

# Official Report (Hansard)

Monday 3 November 2014  
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# Northern Ireland Assembly

Monday 3 November 2014

*The Assembly met at 12.00 noon (Mr Deputy Speaker [Mr Beggs] in the Chair).*

*Members observed two minutes' silence.*

## Assembly Business

### Alex Maskey: South Belfast

**Mr Deputy Speaker (Mr Beggs):** Before we begin today's business, I wish to advise the House that I have received a letter from Mr Alex Maskey giving notice that he intends to resign as a Member for the South Belfast constituency with effect from 12.00 midnight on Monday 3 November. I have notified the Chief Electoral Officer in accordance with section 35 of the Northern Ireland Act 1998.

### Public Petition: Rail the Way for Armagh

**Mr Deputy Speaker (Mr Beggs):** Mr Bradley has sought leave to present a public petition in accordance with Standing Order 22. The Member has three minutes in which to speak.

**Mr D Bradley:** Go raibh míle maith agat, a LeasCheann Comhairle, as deis a thabhairt dom an achainí seo a chur faoi bhráid an Tionóil inniu. Is é atá san achainí seo, iarratas ar an Aire iarród a athleagan idir Cathair Ard Mhacha agus Port an Dúnáin. Thank you very much, Mr Deputy Speaker, for the opportunity to present this petition on behalf of the people of Armagh city and district calling for a rail link to be reinstated between Portadown and Armagh. Many may think that, because of the current economic situation, this is not a good time to call for any new infrastructure. However, I believe that we should give our people hope. The situation will improve, and, when it does, I hope that the link between Armagh and Portadown, which is very badly needed, will be built.

In 2013, when the Minister for Regional Development, Danny Kennedy, launched a consultation on the future of rail across the region, the people of Armagh seized the opportunity and made their voice heard. It was quite clear that they want the link to be established once again. It closed in the 1950s,

and the site of the track is still there. I do not believe that that will be an impediment to having a rail line re-established. A new route can be identified. The Minister has expressed his support for the project, and, hopefully, when resources become available, it will be acted on.

Armagh is a centre for tourism, and people come from all over the world to visit the city. At the moment, the principal target of tourism seems to be Belfast. I believe that, if we had this link between Portadown and Armagh, it would encourage tourists who visit Belfast to make the trip to see the historic buildings and culture of Armagh city.

As you know, near Armagh city is the seat, the ancient capital, of Ulster, Eamhain Mhacha — Navan Fort. It is enshrined in our history. Armagh is one of the few cities in Europe that does not have a rail link.

I commend those who initiated the petition, especially Suzan McComb, who has coordinated their efforts. Today, we have a petition of 10,000 names, which calls on the Minister to reinstate the link between Portadown and Armagh.

*Mr D Bradley moved forward and laid the petition on the Table.*

**Mr Deputy Speaker (Mr Beggs):** I will forward a copy of the petition to the Minister for Regional Development and the Chairman of the Committee for Regional Development.

## Ministerial Statements

### North/South Ministerial Council: Education

**Mr O'Dowd (The Minister of Education):** Go raibh maith agat, a LeasCheann Comhairle. Le do chuid, a Leas-Cheann Comhairle uasail, ba mhaith liom ráiteas a dhéanamh i gcomhlíonadh le halt 52 de Acht 1998 maidir le cruinniú den Chomhairle Aireachta Thuaidh/Theas i bhformáid oideachais. Bhí an cruinniú ar siúl in Ard Mhacha ar 22 Deireadh Fómhair 2014. Mr Deputy Speaker, with your permission, I wish to make a statement in compliance with section 52 of the NI Act 1998 regarding a meeting of the North/South Ministerial Council (NSMC) in education format. The meeting was held in Armagh on 22 October 2014. This statement has been agreed with junior Minister Bell and is made on behalf of us both. This was Jan O'Sullivan's first NSMC sectoral meeting as Minister for Education and Skills, and I look forward to working with her.

At the NSMC plenary meeting on Friday 3 October 2014, it was agreed that Ministers should consider the EU funding opportunities available within the various NSMC sectors. At our meeting on 22 October 2014, Minister O'Sullivan and I agreed to work together to identify and draw down EU funding where appropriate. The proposed Peace IV allocation for shared education is an obvious example of an area in which a joint approach may be pursued.

We noted the further work being undertaken through the North/South future sectoral work programme since the NSMC meeting in April 2014. We received a presentation from officials, which provided an update on the work programme. That included the outcomes from a workshop on 8 October between DE and Department of Education and Skills (DES) officials. The workshop addressed the theme of school planning and self-evaluation. We agreed that, at a practical level, work should be taken forward to establish a means by which the experience of schools across the island in delivering against specific challenges and identifying effective interventions can be shared to support improvements in addressing educational disadvantage.

Since the last NSMC meeting in April 2014, officials in DE and DES have been working on the development of a cross-border pilot to support leadership development; work that has involved groupings of head teachers from schools in both jurisdictions. The intention is to

identify areas of common interest in the field of leadership development, identify means of mutual support and share best practice.

The Youth Council and the National Youth Council for Ireland gave an interesting and informative presentation on a range of youth sectoral issues on which they are collaborating. They are, for example, involved in work on measuring the impact of youth work, such as on the educational outcomes for young people. They are also promoting the more cost-effective use of ICT in the youth sector. The Council welcomed their plans to explore a range of funding opportunities to facilitate continued cooperation.

I recognise the continuing work of both inspectorates to extend cooperation during 2014. This cooperation included work on literacy and numeracy and continued programmes of inspection exchanges. The DES inspectorate has been invited to evaluate the Education and Training Inspectorate's (ETI) work on promoting improvement in English and mathematics.

Turning to special educational needs, I am pleased to report continuing progress in relation to the expansion of services delivered by the Middletown Centre for Autism. It was reported to the NSMC that the programme of expansion had thus far delivered a range of service improvements, including an increased number of children with complex autism in the North receiving specialist multidisciplinary support; the commencement of a pilot offering similar support to children in the South; the recruitment of additional staff and provision of suitable office accommodation; the continuing delivery of training to educational professionals and parents; and the provision of online information and training materials for parents and professionals. Details were also given about the Middletown centre's forthcoming two-day conference in January 2015 on the theme of enabling education. It is targeted at educational professionals and parents of children with autism. At the meeting, I reiterated my ongoing support for the work of the centre in supporting some of our most vulnerable children.

Turning to teacher mobility, I welcome the continued commitment of both Education Departments, through the North/South teacher qualifications working group (NSTQWG), to continue to work with the teacher councils, North and South, to remove outstanding obstacles to teacher mobility on the island. The increased use of an in-house desk assessment of applications for registration with the Teaching

Council Ireland (TCI) continues to yield benefits. Further work on simplifying the assessment of the qualifications process with the TCI will follow on from the completion of work on the review and redesign of teacher education programmes in the South, which is expected to finish in the first quarter of 2015.

Progress continues to be made in relation to the Irish language requirement. The Teaching Council Ireland is progressing the development of outcomes-based criteria for the Irish language requirement registration condition, with a view to securing TCI's approval in December 2014 and to making them available to St Mary's University College and other higher education institution providers.

Work on the implementation of an extension of the North/South collaborative programme of work in the Irish-medium sector for the 2013-14 academic year has now been completed, and I am pleased to report that the NSTQWG has decided to extend the programme into 2014-15. A programme plan for 2014-15 developed by the Professional Development Service for Teachers in the South and the Curriculum Advisory Support Service in the North has recently been approved by both Departments. I am pleased to report that an independent evaluation of the programme, looking at its work up to the end of 2013-14, has been commissioned. This will provide an opportunity to review how we have done to this point and what lessons we can learn and will help to inform future work in the sector.

The twelfth annual standing conference on teacher education North and South (SCoTENS) on the theme of 'Always learning, always teaching: Making the journey' took place in Enniskillen on 21 and 22 October 2014.

The Council welcomed the work of the North/South education and training standards committee for youth work. We learned of the work being taken forward to raise standards of youth work practice and improve outcomes for young people and to increase workforce mobility across the island of Ireland. We also learned of aspirations to develop quality standards for youth work education and training and continuous development plans to develop a formal mechanism for the recognition of youth work training programmes at all levels on the island of Ireland.

Finally, we approved the appointment of Mr Tarlach Ó Crosáin to the board of the trade and business development body from 22 October 2014 to 12 December 2015, and, on behalf of Waterways Ireland, we approved the sale of the

freehold interest in property at 9 Hanover Quay, Dublin 2 to Mrs Rita Crosby.

Mar fhocal scoir, d'aontaigh na hAiri teacht le cheile arís i mí an Mhárta 2015. Ministers agreed that the North/South Ministerial Council in education format should meet again in March 2015.

**Miss M McIlveen (The Chairperson of the Committee for Education):** According to the 2013 annual report of the Middletown Centre for Autism, this body receives roughly equal levels of funding, £673,000 from DE and £690,000 from DES. Can the Minister advise whether he plans to address what appears to be a disparity in the provision of services to parents and, indeed, professionals by Middletown?

I refer to the 6,410 parents from the Irish Republic who are receiving help in 2013-14, compared with around only 895 parents from Northern Ireland. Does the Minister believe that the current arrangements at Middletown provide good value for money for Northern Ireland taxpayers?

**12.15 pm**

**Mr O'Dowd:** I thank the Member for her question. She may or may not be aware that different services are provided to different jurisdictions by the Middletown centre. They were agreed as part of the expansion work of the Middletown centre. That may explain the difference in the numbers of parents and pupils receiving support in specific areas of the services provided by the Middletown centre. During my address, I pointed out that the southern Administration are looking at services that are currently being provided to pupils in the North solely, and they may wish to expand that service. I will give the Member more details in writing.

