

Social Policy Update

May 2016

Social Policy Update focuses on the social policy work of CIB and our delivery services throughout the country. It also provides information on national social policy news, activities and resources.

Contents

CIB Social Policy and Research News	1 – 5
Medical Card Information Exchange; CIB submissions; CIS Activity Report 2015	
On the Ground: Social policy feedback from delivery services	6 - 7
Social Policy Returns from services for March with a focus on the top issues	
In the Oireachtas	8
PQ's - Housing Assistance Payment (HAP), Au Pairs legal status	
Policy News, Resources and Opinion	9 - 10
Direct Provision - CIS Information Session & Policy Issues, DSP Information Seminar, Programme for Government	

CIB Social Policy and Research News

Introduction

Welcome to the May edition of CIB's Social Policy Update. In this issue, we provide an overview of some recent CIB Social Policy work focussing on the Medical Card Information Exchange Day and submissions on the draft National Medical Card Unit (NMCU) Strategic Plan and the Individual Health Identifier. We also summarise the CIS Activity Report for 2015, highlighting headline statistics and local developments. Issues highlighted by CISs and CIPS in their Social Policy Returns (SPRs) for March 2016 are also featured in this issue. SPRs have increased each month this year and this feedback is valuable to CIB where it is used as a basis for submissions, research and reports. There has been a strong response from services in relation to recent requests for Housing Assistance Payment (HAP) and Supplementary Welfare Allowance cases which will be used in upcoming research into these two areas. This issue of Update looks at written responses to Parliamentary Questions (PQ's) on HAP and the legal status of au pairs. The Update provides a summary of the social policy issues emerging from the CIS information sessions for People in Direct Provision and an overview of the Department of Social Protection Information Seminar which took place in April. We also look at some of the measures in the Programme for a Partnership Government from a social policy perspective.

Medical Cards: Information Exchange

The CIB Social Policy team facilitated an Information Exchange with the National Medical Card Unit (NMCU) and CISs on 3 May. The event consisted of a presentation from the NMCU that provided information on medical card assessment processes and details of future developments planned for the NMCU. There was also an extensive Q&A session that provided CISs with the opportunity to give feedback to the NMCU about Medical Card issues that arise for clients using their services. The event was well attended with good representation from the network around the country.

The NMCU has been involved in a programme of reform following recommendations from two reports reviewing Medical Card processes which were published in 2014. One of the reports recommended increased information sharing with stakeholders, such as GPs, Public Representatives and Client Advocates. CIB was approached in this context given the level of



Kieran Healy (NMCU), Geryl Garry (CIB), Siobhan McArdle (NMCU), Kate Halliwell, NMCU

medical card queries handled by services and the social policy feedback role of the Board. In their presentation the NMCU detailed the progress they had made on the recommendations that came out of the reports. These included a reduction in processing times for complete applications, cessation of reviews for medical cards on the basis of a terminal illness and the extension of the discretionary process beyond financial hardship. They also noted that work was ongoing in relation to simplifying the application process and investigating ways that new technology could do this. The long-term aim is to develop a single online Medical Card application form that recognises which Medical Card would best suit the person applying using the information they enter onto a single online form. This would end some of the confusion people have about which application form to complete. In the meantime the rollout of online registration for the new GP Visit Card for Under 6's and GP Visit Card for Over 70's has been successful with a 70% and 55% take up respectively. The NMCU also detailed the work they are doing in collaboration with the National Adult Literacy Agency (NALA) to review the range of standard letters they send to clients so they are easier to understand.

In the Q&A session a number of administrative and policy issues in relation to Medical Cards were brought up by the Services. These included issues in relation to the application process for the Emergency Medical Card, assessable costs for medical card applications, medical card thresholds, medical card retention policies, and access to GPs as well as access to the guidelines being drawn up by the Clinical Assessment Working Group. There was a broad discussion about discretionary medical cards, which included requests for more transparency around the decision making process and better communication about the reasons an application is refused to better inform appeals. NMCU noted issues that needed to be brought back to the Unit for clarification. Some of the questions that arose included:

