years, and we have failed to do it. The golden ticket I see is a multi-year budget, because you will always need to double fund for a period of time to create that proper change that we so need.

These days, whenever I am speaking I start so many things by saying “if only”. If only we had done what Pamela described we needed to do in 2011 and what Bengoa described we needed to do in 2016, when we look at the crisis that we have right now, it could be vastly different. We could have our elderly patients coming out of hospital in a timely manner, with strong, supported primary care teams and a welcoming hug, as opposed to sitting in the back of ambulances and struggling to be discharged. We have just failed recurrently to build those teams and to put the funding outside of the acute.

I am super sceptical that we are going to be able to do what we need to do, because the evidence shows that we cannot. My biggest fear is that we are going to kneejerk into more and more funding, and any additional funding, going straight into acute again, because that is what has been done year after year.

Q70 **Simon Hoare:** Dr Stout, can I just ask you the “why?” question? You mentioned in your initial answer to the Chair that services have not been prioritised and are scattergun, if you will, rather than an Exocet approach. You have referenced in answer to my question the things that could have been done such as Bengoa. This is a simple question and I hope it is not seen as being naïve. With all the professionals knowing what needs to be done, with the public having an understanding that they just want good, reliable public services, and an expectation that politicians deliver on that, what is your assessment as to why these most obvious, common-sense, public service efficiency-enhancing and service experience provision changes have not been made?

Dr Stout: You answered it in the first part of your question. It is the stability. We hope that we now have some stability that we will be able to achieve that. The two periods of time where Stormont came down probably happened, for the health service alone, at the worst possible time. I am not making this as a political comment in any way, shape or form. The first time Stormont went down was just after we had the real impetus and momentum with Bengoa. We had proper political buy-in. We had all-party support. We had various meetings and groupings of all the political parties and the health representatives. We had full buy-in to what needed to be done, and then we lost the political leadership at that point. That was catastrophic to making those changes at that point.



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The second time was just after covid. Covid brought so many problems, as is well rehearsed, but it gave us a real opportunity to change, because we almost needed to restart and rebuild after covid, and that gives us an opportunity to do things differently. Again, we lost all that momentum. We had a real tantalising glimpse at a multi-year budget at that point too and we lost that ability, and so we have struggled as a result.

Q71 Simon Hoare: You referenced that there had been cross-party agreement. You have identified that political stability was an enormous impediment. You have recognised that political stability seems to be back and hopefully will endure. Allied to that is, of course, the need for mutual political trust between the principal parties in Stormont. Is your assessment that that trust is there and, therefore, you have an expectation that that cross-party consensus will resurrect?

Dr Stout: Yes. The simple evidence I would give you of that is our Health Committee, which is currently operating and actually operates very effectively with proper cross-political support. That alone gives me the confidence—the questions, the challenges, the communication that we have from the various members there, as well as them obviously holding the Minister to account—that we will be able to make some progress at this point.

Q72 Simon Hoare: Dr Gault, I suppose that is my initial and caveated question to you as well.

Dr Gault: Forgive me for being marginally positive in my answer.

Simon Hoare: We like marginal positivity; that is always a good sign.

Dr Gault: We have a legacy in education of having a system, in terms of employers and the Department, that has been largely inward looking, focused on processes, procedures and so on, rather than facing the children at points of delivery. There are signs, albeit early, that that mindset and that zeitgeist across the entire system has changed.

I feel that we have probably hit a crisis point. I feel that there is an acceptance that the broad system needs to listen to, understand and properly consult, in meaningful and authentic ways, with the people who actually deliver the service to schools, because we have seen occasions when policies are developed in rooms very far away from schools, which may be politically expedient and attractive on social media but is very difficult to deliver. The crisis that we are in has driven the system to reassess what it is about, and it is about delivering outcomes for our children, so I feel a little more positive.

You will not be surprised that I say, in representing a trade union, that the people who deliver our services to children have been badly invested in over recent years. Although after an intense period of unpleasant industrial dispute we reached an agreement back in early April of last year, the teaching profession and wider education workforce in Northern Ireland remains the poorest education workforce on these islands. That is



not what we want. We want people to be attracted to come and do this very difficult and very essential job in our schools.