**Mr Dallat:** I have had the honour and privilege of teaching in both parts of Ireland. Does the Minister agree that it is totally unacceptable in this day and age to have impediments placed in the way of the free movement of teachers between the Republic and Northern Ireland? Can he assure us that, by spring of next year, teachers, North and South, will be free to move?

**Mr O'Dowd:** I accept the sentiment behind the Member's point: there should be free movement of teachers across the island of Ireland. The reality is that 90 years of partition have thrown up different regulations and governance arrangements in the jurisdictions that need to

be overcome. I welcome the work that is being carried out by the Teaching Council in the South and, indeed, by our General Teaching Council here in removing those impediments.

Steps have already been taken that have eased the flow of teachers, and a review of teacher training and provision is taking place in the South, which is required to be taken into account before any further steps are taken. However, I believe that progress is being made. I am confident that, when I report to the Assembly after our March 2015 meeting, further progress will have been made in the removal of impediments to teachers travelling across the island to teach and work.

**Mr Kinahan:** I thank the Minister for his statement. The third paragraph refers to shared education. Given that we seem to have slightly different definitions of shared education, what are we looking at here in shared education? Is it talking about controlled, maintained or integrated with a capital "I" or with a small "i"? Is it Irish-medium? What are we looking at for shared education and what is it all about? Obviously, I am keen to see it there and see it funded.

**Mr O'Dowd:** The current proposal is being looked at under the funding mechanism. It is a follow-on from the plenary session of the North/South Ministerial Council of 3 October, when both Administrations urged their Ministers to explore options for accessing European funding coming forward. One of the options that my Department is looking at is shared education under our current definition of shared education. We will work with our counterparts in the South to discuss whether we can make a joint bid in relation to shared education. I would like to see it across all sectors. Obviously, if we are working with our partners in the South, it will involve cross-border work. We wish to move forward with an all-inclusive shared education programme, but discussions will continue with our Southern counterparts on the full detail of it.

**Mr Lunn:** I thank the Minister for his statement. There are references to teacher mobility, collaborative programmes in the work of the Irish-medium sector and school youth and teacher exchanges. In the context of cross-border cooperation and even though it is not in the statement, has any progress been made in respect of the border corridor and the possibility of cooperation between schools on either side of the border? He can safely assume that I am talking about St Mary's, Brollagh.

**Mr O'Dowd:** The answer to that question is "Yes. Discussions are ongoing". I have had discussions with Minister O'Sullivan. In fairness, she was only into post and was not familiar with all aspects of the programme at that time. Officials from the Western Board and CCMS have had initial discussions with their counterparts in the South on possibilities for cooperation in relation to St Mary's, Brollagh, and across the board. They are at an early stage, and detail has to be added to those discussions before we can decide what conclusions, if any, they will come to.

In relation to the cross-border sharing of experiences, as I also mentioned in my statement, we are bringing together school principals and leaders from across the border areas to share experiences, expertise and teaching and leadership practice in their schools, which will also benefit the border corridor.

**Mr McCausland:** I notice in the statement that there is reference to the collaborative work between the Youth Council and the National Youth Council for Ireland and, in particular, exploring funding. One of the ways in which that was done in the past was to help to fund youth exchanges. In the context of cultural diversity, building a shared future and what is sometimes called the totality of relationships, can the Minister assure us that this will not in any way create or perpetuate an imbalance whereby children in Northern Ireland would only be able to experience exchange with the Irish Republic but not with other regions of the United Kingdom?

**Mr O'Dowd:** That is not the purpose of the task at all. I am fully supportive of youth exchanges between these groups of islands and have no difficulty about whether they are North/South or east-west. Indeed, I am very supportive of any such exchanges. It broadens the experiences of our young people; they meet new and common cultures as they grow from youth into adulthood. I assure the Member that I will not place any barriers in the way of east-west relationships or, indeed, North/South relationships.

**Mr D Bradley:** Go raibh míle maith agat arís, a LeasCheann Comhairle. Gabhaim buíochas leis an Aire as ucht a fhreagraí go dtí seo. Ba mhaith liom an cheist seo a chur ar an Aire: an dtiocfadh leis a rá cad é mar a chuaigh na hathruithe a ghlac Foras na Gaeilge isteach faoin tsamhail nua maoinithe i bhfeidhm ar an earnáil Gaelscolaíochta, Thuaidh agus Theas? I thank the Minister for his answers thus far.

What is the Minister's estimation of how the changes in the Foras na Gaeilge funding regime have affected the delivery of Irish-medium preschool, in particular, on a North/South basis?

**Mr O'Dowd:** Gabhaim buíochas leis an Chomhalta as an cheist. I have had discussions with Foras na Gaeilge in relation to moving forward with preschool education. My departmental officials and Foras na Gaeilge will continue those discussions. The Member will be aware that I had to make an intervention earlier this year in relation to two posts that were previously funded but which are under Altram. I have had discussions with Foras na Gaeilge about how long-term that intervention will be. As I said, I will work closely with Foras na Gaeilge as we move forward on cross-border studies and early years Irish-medium education.

**Mrs Overend:** I note that the Minister refers to teacher mobility. Surely one of the biggest obstacles to teacher mobility, even in Northern Ireland, is that non-Catholic teachers cannot obtain employment in Catholic maintained primary schools because of the religious certificate obstacle. Did the Ministers discuss that issue? Can the Minister tell us what the situation is in the Republic of Ireland? When will we see some positive change on the issue?

**Mr O'Dowd:** First, it is not accurate to say that non-Catholic teachers cannot obtain posts in Catholic schools: they can and they do. In relation to the equality issues around the Catholic certificate, that is a matter for OFMDFM, as it is responsible for equality legislation. If the Member wishes to know more about teaching practices in the South of Ireland, I respectfully suggest that she sit down with Minister O'Sullivan and have a cordial and informative meeting with her.

**Ms Maeve McLaughlin:** Go raibh maith agat. I thank the Minister for his statement. I note that the Minister has referred to engagements with officials in DE and DES in relation to cross-border pilots, and I note the Minister's comments on some questions previously. Given Minister O'Sullivan's indications around a cross-border learning zone in the north-west, can the Minister throw any more light on that in relation to Derry, Letterkenny and Strabane? Indeed, what will a cross-border learning zone mean or entail?

**Mr O'Dowd:** As I said to other Members, these are at early discussion stage, particularly the Brollagh issue. Sharing expertise across the

border is also at quite an early stage of discussion. We have brought school leaders together. My officials and DES officials regularly meet on a wide range of issues, including specific issues of how we cooperate better along the border corridor, and that will include Derry and Letterkenny. We will develop those programmes of work, and we will learn from the practitioners on the ground. They are best placed to tell us what the challenges are and how they can learn from one another across the border corridor. As that programme of work develops, I will report to the Assembly on the matter.

## **Budget 2015-16: Public Expenditure**

**Mr Deputy Speaker (Mr Beggs):** I remind the House that, with the exception of the Chairperson of the Committee for Finance and Personnel, Members are required to ask one question only. The time for questions is limited to one hour, and over 40 Members have indicated that they wish to speak. I will attempt to facilitate as many Members as possible. Anyone who does not come to their question quickly will be asked to resume their seat so that more Members will have an opportunity. If that is clear, I will call the Minister of Finance and Personnel.

**Mr Hamilton (The Minister of Finance and Personnel):** Thank you, Mr Deputy Speaker. I am pleased to be able to present to the Assembly the Executive's agreed draft Budget for 2015-16. Only a matter of weeks ago, few people thought the Executive capable of agreeing a draft Budget or that we could do so by the end of October; yet, today, I present the Executive's draft Budget to the House. Failure to agree a Budget would have been an abdication of our responsibilities and, whatever the truth, the public would have held us all accountable.

With devolution, it is our duty in good and bad economic times alike to make sure that the Budget reflects the priorities of those who sent us here. It means making the best of what we have been given. It has been said that leadership demands that we make tough choices: this, Mr Deputy Speaker, is a Budget rooted in tough choices.

We are all by now, I hope, well aware of the range of challenges that we faced as we constructed our draft Budget for 2015-16. The tightening UK public spending environment that began in 2010 continues apace, and the pressures placed on services by the public do not abate. However, the resources available to

fund those pressures have reduced dramatically. Between 2014-15 and 2015-16 alone, the Executive's resource DEL decreased by 1.6 % in real terms. Compared with 2010-11, when the Assembly last agreed a Budget, the Executive's spending power has been reduced by around £1.5 billion. Looking ahead, Office for Budget Responsibility projections show that we can expect our resource DEL to fall by a further 13% in real terms by 2019. So, in this year and beyond, we will have a wide range of increasing demands placed on our public services while we have fewer and fewer resources with which to meet that growing demand. It is a situation that demands that tough, sometimes even undesirable, choices be made.

Nelson Mandela once said:

*"May your choices reflect your hopes, not your fears."*

Tough as the years ahead will undoubtedly be, it is our job to use the resources at our disposal in ways that fulfil the hopes of the people of Northern Ireland: their hopes for themselves, their families and their community; their hopes for a growing economy, creating opportunities for all; and their hopes for first-rate public services. In spite of the challenges that we face, our draft Budget for 2015-16 is one built on hope, not fear. It is founded on our shared desire to see a vibrant economy driven by private sector investment; to see our region and its people meet their potential; to achieve a Budget that embodies our hopes for the future; and to place our emphasis on key public services that can shape the Northern Ireland we need and want. This draft Budget is an important step towards those aspirations, in spite of the huge challenges that we face.