- Q: Could the operational guidelines that go to Medical Officers and Deciding Officers be made available so the CISs can understand the basis of decisions and assist with appeals?
- A: These guidelines are being re-drafted and will be informed by the upcoming report from the Clinical Advisory Group so they are not available yet. A decision about circulation will have to be made when the amended guidelines are prepared.
- Q: Could the NMCU provide clearer guidelines around the discretionary medical card process and provide detailed information in letters to clients in relation to the reason their application was refused in order to inform how best to appeal.
- A: Decisions around discretionary medical cards are based on the circumstances of the individual so guidelines are not readily available for this. The NMCU is working on their correspondence with clients at the moment and this feedback will be brought back to the Unit to inform this work.
- Q: The cost of college fees and health insurance are big expenses for families but are not taken into account in Medical Card means tests, which is causing hardship. Is it possible to include these costs?
- A: These costs may be taken into account for discretionary medical cards, if the application presents all the information so the person assessing it can get a full picture of the family's situation.
- Q: How do people apply for the Emergency Medical Card for critical illnesses as there is no application form – is a letter from the diagnosing doctor sufficient?
- A: These applications mainly come in through the local health office or medical social worker in an acute setting and they will provide details of the patients' diagnosis and prognosis. It was advised that IO's direct clients in need of this type of Medical Card to their local health office.
- Q: Some Medical Card clients are having difficulty getting on a GP list. How is this issue resolved?
- A: This issue is occurring in some areas of high population because GP's patient lists are full. If a person is turned down by three GPs on the General Medical Services (GMS) list the NMCU will assign a GP in their area. This process is sped up if the client has evidence that they have been refused.
- Q: People granted status but still living in direct provision are being charged the €2.50 prescription charge even though they are on a reduced Jobseekers Allowance payment of €19.50 per week while they are still living in the centre. Can this issue be rectified as it is causing hardship?
- A: This is an anomaly; the NMCU is working with the DSP on a number of issues and will bring this up with them.

- Q: Can you be retrospectively reimbursed for medical expenses incurred when your Medical Card is removed during a review process? Also, some people are not receiving notification of reviews, they may not realise their medical card is under review until they go to the GP and the card is not accepted as it has been stopped.
A: No, eligibility is established at a point in time and refunds for expenses incurred before this date will not be refunded. The review process is started three months before a Medical Card expires so the person has quite a long time to engage with the NMCU to ensure their Medical Card cover continues without a break. The NMCU sends a number of letters to a person when they are being reviewed but notifications may not reach them in cases where there is a change of address. The person's GP is also aware the medical card is being reviewed.
- Q: There is an anomaly for people who have no income (due to homelessness, loss of immigration status, delays in getting a SW payment etc.) being unable to apply for a Medical Card as a SW payment or lower threshold of income is required.
A: NMCU advised that these applications be lodged anyway as they look on them favourably. Also, the NMCU stated that they no longer wait for 'pending DSP claims' to process medical cards.
- Q: Where people are moving into employment and have eligibility to retain their medical card for three years, we are seeing some cases where their medical cards are being removed on review even when the client has requested that the card be retained on the form?
A: This should not occur if the client has requested to retain the card on the form. This feedback will be taken back to the NMCU.
- Q: There are still cases of GPs charging medical card patients for blood tests. What is the policy on this?
A: Medical Card holder should not be charged for blood tests for 'routine investigation and ongoing treatment of a patient'. The NMCU has circulated this information to GPs on the GMS list and they should comply.
- Q: Why are the income thresholds for medical card eligibility so low and when will they be reviewed?
A: This is a policy issue. The NMCU has recommended that the HSE review these thresholds, though there is no time-frame for this.
- Q: Could a text alert be put in place to inform people that their medical card has been awarded as there can be a delay in getting notification by post which can cause difficulties in situations of severe medical need?
A: The NMCU will look into this suggestion.

CIB submissions

National Medical Card Unit Strategic Plan 2016-2018

In April 2016, CIB made a submission to the National Medical Care Unit (NMCU) on their Strategic Plan 2016-2018. The CIB submission drew on the experiences of CISs and CIPS in dealing with medical card eligibility queries from the public. The submission was positive about the customer focus adopted in the Plan but suggested that the main priorities were quite broad and the document had a high-level focus which makes it unclear about how the priorities will be practically implemented.

The submission provided feedback on administrative issues, policy issues and the overall structure of the Strategic Plan. It stated that medical card administrative issues cause stress and difficulty for some CIS customers and expressed the hope that these issues would be rectified under the strategic point relating to listening to customers to enhance the NMCU service. The submission also encouraged accelerating the development of a more user-friendly application process, providing clearer information on the Medical Card process, means tests and how decisions are made and recommended a special contact facility for intermediaries helping customers with applications. It stated that these issues need to be addressed to ensure the strategic principle of equity and social inclusion.