I have to just say, representing school leaders, we have had a review of workload and its impact on school leaders. It has come up with 29 recommendations. We are still waiting for delivery of these recommendations, which have been agreed with all sides, but there just seems to be a slowness—I do not want to say “reluctance”; I want to say “slowness”—in delivering workload relief, in particular for the school leaders I represent. These are the people who are delivering for our children. They need investment and they need unnecessary bureaucratic pressures lifted from their shoulders. They need the system to be more empathetic about how they have to deliver the service. They need silly things, like the way we procure items, toilet seats, locks for doors and all those kinds of things, into schools. We need all those processes aligned with the actual delivery to make delivery much smoother.

Q73 Gavin Robinson: Good morning, all. You will find that, over the next series of questions, each of us is going to direct our questions to one individual, so I am not ignoring you, Alan or Graham. Pamela, you had mentioned the impact of lack of resource for policing. You had suggested that you are having to take drastic decisions around future service delivery and you will have reduced response times and the inability to do what it is you would like to do. There is a further draw, given the consequence of health, that you are the last and first responder in situations that really are not policing or criminal justice matters. Are there areas of service delivery today that you envisage will just simply have to stop and, if so, what are they?

Pamela McCreedy: You can imagine that, over the past two years, when we ceased recruitment and our headcount started reducing, these were the very decisions that we had to look at. I have touched on the impact on neighbourhood policing. That is a reduction in the number. You are not stopping the service, but effectively you are reducing your accessibility into communities and visibility to communities. There were a small number of areas that we did stop. We closed a number of station inquiry offices where there was low footfall and things like that, but it is a diminishment to the service, and it means that we will not be able to respond in the same way to our communities and our victims.

We are absolutely holding on to our performance for our 999 response, but with the reduction in headcount on our call management side our 101 response is starting to slow down. We have looked at that. We were doing two minutes and 12 seconds in response. That is now nine minutes. It is a significant deterioration. Calls are then abandoned or, like the health service, they become a 999 call all of a sudden, and then we have to start looking at how we reprioritise that.

I fully recognise the pressures on our health service, but there were photographs last week in the press. We have come to see ambulances lined up at EDs, which is not acceptable, but there was a full line of police



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cars sitting at a local ED last week as well. We have looked at a four-week period of that. Police officers assisting people who require a mental health assessment are there on average for 14 hours. That is just not sustainable for us. We are seeking not to just walk away from it, but to work with colleagues on Right Care, Right Person, around who is the best person to be there. I have touched on that already. It is a diminishment to our service. We would seek to always respond and help people, Gavin, and that has been the challenge for us.

As Graham has mentioned, it is the impact it is having on our workforce. It is slowing down. The investigative side of that is slowing down. Health and policing are quite similar; we get a 999 call and we will respond, but it is then when we get there to investigate that crime and assist those victims that it slows down. Getting those criminal justice outcomes is slowing down, for sure.

Q74 Gavin Robinson: You fairly outlined some of the budgetary challenges earlier, and you suggested that over a significant period of time your budget has increased by 3%. The Health Department's budget in the last 10 years has more than doubled. It has increased by almost 150%. The education budget has more than doubled; it went from £1.1 billion to £2.7 billion. The Department of Justice's budget has doubled as well, from £660 million to £1.2 billion.

Why do you think that is? Is there a political impediment within the Department of Justice to give the police the money they require? Is there a requirement to reform how you are treated, because the prison service, the court service and legal aid are agencies of DOJ, whereas you are a non-departmental body? You are reliant on its funding, but you are certainly not on its bottom line and its balance sheet. What needs to change? If the DOJ's budget has doubled, why has yours not?

Pamela McCreedy: There are a number of factors. Colleagues have touched on this point around multi-year budgets and stability of Government. We do not have a lot of the opportunities that forces in England would have around precepts, raising funds or being able to carry reserves, should we ever have them, which is not our position. For us, our single-year budgets have been particularly challenging. Our only other real source of income is from UK Government with regards to additional security funding.

We have been engaging with the Department over the past 18 to 24 months around your very point. Effectively, our budget has been flat since 2010, which means, back to the modernisation point, we have had to make those efficiencies generally through our non-pay aspects to try to hold our headcount.

Q75 Gavin Robinson: No other part of the justice family has had to do that. Are you getting the support you require from the Justice Minister? There was an issue a few months back with correspondence, and it was quite unseemly from the Department. Are you getting the support you require,



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or does there need to be a greater way in which you as a service for Northern Ireland are dealt with?

Pamela McCreedy: The Minister has certainly engaged with us on that need, and we have presented material and business cases to prove that we have been fundamentally underfunded, certainly for the past decade. There is a recognition of that. We have worked hard to get that reflected into the programme for government, so to get the Executive's recognition and support that we require investment to increase. With regards to us making the case, and the Minister listening and recognising that and presenting that into the Executive, it is similar to the health question in many ways. It takes the whole Executive to support where the particular priorities and needs are, but we feel we have certainly made that case.