While much debate and discussion today and in the days ahead will be around how much individual Departments will have to spend next year, our draft Budget is not merely about distributing the money that we have; it is about allocating those resources in a way that will assist us in delivering our priorities as an Executive. The Assembly will be familiar with the fact that the Executive made the economy their top priority. That focus and the investments that followed have borne fruit. During my statement on last year's October monitoring round, I informed the House that key indicators were showing positive trends, and I informed it of my belief that the local economy was showing signs of improvement. This year, I can dispense with the cautious optimism. At long last, I am pleased to report that the Northern Ireland economy has well and truly

overcome the considerable challenges of the last number of years and has entered into recovery.

## 12.30 pm

The evidence that we have exited the worst economic crisis in living memory and have turned the corner into better times is irrefutable. The Northern Ireland composite economic index, published in October, shows an annual rise in the local economy of 1.2% since quarter 2 of 2013. Interestingly, it is our private sector that is driving growth, rather than the public sector. The services and production sectors drove the 1.2% annual increase, with 1.1% and 1% rises respectively, while the public sector was down by 0.4%.

The positive direction in our economy is backed up by the estimates of growth made by independent forecasters like the Northern Ireland Centre for Economic Policy and by survey evidence from Ulster Bank's purchasing managers' index. Unemployment levels are now heading in the right direction, with the claimant count going down for 21 consecutive months. There were almost 10,000 fewer claimants in September 2014 compared with a year before. Unemployment now stands at 6.1%, a little above the UK average. While that is still higher than we would like it to be, it is considerably lower than that of our neighbours in the Irish Republic, who have an unemployment rate of 11.5%, and the EU average, which is 10.2%. The latest figures show that the number of people in employment increased by 21,000 compared with the same time last year. Our employment rate, which stands at 68.3%, while still below the UK average, increased by 1.6 percentage points over the year.

The House will know just how central the collapse in the local property market was to the economic crisis in Northern Ireland. I am pleased to report that property prices are also recovering, with the latest Northern Ireland residential property price index recording an increase in residential property prices of 10% over the year to quarter 2 of 2014. Over 4,800 properties were sold during quarter 2 of 2014, which represented a 25% increase compared with a year before. Those are clear signs of growing confidence in our economy.

The structural economic constraints that Northern Ireland faces are well known. Gross value added per capita, which is a measure of the whole economy and is widely recognised as an indicator of relative living standards, stands at just above 75% of the UK average. In 2011-

12 — the most recent figures we have — total public sector revenue collected in Northern Ireland was estimated at £14.1 billion. The total public sector expenditure over the same period was estimated at £23.8 billion. That is a fiscal deficit of approximately £9.6 billion.

Although our fiscal position is not as strong as we would like, public spending in Northern Ireland remains high compared with other parts of the UK, even if it has not risen at the rate that we would like. In 2012-13, each person in Northern Ireland had £10,876 spent on them by government, compared with only £8,529 in England. At its starkest, Northern Ireland's citizens get £2,347 more in public spending per head than their counterparts in England. In key public services, we spend more per head of the population than the other devolved regions. HM Treasury's public expenditure statistical analyses for 2014 show how Northern Ireland spends significantly more per person on education and social protection than Scotland or Wales. I do not want to see Northern Ireland subsidised to the extent that it is any more than the next person, but those numbers are a blunt reminder that our economy and therefore our tax base are not strong enough to stand on their own. We face fiscal realities that make our aim of rebalancing the economy an immense challenge, yet, in a range of ways, we can see not just recovery in Northern Ireland but, importantly, how the policies pursued by the Executive are helping to progressively transform our economy.

Members will know how important it is to increase expenditure on research and development, drive up our exports and develop new sectors of the economy where there is potential for growth if we are to change our economy and turn it into the vibrant, dynamic, outward-looking economy that we aspire to. On all those fronts, I can report success for Northern Ireland. The latest official GVA figures for 2012 show that GVA in Northern Ireland increased by 1.2% from 2011. Total R&D expenditure in Northern Ireland in 2012 was £624.1 million. That represents a year-on-year increase of £57 million, driven primarily by the private sector. Our growing expenditure on research and development is marking Northern Ireland out globally as a small but very innovative nation.

The manufacturing sales and exports survey 2012-13 showed that total manufacturing sales by Northern Ireland companies were up annually by 1.9% and that the value of sales outside Northern Ireland was up by £415 million to £13.3 billion. That represents the highest ever level of external manufacturing sales. Not

only is the market for our manufacturing businesses growing but, importantly, three quarters of sales are outside Northern Ireland, illustrating how our focus on exports is paying off.

Our agrifood sector has been a real success story, defying the odds during the downturn. Total gross turnover in the food and drink processing sector was up by £285 million — 6.7% — in 2013 to a total of £4.5 billion. Employment in the sector also rose by 2% over the same period to 20,390.

Tourism is a sector that has huge potential for Northern Ireland. Investments by the Executive in infrastructure such as Titanic Belfast and the Giant's Causeway visitor centre, along with attracting world-renowned events such as the Giro d'Italia and the Irish Open, allow us to capitalise on that potential. There were 4.2 million overnight trips to Northern Ireland between July 2013 and June 2014, with a total spend by visitors in the year to June 2014 of £755 million, which represents a 6% annual increase.

The year 2013-14 was also a record one for Invest NI. Nearly 11,000 jobs were promoted across Northern Ireland; over £1 billion in new investment commitments was secured; and almost £250 million in research and development expenditure was encouraged. Invest NI has begun this financial year as it finished last year. In excess of 7,000 jobs have been promoted by Invest NI in the seven months since April. I am sure that the whole House will join me in congratulating my colleague the Enterprise Minister, Arlene Foster MLA, and Invest NI chief executive, Alastair Hamilton, for the work that they have put in to make Northern Ireland a prime destination for investment.

The attraction of major investments this year by the likes of Concentrix, Moy Park, Baker and McKenzie, PricewaterhouseCoopers (PwC), Ernst and Young and Deloitte emphasises how Northern Ireland is an increasingly popular place for firms to invest in and to grow and create employment. A recent UK Trade and Investment report highlighted the fact that foreign direct investment (FDI) projects into Northern Ireland for 2013-14 had increased by 32% compared with the previous year, which represented the highest growth of all UK regions. That follows the 2014 Ernst and Young UK attractiveness survey, which showed that Northern Ireland secured 4.5% of all FDI projects into the UK in 2013, considerably higher than our population share. Per capita, Northern Ireland secured almost 40% more new

inward investment jobs than the next best region and three times as many as London. Belfast is now the number one destination globally for financial technology investment.

The mosaics that adorn the ceiling of the Senate Chamber just down the corridor reflect the shipbuilding, linen and farming heritage that helped build our nation. We are justifiably proud of our industrial past, but we have much to be proud of in the new Northern Ireland economy. We are the first region in Europe to achieve 100% broadband coverage; one in three of London's famous red buses is built in Ballymena; one in every three business class aircraft seats is made in Kilkeel; one in five computer hard drives contains a part made in Londonderry; and 40% of the world's mobile crushing and screening equipment is made in County Tyrone. Times may have changed, the industries may have changed too, but what remains constant is the ability of Northern Ireland to punch well above its weight in the world economy.

Our economy is beginning to rebalance. The policies that the Executive have pursued, the investments that we have made and the endeavours of colleagues such as the Enterprise Minister, the First Minister and the deputy First Minister — all the Executive's efforts together — have paid dividends. Our plan to rebuild and rebalance the Northern Ireland economy is working, although there is still much work to do. That is why we must maintain our concentration on growing a vibrant and dynamic economy, continue to devise and implement policies that aid industry and, so far as we can, invest as much of our limited resources as possible in areas that will yield economic benefit. The draft Budget builds on our recent economic successes and points to a future of continued economic growth and prosperity.

The House will be aware that the majority of the funding available to the Executive comes via the block grant from the Treasury. That comprises two elements: annually managed expenditure (AME), which funds volatile spending programmes such as pensions and benefits; and the departmental expenditure limit (DEL), which the Executive may allocate to their specific priorities and programmes. The latter is, of course, the focus of the draft Budget.

The Executive's total resource DEL allocation for 2015-16 is £10.2 billion. Some £550 million of that relates to ring-fenced resource DEL that may be used solely to fund non-cash costs in respect of depreciation and impairments. That leaves £9.7 billion available to the Executive to

fund public services. The Executive's total capital DEL budget for 2015-16 is £1.1 billion, up slightly on the 2014-15 level. However, that includes an increasing level of financial transactions capital (FTC) — some £128 million — which may be used only for loans to or equity investment in private sector entities.

One way in which the Executive may increase their spending power is through the revenue raised by the regional rate. In the 2011-15 Budget, the Executive, recognising that householders are still dealing with the impact of the downturn on their incomes, agreed that the domestic and non-domestic regional rates would be increased only in line with inflation. I am pleased to announce that this will continue to be the case for 2015-16. This will result in an estimated 2015-16 regional rate income of £649.8 million.

Members will be aware of the calls by some to raise more revenue by stopping so-called super-parity measures. In my view, those who argue that the answer to our budgetary problems is simply to introduce water charges or to hike rates bills are wrong and misguided. This is a devolved Assembly, and it is up to those of us elected to serve in the House to decide what is in the best interests of the people of Northern Ireland. If devolution is to mean anything, it is not about slavishly following the policies of other parts of the United Kingdom. It is about tailoring policies to suit the circumstances of Northern Ireland, and that is what we have done.

I am proud of the fact that Northern Ireland has the lowest household taxes in the whole of the United Kingdom. The average household bill in Northern Ireland in 2013-14 was £812 compared with £1,322 in Scotland, £1,433 in England and £1,613 in Wales. I make no apology for keeping local taxes low. There are public spending consequences, but it is the right thing to do. I believe in keeping as much money as possible in people's pockets. Taking it from them might give us some short-term public spending satisfaction, but the impact on consumer confidence and economic recovery should not be dismissed. Keeping local taxes low is the right thing for the people of Northern Ireland. I can also confirm that the draft Budget is predicated on the continuation of a small business rate relief scheme, offering £20 million of support to thousands of Northern Ireland's small businesses.