The submission also detailed a number of broader policy issues that need to be taken into account when developing the NMCU Strategy. These included a review of the Medical Card thresholds and means test assessments, extension of Medical Card retention policy to Qualified Adults on taking up employment, review of

the process for establishing eligibility for Medical Cards for self-employed people and young people on reduced payments. The CIB submission can be accessed [here](#).

Individual Health Identifier - Privacy Impact Assessment

In April 2016, CIB made a submission to the HSE on the Draft Privacy Impact Assessment for the Individual Health Identifier (IHI). The Health Identifier Act 2014 allows for the creation of a unique health identifier for people using health or social services. This HSE consultation was set up to establish whether sufficient safeguards are in place to protect patients' privacy and personal information prior to rolling out IHI's.

The CIB submission is mainly positive about the draft Privacy Impact Assessment Framework which it states anticipates and makes provision for many of the potential privacy risks likely to arise in relation to the roll-out of an IHI system. But the submission raises concerns about the draft framework's omission around difficulties related to collecting data from or about people with reduced mental capacity and in ensuring their right to privacy. It also highlights that there may be challenges around the rules of data protection in respect of people with reduced capacity. The submission calls for clarity generally around who can access the IHI data across health and social care providers and requests further details on the processes in place for the safe electronic transfer of data. It also highlights the importance of anonymising case evidence about people before releasing it into the public domain and ensuring that there is ongoing review of processes and procedures. The CIB submission can be accessed [here](#).

CIS Activity Report 2015

The National Activity Reports for 2015 for the CIS network, CIPS, MABS, NAS, SLIS and the CIB websites have been drawn up. The reports outline the level of caller and query activities for each service delivery organisation and provides detail of the projects that have been rolled out or progressed in the last year. Below find a breakdown of some of the statistics and projects from the CIS Activity Report for 2015. We will look at the CIPS and MABS reports in the next Social Policy Update.

CISs dealt with 607,286 callers and 990,644 queries in 2015, this represents a decrease of almost 2% in callers from 2014 and a 1% increase in queries. These figures highlight that people are coming to Services with a number of queries that are more complex. Services also dealt with 9,267 once-off advocacy queries and over 2,200 advocacy cases in 2015.

Social Welfare queries accounted for 46% of all queries, with 54% of queries covering all other aspects of public service provision including Health (8%), Employment (7%), Money and Tax (7%), Local (7%) and Housing (6%). Social welfare and housing queries have increased from 2014 while employment and health related queries have decreased.

There were over 53,000 Medical Card queries, which is the largest single query area recorded in 2015. Jobseekers Allowance (37,471 queries) and State Pension Contributory (34,358 queries) were the next largest single issues.

The report also provided details on caller profile, which showed that 58% of CIS callers are female and almost 50% are between 26 and 45 years. Non-Irish nationals made up 21% of callers where country of origin was recorded and came from over 210 countries. CIB introduced a new caller profile field in autumn 2015 where the callers' ethnicity can be recorded; this data will be reported on in 2016.

Services deal with different levels of caller and query numbers and provide different levels of advocacy and outreach, which reflects the demand locally. Over half of the services had between 10,000 and 20,000 callers, with seven services logging over 20,000 callers and two with between 30,000 and 40,000 callers. Clients were referred to CISs from a range of different agencies in 2015 including the Department of Social Protection and Health Services but most callers self-referred to CISs.

Almost four fifths of callers contacted the CISs in person with 20% getting in touch by phone and 1% writing an email or letter to the services. Services dealt with 46% of all queries in less than ten minutes, while 39% of queries took between 11 and 20 minutes, 14% took 21 to 40 minutes and 4% took over 40 minutes.

7% of callers had difficulty accessing services with 41% of these experiencing access difficulties in relation to language and 18% had literacy difficulties.

Services referred just 5% of clients to other agencies, which was a decrease on the figure for 2014. Of these referrals, 20% were to Free Legal Advice Centres (FLAC), 9% were to a solicitor, 7% were to a local support group or service provider, 5% were to MABS, 4% were to Threshold and a further 4% were referred to the Workplace Relations Commission (WRC).