Q76 Gavin Robinson: Is there enough political awareness about some of the issues that you are going to face down the line on the McCloud judgment, holiday pay and legacy liability? Do you have a global sum that needs to be publicly aired as to what that may mean to future policing budgets?

Pamela McCreedy: It is challenging for us. For the year that we are currently in, 2024-25, as part of the autumn Budget we have effectively received the money we need to break even. That was £115 million for us, which is 15% of our total budget. We go through the year not knowing that we can actually break even, in many ways, but that excludes the points that you have made.

In addition to that, we are anticipating the holiday pay liability and the data breach liability. While I know you would be fully aware of a lot of the investigative transfer for legacy to the ICRIR, we will still have a requirement around the civil litigation of those cases. Each of those, between holiday pay and data breach in the region, is broadly in the region of £200 million. At the moment we are working up the exact amount, but we could say for civil litigation on legacy it is probably in and around the same. There are significant funds in addition to our baseline budget, which has a structural deficit in it as well. Those are significant on top of our baseline budget.

Q77 Gavin Robinson: That is another half a billion pounds.

Pamela McCreedy: It is.

Q78 Gavin Robinson: Finally, you mentioned legacy, and as a society we all suffered through the Troubles, but police and police family particularly suffered considerably through the legacy of the Troubles. In a session like this, when we are talking about the inability to pay holiday pay, to recognise service of officers in Northern Ireland, to recognise some of the experiences and trauma that they went through, and to find money to support current day officers, can I ask you about the impact on morale of police officers, when we hear, on a day when we are trying to understand the need they have, that a government decision on legacy could mean compensation for an IRA terrorist like Gerry Adams?



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Pamela McCreedy: There are a number of factors, and Graham has touched on them.

Chair: Sorry, that is out of scope, Mr Robinson.

Gavin Robinson: It is just on the morale of officers, legacy and money.

Chair: If it is on the morale of officers, that is fine.

Pamela McCreedy: I will keep it purely to that. Graham has touched on how we recognise, reward and support our workforce. For our officers and staff, that has been very much around ensuring that we can get their pay awards. Through 2023 there was a point where we may not have been able to award the pay award. We have managed to do that, and indeed in 2024. For the morale of our officers, I agree with you that we need to ensure that we can get their pay and recognition through. We need to be able to have shift patterns that work for them. We need to have enough officers and staff on the ground to make their job doable. Those are the things that are absolutely affecting the morale of the workforce currently.

With regards to some of the legacy of the past issues, we do need to have a sustainable funding mechanism to deal with that going forward that does not affect our baseline budget for policing now in 2025.

Q79 **Claire Hanna:** Without sounding too sycophantic, thank you for your answers. I agree with that analysis. You should not have to be squabbling over the resource. Graham, I am going to focus on SEN and to roll up a few questions, if you do not mind. Are you concerned that the SEN strategy is released without specific figures and budget attached? Are you seeing sufficient cross-departmental work? In the interest of being positive and constructive, as you are doing, are there reforms and solutions that you see available that allow us to use this resource more efficiently and ultimately improve outcomes for children?

Dr Gault: I was looking at the Department's Twitter feed this morning and watched a video of Minister Givan in relation to the SEN reforms. He said, "I want to ensure that children with SEN receive the right support, from the right people, at the right time, in the right place". That is an ambition that totally aligns with the ambitions of our members. They want, hope and expect that the needs of the most vulnerable children in their schools, children with additional learning needs, can actually be met.

The reality of this five-year plan, however, will be how this is judged. I am really hopeful. Actually, I am expectant that the Department will fully engage with the people who will be tasked to deliver this, who are the school leaders, teachers, classroom assistants and so on in their schools. I am hopeful. It is a positive step. This is the outcome of a lot of work that the Department and employers have done around special needs, recognising that there has been a 25% growth. We are hopeful, but it is



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going to depend on full, authentic engagement and consultation, not just an information-sharing consultation, but consultation where the people who are going to deliver this are able to express how it can work and how it will not work. That is the only way there is going to be success here.