On the capital side, the Executive also have the ability to borrow up to £200 million each year under the reinvestment and reform initiative (RRI) to fund capital investment. I propose that

we continue to draw down the maximum available RRI borrowing in 2015-16, in part to continue boosting the local economy and construction sector.

I turn to the detail of the draft Budget outcome. In determining this position, a number of Executive commitments required consideration. I am pleased to announce that the Executive have agreed funding for several central issues, which include £5 million allocated to OFMDFM to cover the costs of the historical institutional abuse inquiry and £10.7 million in resource DEL and £8 million in capital DEL for EU match funding, which will be held at the centre for allocation to Departments as part of the final Budget. The £15 million cost of providing a level of support for rates convergence has been factored into the regional rate calculation, and there has been a retention in the DSD baseline of the funding to cover the cost of the 10% cut applied to the housing benefit rates rebate. In recognition of the importance of the Executive's Delivering Social Change agenda, the social investment fund and the commitment to funding the childcare strategy action plan, the draft Budget outcome maintains funding at the 2014-15 level. Some £14 million resource DEL and £15 million capital DEL is held at the centre for disbursement by Executive decision at a later date.

The Executive also face strategic pressures on our resource DEL. Members will recall that, to help to alleviate the significant pressures facing the Executive in 2014-15, the Chancellor agreed access to the national reserve of up to £100 million. That must be repaid from the Executive's 2015-16 Budget. I have approached the Treasury to seek the flexibility to reclassify funding raised from the sale of capital assets to resource to alleviate the additional pressure that this would place on the Executive's resource DEL.

An issue that all Departments will have to address in 2015-16 is the financial impact of the ongoing public sector pension scheme revaluations. That work is likely to result in significant additional employer contribution costs, particularly for the health and education sectors.

My officials are engaging with HM Treasury and the Government Actuary's Department to seek to ameliorate these costs. In the interim, the Executive have agreed to hold £133 million centrally to help to alleviate this pressure on Departments.

**12.45 pm**

The Executive have agreed to set aside £70 million to fund a package of measures designed to mitigate the impact of welfare reform changes on the most vulnerable.

In determining a draft Budget outcome, an important consideration was the treatment of the Department of Justice. When policing and justice was devolved in 2010, Her Majesty's Government put in place a specific funding package. In order to manage this, the DOJ budget was ring-fenced. With the exception of funding for national security measures, which remain ring-fenced, that specific funding package has come to an end, and it is only appropriate that the ring-fence on the Department of Justice does likewise. This will fully integrate DOJ into the local Budget process and allow effective management of the aggregate financial position.

The starting point for our resource DEL was the 2014-15 opening monitoring position, adjusted to remove time-bound Executive allocations and EU-related funding, which has yet to be distributed. After the baseline was established, a level of reductions was agreed that would provide funding for the central and strategic pressures, along with an amount to be allocated in support of key services. In applying these reductions, elements of the Department of Health's budget relating to front line health and social care pressures have been protected. This meant that the remaining elements of its budget faced the same level of reductions as other Departments.

In line with the independent role that the Assembly Commission, the Audit Office and the Assembly Ombudsman exercise, savings targets have not been imposed on them. However, I have every expectation that these bodies will have due regard for the overall Budget position in 2015-16, seek to manage their internal pressures from within their overall resource allocations and seek to achieve similar savings, returning any efficiencies to the Executive for redistribution.

In making allocations, I believed that it was crucial that the Executive gave careful consideration to supporting their key priorities, as well as ensuring that legal or contractual inescapable pressures in Departments were met. With this strategic approach in mind, the following resource DEL allocations were made.

In light of the significant and well-publicised pressures facing health, an additional £200 million allocation has been agreed, equating to a real terms increase of 1.7%.

The Department of Education was allocated £145 million to provide it with an element of protection.

DOJ has received £29.5 million of ring-fenced national security funding from Her Majesty's Treasury and an additional £45 million from the Executive in recognition of the pressures facing the PSNI. There is also a capital DEL allocation for national security funding amounting to £1.5 million.

The Invest NI baseline in DETI, which was previously reduced due to the economic downturn, has been reinstated to the tune of £7.7 million. A further £30 million has been provided to DETI to ensure that our recent impressive record in job creation can continue.

DRD has received £20 million for the reinstatement of the Budget 2011-15 decision on income to be generated from Belfast port funding and £9.5 million for concessionary fares.

DEL has been provided with a further £15 million to support the further education sector, in particular, for provision for 16- to 18-year-olds.

DARD receives £15 million for TB compensation, CAP disallowance and reform.

DCAL has received £2.8 million for the wide range of pressures that it faces.

DFP has received £3 million towards non-domestic revaluation pressures.

DOE is allocated £2 million to offset reductions to local government grants.

The PPS has received £2 million for baseline budgetary pressures.

Finally, OFMDFM receives £3 million funding for the Victims and Survivors Service.

In addition to these specific allocations, £124.5 million of funding was then provided, pro rata, to Departments facing reductions to help to alleviate the worst impacts.

The result of these various allocations and reductions is an overall cut in resource DEL expenditure by Departments of £213 million, with all Departments, aside from the Health and Enterprise Departments, in a minus position. While this is considerably lower than the 15% that all Departments, with the exception of the Health Department, were planning for just a few

weeks ago, I fully appreciate that many will be placed under considerable pressure in delivering savings on this scale. We should not attempt to mask the fact that these reductions will alter the shape and nature of our public sector.

If past performance is any indicator, it is likely that many Ministers will seek to make the savings required by their Departments by way of an identical percentage cut across their services. This, in my view, is the wrong approach in these circumstances. These are not pure efficiencies, the like of which we have become accustomed to in previous Budgets; rather, these savings and this process may involve the cessation of some lower priority services in Departments.

Capital does not have the same uniform spending pattern that applies to resource spend, so an incremental approach is not appropriate. Therefore, a zero-based approach has been taken by my Department. That involved an assessment of contractual and Executive commitments alongside a consideration of PFG targets and existing departmental priorities. As ministerial colleagues will no doubt have their own priorities, the capital position, though founded on specific projects and programmes, will be provided as a capital envelope within which Ministers can allocate as they see fit.

However, I think it is worth highlighting a few of the major projects that will be funded within this position. In health, those include: the new regional children's hospital; the maternity new build and the critical care block at the Royal Victoria Hospital; phase B of the Ulster Hospital; Omagh local hospital phase 1; and Altnagelvin phase 5. The A2 Greenisland, A8 Belfast to Larne, A26 Glarryford and the A31 Magherafelt bypass have all received funding, along with the Belfast rapid transit scheme. Significant funding has also been provided to the Department of Education for various schools schemes, and DSD has received allocations for new-build social housing and co-ownership. Those projects show the Executive's ongoing commitment of investing in infrastructure projects that will improve public services and the Northern Ireland economy.

The capital allocations also include £26.8 million to DE, DEL and DSD in respect of Together: Building a United Community. That is funded by additional RRI borrowing, agreed under the economic pact.

A total of £115.6 million of financial transactions capital has been allocated to Departments for

projects involving loans to, or equity investment in, the private sector. A number of those projects require further refinement and that position will be revisited at the final Budget stage.

Investment in infrastructure is a key driver of economic growth. As Members will be aware, we collectively invest directly in large-scale projects, such as roads, public transport, hospitals, schools and water infrastructure, which are all in public sector ownership. However, there are a number of areas where significant infrastructure investment is usually taken forward by the private sector but where we have a particular interest since investment helps to deliver on specific Northern Ireland Executive objectives. Those areas include: social and affordable housing; energy production; energy efficiency and renewable energy; telecommunications; and urban regeneration. I am keen to ensure that project promoters in all those areas have easy access to affordable project finance. I am therefore proposing to establish a Northern Ireland investment fund to support investment in local infrastructure. That fund may utilise some of the financial transactions capital funding available to the Executive in 2015-16. It would also potentially allow large international investors, including the European Investment Bank, to invest in local projects that would usually be too small in scale to access that type of finance.

As a first step, I have commissioned a study into the feasibility and extent of that fund, and I envisage that taking four to five months to complete. That will inform the scope, scale, design and investment strategy of a potential fund. It will include determining realistic and deliverable investment need and demand, an appropriate investment strategy and delivery options to meet the Northern Ireland Executive's objectives. The feasibility study will also inform the ideal scale of the fund. I anticipate that the creation of this investment fund will, in the first instance, make a further £1 billion available for investment in infrastructure across Northern Ireland. The Executive have agreed that the unallocated £12.1 million FTC should be set aside to provide an initial balance to the fund. We can further review the funding requirements once the feasibility study has concluded.

The House knows of my ongoing focus on the need to reform our public sector. Never has the need to renew, redesign, rethink, restructure and reform government been clearer than in the financial circumstances we now find ourselves in. What we face is not one year of serious

budget pressures. This is the new landscape for the remainder of this decade and perhaps even beyond. What Northern Ireland needs is not just adjustments so that we stay within our Budget. It is imperative that, as we face further funding constraints, we continue to develop and enhance our already extensive and ambitious reform programme aimed at delivering savings for the Executive as well as improved public services.

We have now engaged the OECD to undertake its first ever sub-national public governance review. The Executive have agreed to the OECD benchmarking elements of our public sector against international best practice. This groundbreaking work will assist the Northern Ireland Executive in identifying significant reform opportunities that will enhance public service delivery in the years ahead.