CISs submitted 3,056 Social Policy Returns (SPRs) to CIB in 2015, which represents a 2% increase on 2014. These cases provide important evidence which is used to support Social Policy research, submissions and reports that highlight social policy issues around the country. The SPRs mirror query data, with the majority relating to Social Welfare issues. 60% related to administrative or operational issues that people had when trying to access a service or payment, while 40% related to a policy issue, which focused on gaps or anomalies in legislation.

In 2015, Eustace Patterson was commissioned to undertake research and produce a report into clients' processes and outcomes in CISs. The report provided an in-depth view into what is happening in services, how they deal with clients' needs and progress queries. This report will help inform work within the CISs in 2016.

The CIS Activity Report outlined developments that took place in 2015 in relation to volunteers, quality, research, advocacy, social policy, specialist services, training, outreach, promotion and collaborative projects. Some of these are outlined below.

Volunteers

The report highlights a number of events organised in 2015 to honour volunteers working in the CISs, including the Celebrating Volunteers event that 250 volunteers attended in Dublin Castle in December. It also mentions the work being done to review the National Strategy on Volunteers in CISs 2012-2015 and develop a revised strategy.

Quality

The CIS network completed the EFQM Quality Assurance Programme in 2015, with 42 CISs awarded the EFQM Gold Star award. A survey reviewing the process showed that most Services felt the EFQM process had benefited customers and had led to improvements in service delivery. A number of CISs are now developing standardised ways of reviewing and monitoring the quality of information given to clients.

Advocacy

In 2015 CIS Advocacy Infonet was launched. This online platform contains Advocacy standards, policies and practice resources that CISs and Advocates can access and use as an Advocacy resource. The ASW Management Group reviewed the effectiveness of the ASW programme and found that the contribution of the ASW programme to the quality and consistency of CIS advocacy was positive and had led to an increase in advocacy capacity in CISs. One CIS highlighted that it now supports clients in taking social welfare appeals cases, work it had not done previously.

Social Policy

CISs continue to engage in Social Policy work and this takes the form of Social Policy training, Social Policy discussions at team meetings and submitting Social Policy returns. CIB Social Policy Executives were involved in delivering a number of centre-based training events to CISs nationwide. Some CISs have focussed on a certain Social Policy topic for the year, with one linking directing with the Garda National Immigration Bureau (GNIB) and Irish Naturalisation and Immigration Service (INIS) to progress client's immigration issues.

Collaborative Projects

CISs also work on a number of collaborative projects with community, voluntary and statutory organisations such as linking with INTREO, developing a Community Employment model for CISs and engaging with other national and local organisations to lead Information Sessions for People in Direct Provision.

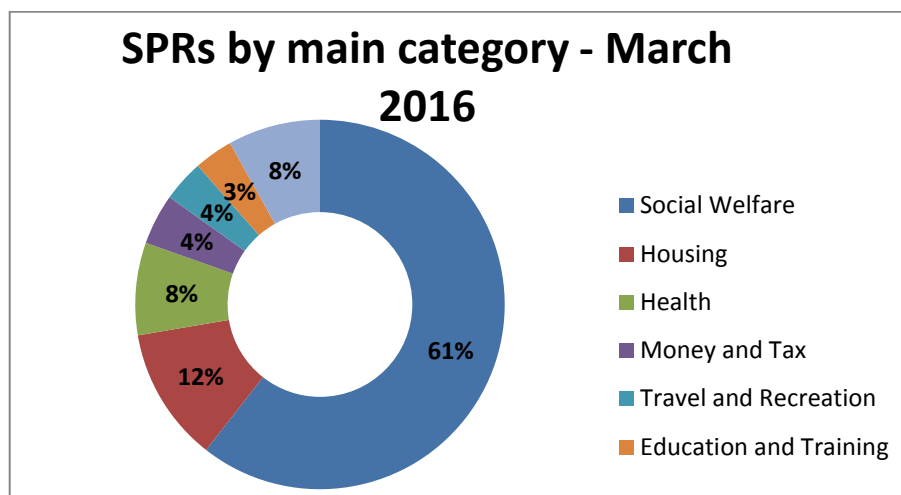
Work is ongoing with CIB on developing national Terms of Reference for collaboration between INTREO and CISs. These will focus on initiatives to improve the experience of the customer.

On the Ground: feedback from CISs & CIPS

This section features a selection of recent social policy returns from Citizens Information Services and the Citizens Information Phone Service.