In relation to cross-departmental work, there have been some improvements in recent years but there are still great difficulties around capacity. Where we find it most for children with special needs is at early intervention. In health, I know you will agree that there is a huge overdemand and undercapacity for multidisciplinary work for very young children before they get to formal education in terms of speech and language and all sorts of needs. We have three-plus reviews happening now in schools where nursery settings are identifying the needs that are in front of them, but that is too late. All of that should be happening much sooner. There is a willingness.

Again trying to be positive, the people who are delivering this work, the multidisciplinary teams in health and the workers in education, are there and they have the heart to do it. Their difficulty is around funding and the support mechanisms for them. Those delays bring significant delays for the children.

You asked me to be positive and see if I could identify where there could be lessons learned. I can. This would apply in education in general. Coming out of covid we had an initiative called Engage. There were two years of it, actually, Engage 1 and Engage 2. They were initiatives introduced by the Department to send money to schools, to re-engage children in education, to identify where learning had been lost, where there may be safeguarding needs and where children may be falling behind. Those initiatives were extremely successful. In a time when resource is so stretched and finite, we should be looking for where efficient use of money brings value and outcomes for children. ETI looked at both Engage projects and found measurable improvements in pupil attainment, particularly the most disadvantaged. Social and emotional wellbeing of pupils and mental health outcomes had improved. There had been improved outcomes and benefits for children from socially deprived backgrounds and so on.

Here was the secret. This money was given to schools, and the professionals in schools were told, "Identify the need and use this money as you see fit". They were accountable for it, but they were given autonomy to use that money. Referencing an earlier answer, how this money was delivered was not dreamed up by somebody in an office miles away from the point of delivery. How the money was used was determined by the people who could see the need in front of them and decided, "Gavin has this particular need. This is how his resource should be identified to support him in that need". The people sitting in front of him—forgive me, Gavin—were able to identify the need and allocate the money. They were accountable for it, but outcomes were delivered



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because the people who could see the need identified the resource. That is a lesson we should learn.

Sorry for my long answer, but there are hints, including in a pilot at the moment for children who are undergoing the statementing process. Pilot schools are being given some money for those children and are identifying where it should be spent. That is a lesson that should be learned: give the money to the people on the frontline and it will be used effectively.

Q80 Adam Jogee: Welcome. It is nice to see you all this morning. I have a quick question to Dr Stout. I had several more, but in the interest of Northern Ireland orals we all have to run in a few minutes. On 17 November 2024, Dr Stout, you noted in relation to the NHS on Twitter, "I am seriously worried about marginalisation, reprioritisation and excessive politicking". Are you still worried?

Dr Stout: Yes, I am. I cannot remember exactly what that response was to, but we have a history of excessive politicking. This comes back to a previous answer, where we need that unification. We need a vision and we need a shared path to achieve that vision. Where we can fall down is when local politics becomes quite defensive of those changes. Again, we need to be careful, because, if I am being entirely fair, when we have local political reps who will stand up—quite rightly, because it is their job to stand up for a local community—they are doing so in a crisis situation. This is what we have to move away from, which is change by crisis. We have to have it as a well-articulated and planned change. We need to bring local communities with us, to bring our political leaders with us and to bring our local politicians with us. That is exactly what I am referring to when I say that, because that is where we fall down and that is where we end up, not only in a crisis, but also in a conflict position, which does not help us.

Q81 Adam Jogee: Just to reassure you, it was not a "gotcha" question. It was a very good tweet, and I just wanted to give it another hearing. Since the previous incarnation of this Committee reported on waiting times, have they improved?

Dr Stout: No, they have not. They have become worse, and they have become progressively worse. The problem with waiting times is that, the longer they become, the more chaotic they become. We have people who just circulate in the system. The numbers that are quoted recurrently on a quarterly basis are not a headcount; they are the number of names that appear on waiting lists.

Yesterday I was dealing with a young child who had an urgent need and had already been referred to one hospital on an urgent basis. I was told that it was going to be 26 weeks' wait for an urgent condition. They were then referred to another hospital urgently, and then a message came back that we should refer them as a red flag, even though they do not meet any of the red flag criteria, but to try to bypass the delay with the



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urgent case. That is it in a nutshell: one condition has now been counted three times in three separate waiting lists, and we end up with chaos within it.

It comes back to a previous answer that I gave. If we reorganise the system within general practice and within local population needs, it is very easy to identify the handful of people we need to prioritise and get sorted very quickly. We know all those people in general practice, but what we have is a system that sends everybody to a waiting list and they all become anonymous. They all become a number, sitting and waiting with everybody else, and we do not prioritise. Back to the previous funding question, that becomes the most expensive health service you could ever possibly deliver.