Members will also be aware of some of the reform architecture that I have put in place. Initiatives like the public sector innovation laboratory and our open-data challenge have followed on from our existing successful reforms such as our world-class shared services, digital transformation programme and asset management strategy. This draft Budget builds on that good start.

Making reform a reality can often require upfront investment that will garner long-term benefits. With that in mind, the Executive have agreed to allocate £30 million to a change fund. The fund is tailored specifically towards reform-orientated projects that are innovative, involve collaboration between Departments and agencies, or focus on prevention. Departments have been asked to submit bids to my Department, and those that are successful will be outlined in the final Budget.

While we would all prefer to be initiating reforms that are purely about improving public services, the starkness of our situation dictates that urgent action is needed to place our Budget on a long-term sustainable foundation. To that end, officials in my Department have, with the agreement of the Executive, been developing a workforce restructuring plan. This will embrace all possible personnel interventions, including a recruitment freeze, suppressing vacancies, the use of temporary staff, pay restraint and a voluntary exit mechanism, to reduce workforce numbers. I will bring a paper to the Executive within the next fortnight that will detail plans for addressing these issues. Elements of the restructuring, such as any voluntary exit scheme, will require setting aside upfront funding. Funding of the scheme will be vital to ensure we can deliver the restructuring our

public sector requires to enable it to live within the ever more constrained resource DEL position.

I have begun negotiations with Her Majesty's Treasury to approve the use of £100 million of RRI borrowing to capitalise the cost of the workforce restructuring. That flexibility, alongside the reclassification of funding to cover the repayment of the reserve claim, will be vital in allowing the Executive to manage the difficult public expenditure environment that lies ahead.

In his 1962 State of the Union address, President John F Kennedy said:

*"We sometimes chafe at the burden of our obligations, the complexity of our decisions, the agony of our choices. But there is no comfort or security for us in evasion, no solution in abdication, no relief in irresponsibility."*

I do not underestimate the burden, complexity or indeed agony of the challenges we face next year and into the future. However, in this draft Budget, we begin to show that we are able to take the tough choices; not evading, and not abdicating our responsibilities. In the sort of situation we face, where the money we have at our disposal is falling, where the pressure on key public services like health rises year on year, and where costs like public sector pensions revaluation are considerable, it is impossible to construct a draft Budget where everyone is a winner.

I am sure that every Finance Minister everywhere would always prefer to be announcing a Budget where they were able to spread largesse around every Department with no one losing out. Unfortunately, that is not the hand I have to play. We must play the hand as it has been dealt. That means difficult decisions and tough choices.

Given the inevitable impact of Budget adjustments of this scale, perhaps the easy option was to oppose this draft Budget. That would have been the irresponsible choice. Rejection of the draft Budget last week would have plunged us into an immediate crisis. Not only would Northern Ireland have been without a Budget for next year, and all the problems that that would entail, but we would have lost access to the £100 million loan facility that helped us with our in-year budgetary problems. Opposition or abstention might seem like an easy option, especially when you know that there are others who have the courage to do the heavy lifting that you are not prepared to do.

Those who failed to support this draft Budget must explain not just why but what their credible alternative is —

**Some Members:** Hear, hear.

**Mr Hamilton:** — and what they would have done when the £100 million loan disappeared.

This draft Budget has been constructed in the most challenging financial circumstances to face any Administration in the history of Northern Ireland. However, despite the multitude of challenges the Executive faces, we have agreed a draft Budget that prioritises what is important to the people of Northern Ireland.

When I began working on this draft Budget, I was deeply concerned that the scale of the pressures facing the Executive were so severe that the adjustments to public spending would be devastating. Cuts of 15% were on the cards for the vast majority of Departments. Instead, we have worked hard to stave off the worst, find imaginative ways to deal with our financial difficulties and still make significant allocations to priority areas.

We have produced a balanced Budget with no overcommitment. We are building on the economic recovery by funding job creation, investing in infrastructure and creating a £1 billion investment fund. We have focused on reform and restructuring our public sector in readiness for the undoubted challenges that the years ahead will bring, and we have backed the public services that our people want to see prioritised, with a significant increase for Health and support for Education and policing.

**1.00 pm**

This draft Budget offers the best way through what was always going to be a difficult year and starts to prepare us for the tough times ahead. It deals with our difficult circumstances in a way that is right for Northern Ireland's economy, for our public services, for our infrastructure and, most importantly, for our people.

This is not a draft Budget that is narrow, partisan or party political: it is about dealing competently and compassionately with the circumstances that we are in. We have faced tough choices, and, by backing health, education, jobs and investment in infrastructure, we have made the right ones and chosen the best interests of the people of Northern Ireland.

The first duty of an Administration is to set a Budget. At a time of reductions in public expenditure, that is no easy task for any

Government. In a five-party coalition, the level of difficulty is multiplied. It is an acid test for any Administration, and last week the Executive passed that test. It is probably not a draft Budget that any party alone would have set, but it is a product of negotiation and of compromise with decisions taken for the greater good.

Last week, the Executive faced up to tough choices and made difficult decisions. In short, we did what we were elected to do. The Executive have agreed a draft Budget, and now, through the consultation process, the public can have its say too. I hope that this draft Budget will mark the Executive turning a corner: a new start after some difficult times.

Facing up to reality, being prepared to compromise for the greater good and protecting and prioritising what really matters to the people of Northern Ireland are the principles that have informed this draft Budget, and I commend it to the House.

**Mr Deputy Speaker (Mr Beggs):** The sound system is picking up some distortion, so I ask Members to make sure that their mobile phones are not causing interference.

**Mr McKay (The Chairperson of the Committee for Finance and Personnel):** Go raibh maith agat, a LeasCheann Comhairle. I thank the Minister for his speech. My concern is about the impact that the Budget will have on front line services in Departments. In this financial year, the Health Department got some £80 million that was protected, yet, in Ballycastle and in the Downe, beds are being closed, and in north Antrim a hospital is being closed. There has been no real attempt to deal with the fat that we all know exists in the Department of Health, Social Services and Public Safety.

I welcome that the Executive have agreed to give an extra £200 million to health, and that money needs to go to the front line. Given that the Minister's party is leaning towards privatising public services and, as we heard on the radio this morning, cutting public sector jobs, what guarantees has he had from his party's Departments, such as the Department of Health, Social Services and Public Safety, that money will be spent wisely and on front line services?

**Mr Hamilton:** I thank the Chairman — I think I thank him, anyway — for his question. Somewhere in his comments, he welcomed the additional £200 million allocation to the Department of Health, Social Services and

Public Safety, which represents a 1.7% real-terms increase in funding, which is well above the rate of inflation. It is well documented, though, and I am sure that the Health Minister will concur with this, that there are 6% annual inflationary pressures on the Department of Health, Social Services and Public Safety.

We watch across the water as the NHS in England grapples with the £8 billion pressure that it has to deal with before the end of the year, and the same is true in Scotland and in the Republic of Ireland, where health requires much more than any Administration are able to give it. I am sure that the Health Minister would have liked more money to deal with the pressures that his budget is facing, but, in the constrained financial circumstances that we are in, the £200 million — that 1.7% real-terms increase — represents a good deal for health in very difficult and challenging circumstances.

The Member well knows, and, if he does not, he can talk to his party colleagues in the Executive, the extent of the difficulties that the Executive and Assembly face, not just in this upcoming financial year but moving forward as well. *[Interruption.]*

**Mr Deputy Speaker (Mr Beggs):** Order.

**Mr Hamilton:** That necessitates the tough choices and difficult decisions that I talked about. There are pressures, not just on Health but on every Department. There is less money, with £213 million being taken out of Departments' resource budgets. That will require reductions in service delivery, which is an unfortunate reality.

When you have £213 million less next year and will have more than that taken out in years to come, you do not need the same number of public servants to deliver those services. That is something that we are trying to move forward on, and that has been agreed by the Executive and certainly by the Member's party colleagues in the Executive. There will be a need to reduce the headcount right across not just the Civil Service but the whole of the public sector. I am bringing forward proposals in respect of that, and I think there is a well-accepted acknowledgement by his party colleagues in the Executive that we are going to have to do something in that regard.

We should not lose sight of the fact that it is, I thought, the aim of every party in the House to rebalance our economy. Certainly, what we are seeing with the growth of our private sector and the movement of the public sector to a lesser role in economic growth is that rebalancing

happening. That is something that we all should welcome.

**Mr Girvan:** I thank the Minister for his statement to the House and the presentation of the draft Budget. What impact has the policy of austerity pursued by the coalition Government in London had on Northern Ireland's public spending and what does he anticipate it will be like over the next few years?

**Mr Hamilton:** I thank the Member for his question. There are some in the House who are probably better placed to talk about the impact that the reductions in spending and, particularly, the policy of austerity pursued in London, have had not just on Northern Ireland but on other devolved regions and regions of England.

We entered into this Budget facing a 1.6% real-terms reduction in our spending power, and that meant a small reduction in our block grant. So, instead of holding firm or going up slightly and keeping pace with inflation, our block grant has gone down. We started at the position where we had less money to spend. If we go back a little further to 2010, when the current Government in London came into power, our public spending in Northern Ireland has not kept pace with inflation in the way that we would have expected. In fact, our public spending power is down by £1.5 billion, which is a sizeable amount of money.

If we project that forward using the Office of Budget Responsibility's figures to the end of this decade, it is anticipated that a further 13% in real-terms reductions will come off our public spending power. That is a decade of austerity that we have the Administration in London to thank for. They have made a difficult decision even more difficult because of the constrained economic times that we are facing. Therefore, we have to deal with the hand that we have been dealt. It is not the hand that we would want to play and, therefore, it necessitates those difficult decisions and tough choices that this Budget epitomises.