Social Policy Returns – March 2016

In March 2016, CIB received 383 Social Policy Returns (individual cases identified by services to illustrate issues arising in relation to particular benefits and schemes), 314 from CISs and 69 from CIPS. The number of SPRs has increased each month this year with the March SPRs up 13% on the figure for February. The majority of returns for March (92%) fell into six of the main Oyster categories, Social Welfare, Housing, Health, Money and Tax, Travel and Recreation and Education and Training.



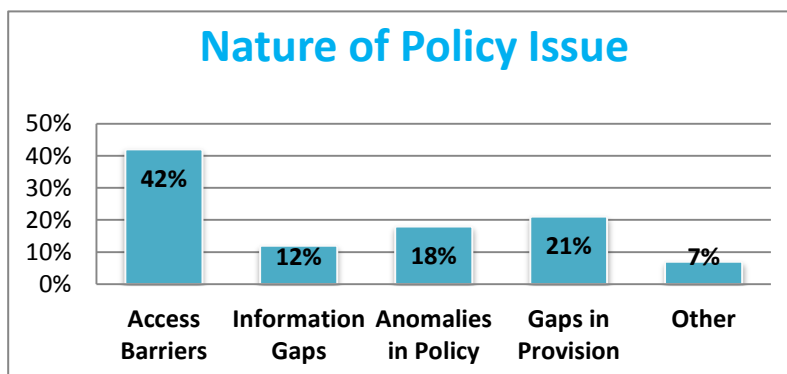
Over 60% of returns were categorised as Social Welfare issues, the majority of these related to the sub-categories Unemployed People, Supplementary Welfare Schemes, Disability and illness and Families and Children.

The payments or benefits that logged the most SPRs for March were:

1. Jobseeker's Allowance (JA)
2. Family Income Supplement (FIS)
3. Rent Supplement (RS)
4. Medical Card
5. Carer's Allowance

The main issues in relation to Jobseekers Allowance (JA) were around clients not being able to get updates about applications and appeals, eligibility issues for people under 26 and the JA eligibility criteria that prohibits working more than three days a week, which is perceived as a disincentive to people taking up employment. The FIS returns referred mainly to the following issues – clients not being able to get in touch with the FIS section, no eligibility to FIS for self-employed people and FIS claims being refused as clients working hours have been assessed over a month (82.33 hours) rather than two weeks (38 hours).

Over 54% of the returns were logged as operational issues, these refer to administrative barriers or information gaps around a scheme. 39% were logged as policy issues, which refer to difficulties caused by policies, legislation or guidelines and are detailed as anomalies in policy or gaps in provision.



Housing remained a top issue in March, recording the second most SPRs per main Oyster category with 12% of all SPRs. When Rent Supplement SPRs are added to this (which are under Social Welfare), it brings all housing-related issues up to 18%. The majority of these related to rent supplement, homelessness and local authority and social housing. The main issues that came up in these areas included:

- Clients unable to find accommodation within the Rent Supplement (RS) limits, ‘separated fathers with custody of children for part of the week assessed as a single person for RS’, possibility of losing RS a disincentive to work, difficulties contacting the RS Unit and delays in processing RS
- Clients “topping up” Housing Assistance Payment (HAP) as the limits are too low, landlords not accepting HAP or refusing to sign HAP forms
- Unsuitable social housing accommodation resulting in a reported deterioration of people’s health, people unable to afford accommodation and at risk of becoming homeless

In the Oireachtas

This section looks at policy-related questions and debates in the Oireachtas, with a particular focus on issues currently arising in social policy feedback from Citizens Information Services. The text may be edited. For the full text of any PQs/debates featured here, go to oireachtas.ie or kildarestreet.com

HAP and local authority waiting lists [PQ: 5468/16, 6 April 2016]

Tony McLoughlin (Sligo-Leitrim, Fine Gael) asked the Minister for Environment, Community and Local Government “if a person who qualifies for the housing assistance payment should be removed from the housing list of the relevant local authority or if the person can qualify for both; and if he will make a statement on the matter.”