Adam Jogee: Thank you for the answer and, through you, thanks to all those who work in the health service in Northern Ireland. They do a wonderful job, both family members of mine and all those who work there.

Q82 **Dan Aldridge:** I am going to be really brief, as we have to get downstairs. Are mental health services being funded and delivered adequately? Keep your answers brief if you could, but also look at how we, as a group of people, could support you and the Executive to deliver on what is the biggest Budget the Northern Ireland Executive has ever had.

Dr Stout: The simple answer is no, absolutely not. It is one area in which it has long been identified that Northern Ireland has a greater need than anywhere else in the UK. It has been estimated on occasions to be 40% greater, so there is an absolute increased demand. It covers all our areas. If we do not have support and counselling in our schools, that knocks into general practice and secondary care services.

Pamela has already referred to the mental health that affects the police service and the police cars lined up outside ED. A mental health patient should not be in our EDs, full stop. Our police should not be sitting outside our EDs. We should have well-resourced, well-staffed, close to the patient and in the community early intervention, preventing these crises that we end up with, with police cars sitting outside ED. It is a shocking example of how our health service is delivering at the moment.

Dr Gault: In education, we have some limited funding for counselling services post primary school, but there was a fund for primary school, which lasted for a number of years and was withdrawn two years ago. Any mental health support that is now in our primary schools is funded by parents, by volunteers and, in many cases, by teachers who are trying to support individual children as they see needs arise. There is no core funding for it. It does not exist. Where schools are accessing it, it is ad hoc and leads to frighteningly inadequate and inequitable outcomes for children.



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Q83 **Chair:** I am going to finish off with a question. I used to be a teacher, so I declare an interest. I think I know what the answer is going to be, but just give your honest response. Are public services staff being paid adequately?

Dr Gault: In education, no, they are not. In recent years, the challenge, expectation and accountability have risen significantly in education in Northern Ireland for everyone who is delivering the service. I will speak particularly on behalf of school leaders. The support to deliver work has fallen away. The scaffolding that supports schools in terms of all the voluntary services and other services has fallen away. The employing authorities that give support are in economic crisis themselves.

The support is broadly very challenging for schools. They are not being paid well. Morale is exceptionally low. They continually see that they are the poor cousins of everybody else on these islands, when they are trying to deliver a consistent service in an area that is more economically deprived and where there are higher numbers of children with additional needs than elsewhere.

My answer to you is no. You would expect me to say that as a trade union, but the message that is coming back from our members consistently is, "We are deeply dissatisfied with how we are treated in terms of pay and the support for us to do our job".

Pamela McCreedy: For our officers and staff, certainly within the police environment, absolutely. On the officer side, our PRRB, which is the remuneration body identified that advises the Minister of Salaries, links into and has held equity with England and Wales. That has been positive. I referred earlier to the risk of them not getting it in some years, but that has come through, so that is good. We will see if that is positively reflected in our recruitment campaign when we go to the market and see where we get to.

On the police staff side it is slightly different. Northern Ireland police staff is linked to the Northern Ireland civil service terms and conditions. Our police staff and civil service colleagues are still waiting to know the outcome to the August 2024 pay discussions and negotiations. That is affecting our ability to go to the market, recruit and retain some of our specialist workforce on the police staff side.

Dr Stout: The simple answer, again, is no. There are three parts to it. We have pay parity. We have had the pay disputes, like other parts of the UK had recently. We have had some progress with those and some agreements with the Department, which is a positive, but there is more of a pay restoration, in terms of the UK push for that, after years and years of austerity and not matching inflation, which is very important.

Pamela referred to the pay uplifts in-year. We ended up in this bizarre position of going back in to renegotiate the pay uplift, which is totally unacceptable. That needs to just be part of the core funding. In fairness



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to our Minister, we have had a commitment that he is going to try to address that going forward.

We have an imminent massive problem in general practice itself, which is the employer's national insurance. That is going to be a massive cost to our practices and is going to reduce services at a time when we need to increase our services. Peculiarly in Northern Ireland, we have a tax that applies uniquely to a GP working in Northern Ireland, where they have up to a £10,000 bill for their personal indemnity. That does not apply to any other healthcare worker in the entire UK. If you want to be a GP in Northern Ireland you will have an additional cost of up to £10,000.

Chair: Thank you very much, Alan, Pamela and Graham, for your time today. There are questions that sadly, because of time being limited, we have not been able to address. Is it okay if the Committee writes to you? Thank you very much.