**Mr D Bradley:** Go raibh maith agat, a LeasCheann Comhairle. Gabhaim buíochas leis an Aire as a ráiteas. I thank the Minister for his statement. Considering the fact that there is quite a degree of public anxiety about the proposed pay freeze, could he indicate how many public servants will be affected in this way?

**Mr Hamilton:** I thought it was clear in the statement that work is ongoing on an overall

workforce restructuring plan, which will, of course, look at headcount reductions, recruitment freezes, temporary staff and pay restraint. Let us bear in mind that, in the last fortnight, I have approved the pay remit for the current financial year, which had a 1.5% increase. I want to make that clear again: it is a 1.5% increase for staff who were within their scales and a 1% non-consolidated increase for those at the top of their scales. The last bid by the public sector unions was for a 1.9% increase, so to come in at 1.5% in the difficult position we find ourselves in this year was a reasonable settlement in the circumstances.

We are not actually proposing pay reductions, which the Member was, perhaps, inferring, although that, of course, was a policy that was pursued in the Irish Republic, of all places, where considerable reductions in pay for public servants were made over the past number of years to get that country through the difficult times that it faced. I know that the Member is a great advocate of Irish unity and of us mimicking and mirroring what is happening in the Irish Republic. *[Interruption.]*

**Mr Deputy Speaker (Mr Beggs):** Order.

**Mr Hamilton:** I am not hearing the Member saying that we should follow the Irish in regard to that policy.

**Mr Cree:** I also thank the Minister for his report. There is a lot of detail in there, and a lot of it is not too pleasant. I want to return to financial transactions capital, which will come as no surprise to the Minister or, indeed, his predecessor.

I see that we had some £35 million of FTC that, in fact, has not been accounted for and is likely to be surplus this year. I understand that we can keep only about 10% of that, so over £30 million will go back to Treasury, and that is money that is not part of our block grant. I see that in the Budget, Minister —

**Mr Deputy Speaker (Mr Beggs):** Will the Member come to his question quickly?

**Mr Cree:** Yes. I was just trying to set the scene, Mr Deputy Speaker.

There is £115.6 million in the Budget, but it needs refinement. That is 11.7% of capital. When will we have a proper process that will utilise all the available resource for us so that, in fact, we will not have money going back? I know that this is something near to your own

heart. In particular, how will it work with the Northern Ireland investment fund?

**Mr Hamilton:** The Member has frequently raised FTC in the House, and he and I have had conversations in the Chamber before about it and about concerns that he and I have had about the Executive's ability to spend this new device. I think that the fact that it is new has caused teething problems for Departments, and I think that there is also an issue with the ambition of many Departments. I am disappointed, for example, by the Department for Regional Development, where I had discussions with the Minister about a year ago about trying to take forward the Belfast transport hub using financial transactions capital. It is the perfect scheme for using FTC, because, whilst it has a public sector origin — it is developing a rail and bus centre in the centre of Belfast — it has commercial opportunity and therefore has a revenue stream that allows the FTC to be repaid. Unfortunately, it appears that Translink has got its claws into the project and would rather have, as I suspect is the case with a lot of other Departments, conventional capital, because it is easier to deal with, they understand it much better and this is something new and they are not prepared to work with it. The reality, of course, of DRD not moving forward on the Belfast transport hub with FTC is that the likelihood of getting conventional capital for that project is diminished. This was an opportunity to bring that scheme forward, and, in the bilaterals that I will have with Ministers about the Budget, I intend to raise the issue with the Regional Development Minister to see whether we can actually use FTC to advance that project.

The Member is right about the current in-year position, where we have, at this stage, approximately £35 million unallocated in FTC. He is right that we can roll forward about £5 million of that. That still leaves a lot of money to be allocated, and I suppose this was the origin of the investment fund, which the Member mentioned and which was mentioned in my speech. It became clear to me some time ago that there was a need to find a vehicle into which we could put FTC. That would be somewhere that was off the public sector balance sheet but could still invest in significant infrastructure projects. This is the vehicle that, I think, certainly in the next financial year and beyond, we will be able to deposit significant amounts of cash into and, in the process, give cheap money for infrastructure projects in social housing or renewable energy. That is certainly a possibility for next year, and I think that we can put large amounts in then. If we have advanced the feasibility study to a sufficient

point in this financial year, it is possible that we may be able to use some of the unspent £35 million of FTC and deposit it with the European Investment Bank for the investment fund in advance of it starting to work next year.

**Mrs Cochrane:** The Minister repeatedly states that the draft Budget prioritises the economy, but the figures show that there is still an emphasis on protecting areas where efficiencies could and should be made. As a result, there are fewer resources for the Department for Employment and Learning, for instance, and that will reduce our ability to ensure a strong skills pipeline. Will the Minister therefore consider reallocating more resources to this area from, perhaps, the social investment fund, which to date has shown very poor delivery, and, by doing so, truly meet the objective of prioritising our economy?

**Mr Hamilton:** The Member has mentioned only one area that money could be moved from. I at least welcome that the Member is offering one area. There will be lots of people, I am sure, who will say in this debate that they want more money here or there but will not actually offer any reason. However, I do not think that the reason that the Member offered is a particularly good source for funding. The total amount allocated to the social investment fund would do little or nothing to improve the DEL figure and would actually only take away much-needed investment from communities that are disadvantaged and very much in need of investment across Northern Ireland. I see the Member to the Member's right scoffing at the social investment fund; perhaps he is scoffing at disadvantaged areas, the people who live therein and the help that they need. It is unfortunate — *[Interruption.]*

**Mr Deputy Speaker (Mr Beggs):** Order.

**Mr Hamilton:** It is unfortunate that, of all the areas that could be targeted, this is the area that the Alliance Party seems to be targeting.

The Member mentioned the settlement for the Department for Employment and Learning. It is fair to say that, in part because of the way in which the Minister for Employment and Learning constructed his bids, putting forward no legal, contractual or inescapable bid, it was difficult to prioritise allocations to his Department and to do so on the basis of any methodology. We worked with the Minister. I met him on two occasions last week, and, as a result of those discussions, a further £15 million was allocated to the Department. That was primarily to ensure that 16- to 18-year-olds in

our colleges got the same protection as 16- to 18-year-olds in school get. I also got a further £3 million for what the Minister would describe as narrow STEM subjects, which are the IT courses in universities and further education colleges that are the pipeline that Invest NI uses to bring jobs into Northern Ireland.

**1.15 pm**

It is important that, when we have the consultation period, I listen to Ministers and discuss options with them. I have to admit that, if money is available during the consultation process, I am keen that we direct it towards DEL in the final Budget process. That is something that most parties in the Executive agree on. It is one thing for me to have a sympathetic view about that but another for me to find the money during the Budget consultation period. I encourage Members and Ministers, when they come forward with the special pleading that they all inevitably will make, to offer ways in which we can find that money. The Member mentioned prioritising areas in which efficiencies could and should be made, without elaborating on what exactly that means. It is easy to throw things around without proving where money can come from. Clearly, a lot of work has to be done in developing that economic plan on behalf of the Alliance Party.

**Mr McQuillan:** I welcome the statement by the Finance Minister. Minister, what sort of schemes do you envisage will be supported through the £30 million change fund?

**Mr Hamilton:** I thank the Member for his question. The change fund is a small amount of money — some £30 million — in the grand scheme of the Budget. I hope that it will be a catalyst for the reform that we clearly need in our public sector if we are not just to live within our means next year in a very constrained and challenging position but to prepare ourselves for at least another three years, if not four or five years, of austerity coming from London.

The fund is being held at the centre for distribution in the final Budget to Departments that come forward with innovative schemes that focus primarily on collaboration between Departments or between Departments and their agencies and on schemes that focus on early intervention and prevention. It is about allocating money to reform-orientated projects that can, in one sense, develop savings but also improve public services. There are no specific schemes in mind at this stage. It has been left very much to Departments to work

away over the draft Budget period, spending the next eight weeks working with counterparts in other Departments to develop schemes that might avail themselves of that funding. Those will then be put into the baseline of Departments at final Budget.

**Ms Maeve McLaughlin:** Go raibh maith agat, a LeasCheann Comhairle. I thank the Minister for his statement today. I welcome the additional £200 million for health, which represents a 1.7% increase in real terms. However, given your own Minister's comments in the previous two monitoring rounds on the management of the health budget, what additional oversight mechanisms will there be, including the instruction that full equality impact assessments be carried out, to protect front line services across the trusts?

**Mr Hamilton:** At the end of the last financial year, when there was a small overspend in the Department of Health, and before the allocation of £80 million to it in this financial year, it was requested that, before the first tranche of that — the £20 million allocated in June monitoring — work be undertaken to ensure that the overspend did not happen this year or in future years. I am pleased with the work that has gone on. Significant improvements have been made in the management of health budgets, to the extent that I am confident that there will be no overspend this year. Obviously, the Minister has had to make difficult decisions over the past days about where those in-year savings will come from, and I know that there is much concern across the community about that.

The question about equality impact assessments is probably better directed to the Minister of Health himself. The draft Budget is predicated on some work being done on the strategic long-term view at the Department of Health and to ensure that the £200 million allocated in the draft Budget goes to front line services. The head of the Civil Service has been charged with undertaking that work. I know that the previous Health Minister was keen that the OECD review that I mentioned in my statement should focus on his Department. That may be able to provide some independent scrutiny of the Department, where it is spending its money and how improvements can be made in the long term.

**Mr I McCrea:** I welcome the Minister's lengthy statement. He referred to the Northern Ireland investment fund. Will he elaborate on that? What finances will be available, and what sort of projects could be funded? If the Minister has

the opportunity, will he comment on the DOJ budget in respect of Desertcreat?