Then Minister **Alan Kelly** (Tipperary, Labour) provided a written response stating “As the Housing Assistance Payment (HAP) is deemed to be a social housing support under section 19 of the Housing (Miscellaneous Provisions) Act 2009, as amended, households in receipt of HAP are not included on the local authority waiting list for social housing support. However, HAP recipients may access other forms of social housing supports by applying to go on the local authority transfer list. I issued a statutory direction to the local authorities involved in the HAP statutory pilot, including those involved in the HAP pilot with a specific focus on accommodating homeless households, instructing them to take the necessary steps to ensure that households benefiting from HAP can avail of a move to other forms of social housing support, should they wish to do so, through the transfer option. I also directed that HAP recipients, who apply to go on the transfer list, should get full credit for the time they spent on the waiting list and be placed on the transfer list with no less favourable terms than if they had remained on the waiting list. In practice, housing authorities inform HAP recipients in writing of their entitlement to apply to go on the transfer list when they are approved for HAP. As of 31 March 2016, 83 households have transferred from HAP to other forms of social housing support.”

Employment rights for ‘au pairs’ [PQ: 6502/16, 14 April 2016]

Michael McGrath TD (Cork South Central, Fianna Fail) asked the Minister for Jobs, Enterprise and Innovation if the full suite of employment legislation, including minimum wage legislation, applies to au pair arrangements; the duties and responsibilities of families that hire au pairs in terms of employment law; his plans to provide a formal basis for au pair arrangements; and if he will make a statement on the matter.

Ged Nash (Minister for Business & Employment at the Department of Jobs, Enterprise and Innovation) provided a written reply saying: “There is no separate legal definition of the term “au pair” in Irish legislation, and individuals described as “au pairs”, “nannies” or “child-minders” are not exempted or treated as separate categories of workers under Irish employment law. Ireland’s body of employment rights legislation protects all employees who are legally employed on an employer-employee basis, regardless of what title is given to them. Therefore, once it is clear that a person is working under a contract of employment (written or verbal), on a full-

time or part-time basis, that person has the same protection under employment law as other employees, including entitlement to the national minimum wage.

Where the Workplace Relations Commission (WRC), which is responsible for securing compliance with employment legislation, receives a complaint involving somebody described as an au pair, the WRC will investigate with a view to establishing whether a person has statutory entitlements under employment law. Complaints involving au pairs are considered on a case-by-case basis, in the light of the facts of each case. The national minimum wage (NMW) legislation provides for the maximum monetary deduction which can be made from the statutory minimum pay of an employee if the employee is provided with board and/or lodgings. Statutory Instrument No. 95 of 2000 provides that an employee for whom board and lodging are provided may have the following amounts deducted from their minimum wage calculation:

- €54.13 for full board and lodgings per week, or €7.73 per day
- €32.14 for full board only per week, or €4.60 per day
- €21.85 for lodgings only per week, or €3.14 per day

Any persons with questions or complaints regarding their rights under employment law should contact the Workplace Relations Customer Service”

Policy News, Resources and Opinion

This section features developments, resources, events and opinions likely to be of interest to those engaged in policy work. CIB does not endorse or otherwise any of the policy positions featured.

CIS Information Sessions for People in Direct Provision & social policy issues

The first Information Sessions for people transitioning from direct provision were rolled out by CISs in eight locations around the country at the start of April 2016. These information sessions which will continue on a six-weekly basis came out of one of the recommendations from the Report of the Working Group to Report to Government on Improvements to the Protection Process. This report highlighted the difficulties people experience when moving from direct provision centres and the lack of support and information available to help them with this transition. The Department of Justice and Equality requested that the CIS network coordinate information sessions to meet this need and a CIS/CIB working group was established to inform the format of the sessions and coordinate with other relevant organisations working in each local area.

The initial sessions varied slightly depending on the availability of schemes and organisations in each area but in the main there were presentations from the local CIS, MABS, Department of Social Protection and Local Authority. Some sessions also included presentations from Threshold, the HSE, the local Education and Training Board and the local NGO. Some of the topics covered included Housing (including details of Rent Supplement, HAP payments, social housing waiting lists), Health, DSP payments and schemes for jobseekers, Education. There was good attendance at the initial sessions and feedback was positive. The sessions highlighted a number of Social Policy issues affecting people moving from direct provision centres. These issues included:

- The requirement for a deposit and one month's rent in advance for private rented accommodation puts people moving out of direct provision at a disadvantage compared with other private renters. The DSP Representative – formerly CWO - will cover the deposit under the Emergency Needs Payment but will not cover the one month's advance rent.
- Social Housing and HAP require that clients apply to individual counties one at a time, which is difficult for people living in direct provision who would often move anywhere to find accommodation as they may not have links with the area in which the direct provision centre is located.
- Proof of connection to the county in which you are applying for social housing is unrealistic for the asylum community.
- Some landlords require references from previous landlords before letting a house to a tenant. Direct Provision residents don't have references as have been living in the centre. The managers of Direct Provision accommodation will provide references but some landlords won't accept these.

- Applications for social housing require letters detailing whether or not the person is a property owner in their own country. There can be great difficulty and cost in obtaining these documents
- People with status in some direct provision centres are getting the full-rate of Jobseekers Allowance while others are on the reduced JA rate of €19.50 for those in direct provision
- The €2.50 prescription charge is in place for people granted status but still living in direct provision. This charge is waived for those in direct provision without status. This anomaly occurs because once the person has been granted status they move to the reduced level of JA per week while they are still living in the centre. But as they are technically on a JA payment these individuals are charged the €2.50 prescription charge.
- Difficulties associated with trying to move out of direct provision on a reduced payment of just over €19 a week. These included issues with funding travel to job interviews, house viewings and training courses.
- Issue for people who do not have access to references/work experience in Ireland.
- Qualifications from other countries may not be recognised in Ireland.
- Issues around continuing courses after being granted status.

Social Policy issues flagged at these sessions will be submitted through Oyster and will also be raised during review meetings of the sessions. These issues will then be fed back to the relevant Departments and organisations. The prescription charge issue detailed above has already been raised with the National Medical Card Unit and the HSE.

The next round of information sessions are scheduled for the end of May. In the meantime it was agreed that the CISs situated near the largest direct provision centre will coordinate a weekly outreach at the centre and in other areas attendees were advised to visit their local CIS or other relevant agency for further individual support.

A new option entitled 'Direct Provision Information Sessions' has been added in the 'referred by' drop-down category in Oyster. This option will be used to track the level of demand and client referrals to CISs created from the Direct Provision Information Sessions. We will also use it to analyse the types of queries and issues arising for people leaving direct provision.

DSP Information Seminar – April 2016

The Department of Social Protection (DSP) held an Information Session for their frontline information providers in Dublin Castle on 5-6 April. The event was opened by the then Minister for Social Protection, Joan Burton. Staff from the Citizens Information network were in attendance. The seminar covered a range of topics including describing the corporate services within the Department and their responsibilities in relation to the Official Languages Act and translation and interpretative services. Other topics highlighted certain DSP payments or initiatives and the issues and processes involved in accessing them for example Jobpath, Carers Allowance, Carers Benefit and Supplementary Welfare Allowance. There were also presentations on new developments and over-arching processes such as predictive analytics, decisions and appeals, debt recovery, Dedicated Mortgage Arrears and paperless claims.

Predictive analytics was being used to decide more accurately which claimants should be reviewed, which is a move away from the previous randomised selection for reviews. The DSP's Analytics Unit was established in 2015 and set up an over-arching data system that pulls in data from all existing DSP payment systems so it can be analysed. The initial phase of the Unit's work looked at building predictive models to select review candidates for Jobseekers Allowance, One-Parent Family Payment (OFP) and Disability Allowance. The other pilot reviews are ongoing but it is hoped that the analytics work will provide the DSP with a better review mechanism for payments and highlight trends and issues in relation to payments and services. On the first day there was also a presentation on Decisions, Revised Decision and Appeals which led to a broad discussion and a number of queries from CIS staff in relation to decision, review and appeal processes.

Programme for Government 2016

The 'Programme for a Partnership Government' published on 11 May 2016 aims to spend at least €6.75 billion more on public services by 2021 compared to 2016. Some points announced in the programme that may be of particular interest from a social policy perspective include:

- Create a functioning housing market using initiatives from an Action Plan for Housing. The plan will be drawn up in first 100 days of government and will be subject to targets, deadlines and Cabinet review.
- Build 18,000 additional social housing units by end 2017, and 17,000 more by 2020.
- Protect mortgage holders, tenants and SMEs from "vulture funds".
- Create a PRSI scheme for the self-employed.
- Create a "Working Family payment" to ensure low-income families financially benefit from working.
- Fund 80 additional primary care centres.
- Increase GP capacity to provide access to x-rays, ultrasound and other investigations in general practice.
- Reduce prescription charges for medical card holders.
- Consolidate all means testing under a single national body.
- Increase the State Pension and the Living Alone Allowance above the rate of inflation.
- Reform the Direct Provision system, with particular focus on families and children.