**Mr Hamilton:** I will take the Member's second point about Desertcreat first. There is a line of roughly £53 million of funding to develop the Northern Ireland Community Safety College at Desertcreat in the Member's constituency. That was put in, and the Minister of Justice was well aware that that was put in, so I am a little disappointed at that, although probably not as disappointed as the Member and his constituents will be if the project does not go forward, as the indications are today. I am also disappointed that the project board met on, I think, 29 October, before the Budget was agreed, yet no communication was made to me or to any other Minister that the project was unlikely to proceed. We could have adjusted the Budget accordingly. I am sure that my disappointment about the accounting treatment of that money is nothing compared with the people in mid-Ulster who will, I am sure, be annoyed about the project not moving forward.

The investment fund should be welcomed by all sides of the House. It will encourage and be a catalyst for significant private sector investment in infrastructure across Northern Ireland. Again, whilst we do not have specific projects in mind, the European Investment Bank, which we anticipate will act as our fund manager, has told us that, if we deposit about £100 million of FTC in the fund, it will leverage in roughly £1 billion of investment from the EIB alone. Thus, on top of the £1 billion that we invest annually as an Administration, that will be £1 billion that can be invested in projects such as social and affordable housing, renewable energy, energy efficiency, energy production and, potentially, telecommunications and urban regeneration. I am sure that everybody will welcome a further fillip of £1 billion for our infrastructure investment.

**Ms Boyle:** Go raibh maith agat. I thank the Minister for his detailed statement to the House. Minister, in Britain, 80% of the budget cuts as a result of the economic crisis have been borne by the most vulnerable in our society. What steps have been taken to ensure that there is a more balanced approach to delivering economic recovery here so that it will protect the most vulnerable here?

**Mr Hamilton:** The first thing that we should all welcome is that the economy is clearly starting to recover. I accept that that is not uniform and that areas of our economy, such as retail and the construction sector, are still having difficulties. However, the good news is that,

across the board and in the overall picture, the economy is starting to move in the right direction. We see that with the growth in the economy in the last year of over 1%, in the unemployment claimant count falling for 21 consecutive months and in an unemployment rate of 6.1%, which is almost half that in the Irish Republic, for example. We also see employment rising and economic inactivity falling. Every indicator that has been moving in the wrong direction over the previous five years is now starting to move in the right direction. Independent economic forecasters such as the Northern Ireland Centre for Economic Policy project that there will be further growth in the economy this year and next year. That is backed up by survey evidence from the likes of the Ulster Bank's purchasing managers' index, which show growth in the economy and confidence coming back into our firms across the country.

I understand the Member's point about trying to ensure that the recovery is felt by everybody. However, it is incredibly challenging, even in a small region like ours, to ensure that every area or every person feels the same degree of recovery. That is why we have tried to concentrate the allocations that we have made. In a situation in which we have £213 million less to spend this year than we had last year, we have tried to make sure that the money goes where the people of Northern Ireland would wish us to put it. I think that, if we were to walk out of Stormont and ask people walking up the Newtownards Road where they wanted us to spend our money, they would say that they wanted us to prioritise health and try to ensure some protection for education and policing. They would also want us to continue to invest in job creation so that the unemployment numbers, which are, thankfully, falling, continue to fall and people right across the Province can get back into work and start providing for their families.

**Mr P Ramsey:** I thank the Minister for his statement. Given the apathy and anger in the north-west, the feeling that the Executive are not working for them and the sense, particularly in my constituency, that they are second-class citizens, what can the Minister say to my constituents and others living in the north-west about the regional economic imbalance? Can he say that this is a good Budget for them, particularly in relation to the extension to the Magee campus in the city? I have asked him that previously.

**Mr Hamilton:** I have said to the Member before in the House that, instead of talking down his city, he would better serve the people of

Londonderry if he were to come to the House or go on radio and television and start talking up what is a wonderful city, a wonderful region and a wonderful part of Northern Ireland. The Executive have invested significantly in the north-west. Everybody on all sides of the House welcomed the City of Culture and appreciated the benefits that it brought to Londonderry. We can all be proud of the North West Regional Science Park, recently opened by the deputy First Minister and developed using and leveraging in EU funding. There are also the developments, through Ilex, of the Ebrington site and of Fort George. All sides of the House should be proud of the investment that we have made in our second city.

Obviously, it is a matter for individual Ministers where they invest the money in their new baseline for the next financial year, but the Executive have a record of taking Londonderry and the north-west seriously, putting our money where our mouth is and investing in that part of Northern Ireland. The people there are starting to see the benefits of that, with the spin-offs from the City of Culture. The Member shakes his head, but I reiterate the point that he does the people of Londonderry a disservice by talking his city down all the time in the House and in the media. Investments have been made in Londonderry and the north-west of Northern Ireland that constituencies all over Northern Ireland would very much welcome. *[Interruption.]*

**Mr Deputy Speaker (Mr Beggs):** Order.

**Mr Hamilton:** The First Minister has reminded me of the investment in the private sector, with jobs coming to Fujitsu. I remember meeting the global president of Fujitsu last year, who talked very highly of the skills of the people of Londonderry who were working for his company. He brought another investment into the area as a result of that. There was the £35 million investment by Seagate in research and development, creating 35 high-paid and high-skilled jobs in that city. There is a record of investment in the north-west — in public services, infrastructure, jobs and culture — that the Member should welcome instead of criticising. If there were that sort of investment in other parts of Northern Ireland, there would be a lot of happy Members in the Assembly.

**Mr Nesbitt:** Can the Minister update the House on the input into the negotiations on the draft Budget of politicians who are not Members of the Assembly? I am thinking in particular of the reported input of the president of Sinn Féin.

**Mr Hamilton:** I certainly had no meeting with the president of Sinn Féin. He may well have been busy last week with a few well-publicised issues. I suggest that the Member is probably referring also to other politicians outside Northern Ireland, including, perhaps, the Chancellor of the Exchequer. I listened to Mr Nesbitt's comments to the media at the tail end of last week. He reminded me, of course, that George Osborne was his candidate for Chancellor in the 2010 general election. I went through my extensive archives at home and found this document, which Mr Nesbitt will, I am sure, remember: 'Invitation to Join the Government of the United Kingdom'. It is a joint manifesto by the Conservative Party and the Ulster Unionist Party. I do not think that too many people took you up on your invitation. *[Interruption.]*

**Mr Deputy Speaker (Mr Beggs):** Order.

1.30 pm

**Mr Hamilton:** This document is the blueprint — the bluest of Tory blueprints — for reducing public expenditure in Northern Ireland, Scotland, Wales and the regions of the United Kingdom. The document talks about —

**Mr Nesbitt:** I did not ask you about that. *[Interruption.]*

**Mr Hamilton:** The Member does not want to hear this, of course; he does not want to be reminded, because there are fingerprints all over the document, and the fingerprints are his. The manifesto, which, of course, is Mr Nesbitt's manifesto, talks about immediate action to cut £6 billion from Departments' expenditure and further savings in future years. Of course, had the people of Strangford not seen sense and had not voted for Jim Shannon and returned him as their Member of Parliament in 2010, these would have been the cuts that the Member would have been voting for in Westminster. When the First Minister warned people in Northern Ireland that that was what a vote for the Ulster Unionist Party meant in the 2010 election, he was told that he was guilty of irresponsible scaremongering.

These are our cuts. When we are facing reductions in our spending power of £1.5 billion, and when we have hundreds of millions of pounds less, this year, to spend on public services to try to bring in jobs, encourage growth in our economy or deliver first-rate services across Northern Ireland, we must remember that it is those cuts that have been delivered by the Conservative-led

Administration in London, which the Member would have been trooping through the Lobbies to vote for, as he would have done for other policies, such as welfare reform, that have brought us here. It is the Member and his party who, more than anyone else, are guilty of causing the problems in public spending in Northern Ireland that we find ourselves in today.

**Miss M McIlveen:** I thank the Minister for his detailed remarks today. The education budget has been reduced by nearly 5%, and I appreciate that there has been some resource DEL allocation. What is the Minister's justification for lifting the protection which was previously afforded to the Department of Education?

**Mr Hamilton:** I thank the Member for her question. There had not been blanket protection for the Department of Education in the 2011-15 Budget, but protection had been afforded to that Department in-year by way of the 4.4% reductions that were made in the June and October monitoring rounds. Following on from my predecessor, I have been consistent in saying that the Department of Education should not be afforded blanket protection and that there was scope for efficiencies within its system, as there is in any other Department. It was never a matter of me locking horns with the Minister; it was not a DUP v Sinn Féin point. If, when we started our work on the draft Budget, we had wanted to offer considerable protection to the Department of Health, which, I think, everybody in the House wanted to do, and offered the same degree of protection to the Department of Education, there would have been 22% reductions to all other Departments. When we hear the concern, pain and anguish that is expressed about cuts of in and around 10%, we will, I think, agree that 20% cuts would have been unmanageable and intolerable for all Departments.

My party and I still value education. It is a bedrock of society; it is the first staging post in developing a vibrant and dynamic economy. That said, in the first instance, we cannot say that no efficiencies can be made in the system. I believe that the Education Department, like other Departments, should be making its contribution to the reductions that we all have to face in a very difficult and challenging financial year.

**Mr McMullan:** Go raibh maith agat, a LeasCheann Comhairle. I thank the Minister for his statement. Minister, it is clear from the report that the Executive have clearly signalled support for the agrifood sector by signing off on

the rural development programme and the Going for Growth strategy. Will the Finance Minister, today, in the House, reaffirm his commitment to supporting the agrifood sector in the context of this and future Budget rounds?

**Mr Hamilton:** I can, in so far as I can offer continued support with a constrained financial position. Whilst the reduction of 5.2% that the Department of Agriculture is taking is still a reduction, and one that will require the Minister to make savings within her Department, it is one of the better settlements that the Departments face. In part, that is in recognition of the importance that we all place upon our agrifood industry. During my statement, I mentioned the significant growth in the agrifood sector, with a £4.5 billion of turnover in the past financial year. That is something that we all welcome. It is a sector that has bucked the trend over the past number of years, and one in which there is still plenty of room for growth. That is why Minister O'Neill and Minister Foster have come to the Executive with their agreed paper in respect of the 'Going for Growth' document. That is an area that, resources permitting, I, and I am sure Executive colleagues, would be keen to support in the years ahead so that we can maximise the potential in that growing sector.

**Mr Campbell:** I thank the Minister for his very comprehensive statement. I knew that it would be comprehensive when Nelson Mandela and John F Kennedy were quoted in the same statement. In the very challenging environment that we are in, we have had a number of occasions when Ministers indicated that they did not have sufficient time to implement the reductions to their budget. Does the Minister believe that the statement he has delivered today, if adopted by the Assembly, will provide such time?

**Mr Hamilton:** I thank the Member for providing those quotes to me. It is much appreciated. It is a typical complaint from Ministers who do not want to vote for something or want to vote against it, for party political reasons, that they did not have enough time to study the document. I appreciate that it was a fairly comprehensive speech, but the Budget document was smaller than the speech I gave. Members of the Executive had 72 hours to read the document. If you cannot read, study and understand the implications of a document in 72 hours, I do not know whether you should be in the Executive.

I might understand the difficulties that people had about comprehending the document if they

had just 72 hours to consider it, but officials from my Department made a presentation to the Executive six weeks or more ago about the likely implications for 2015-16 for their Departments. A pretty stark picture was painted by DFP officials. At that time, we had not hollowed out all the pressures and had not thought about any imaginative solutions, and it looked like we were going to have 15% reductions for every Department but Health.

The Member and the House will see that no Department is now facing a reduction of 15%. So, every Department is in a better position. I accept that some Departments are in tough positions, and some are still in double digits, but the majority are not and some are in a positive position. So, the time that elapsed from that presentation six weeks ago to the Executive last week actually improved the position for Ministers. Indeed, last week, the position for some of the Ministers who abstained or voted against it improved again. So, DEL, DCAL and DOE got allocations between Monday of last week, when the first paper issued, and Thursday, when the Executive agreed it.

One conclusion you could draw from that is that, no matter how much money the Departments had, and no matter how much complaining they made about the impact on their Departments, they would never have voted for the paper come what may. There is a history and a pattern of behaviour. Some parties in the Executive are happy to be in the Executive and take ministerial positions in the Executive but have not voted for a Budget since 2007.

In respect of Departments grappling with these matters, I accept that many of them will have to make significant savings, which will have an impact on public services. We have tried, in so far as we can, to limit the impact on key front line services, but there will be an impact on our public services and, therefore, the shape and nature of our public sector. While the £100 million loan facility focused our minds last week, and knowing full well that we would have significant savings to make in the next financial year, we needed to get a draft Budget out so that Departments had as much time as possible to try to implement those savings so that they would not hit front line services, and so that Departments could try to make the savings in other non-front line areas of their business. So, while you would always have liked a bit more time, I think that Departments have sufficient time, particularly over the next eight weeks of the consultation period to try to make sure that the worst impact of the cuts is not felt by citizens through diminishing services.

**Mr Givan:** With regard to how other parties responded to the draft Budget, the Alliance Party indicated that it was abstaining because water charges have not been introduced and rates have not increased. What are the Minister's views on raising rates and introducing water charges to Northern Ireland?

**Mr Hamilton:** As Sir Humphrey said, it was probably the most "courageous" reason put forward for not voting for the draft Budget. I take a very straightforward view in respect of raising revenue through water charges or hiking our rates. I do not think that it is the right way to go about solving our short-term financial problems. Maybe the topic comes up at Green Party or Alliance Party wine and cheese evenings — *[Laughter.]* — and people are quite content to pay water charges or pay significant increases in their rates bills.

Maybe this is the equivalent of the Lib Dems' 1p on income tax. Whatever the motivation for it, when you hear various spokespeople talk about introducing water charges or significantly increasing our rates bill to solve our problems, let us bear in mind that for every 1% we increase our regional rate, we raise about £5 million. Therefore, to solve this problem, we would have to increase it by a considerable number of percentage points to get any sort of money that we could do anything with. Whenever I hear them talk about that, I think that they think that that money is not paid by real people. The people who would pay the water charges — on average, around £500 a year — or who would pay an increase in their rates bill are real people living and working in Northern Ireland today.

Whilst I accept that economic recovery is starting to happen in Northern Ireland, and we welcome that, the last place where people are feeling confident of recovery is in their own household income. That would be another £500, £600, maybe £700, including rates, that they would have to find in their household income. I suggest that the impact on confidence in those households would be much more than £500, £600 or £700, and you would see spending on other items go down by much more than that. You would sap the confidence that is starting to come back into our economy, and you would impact negatively on economic recovery. Whenever people come forward with suggestions for water charges or increasing rates bills — from the Alliance Party to the Green Party — just bear in mind the fact that real people in Northern Ireland have to pay those rates bills and those water charges, and

there will be an impact on the economy as a result.

**Mr A Maginness:** I am normally a very courteous person, but I cannot thank the Minister for the introduction of this savage Budget. I remind the Minister that, by introducing the Budget — I refer to the remarks of Mr Nesbitt — he has reduced himself to being a message boy for George Osborne —

**Mr Deputy Speaker (Mr Beggs):** Could we have your question, please?

**Mr A Maginness:** Further to that, there is intense outrage out there on this, particularly amongst the trade unions —

**Mr Deputy Speaker (Mr Beggs):** Come to your question, please.

**Mr A Maginness:** I ask the Minister whether it is sufficient for him to allow a period of eight weeks for consultation instead of 12 weeks, which would allow people to sufficiently answer the savagery of the Budget?

**Mr Hamilton:** If the Member wants to offer thanks to anybody in the House for the reductions in public expenditure in Northern Ireland that flow from the Budget, I thought that I made it pretty clear that all thanks should be directed to Mike Nesbitt and the Ulster Unionist Party.

There is an eight-week period of consultation, and that does not happen in every part of the United Kingdom. Our Members of Parliament at Westminster will be able to testify that the Chancellor introduces his Budget on one day, the next day the Finance Bill comes before them, and by the end of the next week it is law. Therefore, the fact that we go out for consultation at all in Northern Ireland means that we are in not a bad position. Eight weeks is less than the 12 weeks that is seen to be the normal period of consultation. However, the delay in agreeing a draft Budget — I welcome the fact that, even with the delay, we have a draft Budget and that we have removed the uncertainty not just round this institution but ensured that a Budget was in place — meant that we could not afford a 12-week consultation period. Mr Wilson — the Finance Minister who introduced the 2011 Budget — did not get the draft Budget in until 15 December, and it had an eight-week consultation period, which ran over Christmas. Even though this has been characterised as a draft Budget that has been delayed, it is still in place much earlier than the 2011-15 Budget, and it will conclude before the

end of the year, rather than going over into the new year.

If we had gone for a 12-week consultation, which would have taken us to the end of January, we would have had the real prospect of having no Budget in place and no Budget Act in place for the start of the next financial year. Obviously, we have some work to do between the end of the consultation and agreeing the final Budget, and then we have to go through the legislative process in the House. If we had waited until the end of January to do any negotiations around further allocations or reductions if required, we would not have had the time to implement the legislation, and we would have had the real possibility that there would be no Budget in place for the start of the financial year. Whilst the Member might warmly welcome consultations or want to have them for 12 weeks, I am sure that, in the circumstances, he will understand that it is simply something that we cannot afford.

**1.45 pm**

**Mr Ross:** Unlike the SDLP, I am glad that the Minister has faced up to the difficult economic realities that we face and been able to present a balanced Budget to the House today. I also think it is right that we have continued to support the facilitation of job creation. I think that is good news for people in Northern Ireland. What support will there be for small businesses, particularly through the rating system?

**Mr Hamilton:** I am glad that predecessors in my post have been able to introduce a range of measures to support small businesses through the worst of the economic downturn. The Member and the House will be aware of the small business rate relief scheme, which has been a great success in all parts of Northern Ireland in helping small businesses. In fact, half of small businesses get at least 20% off their rates bills as we stand. That support can continue because of an allocation of £20 million that has been made in this Budget for a continuation of the small business rate relief scheme.

The scheme is undergoing a review. I am due to make a final decision on its shape and nature in the next couple of weeks, but I am glad that, whatever change in the shape or nature of the scheme that there may be, the Executive have agreed to set aside £20 million for our small businesses, particularly those in retail, that still suffer in many parts of Northern Ireland. That support will still be there, and we will be able to

back our small businesses through a small business rate relief scheme.

**Mr Clarke:** In terms of the response that the Minister gave earlier to Mike Nesbitt, I am sure that he is also surprised by the response from the Regional Development Minister on the Budget. He described the Budget as savage even though he was advocating for the Tories in the last election. I welcome the fact that the Minister has not only minimised the reductions to 4% —

**Mr Deputy Speaker (Mr Beggs):** Can we have a question?

**Mr Clarke:** Yes. I welcome the fact that the Minister has minimised it to 4% and also added £10 million to concessionary fares —

**Mr Deputy Speaker (Mr Beggs):** Sorry, can we have a question?

**Mr Clarke:** Can the Minister tell us whether the Regional Development Minister has agreed to access Translink's reserves of £55 million to lessen the pressures on his Department?

**Mr Hamilton:** Yes, I was shocked as well, knowing the figures, which, obviously, we could not publicly reveal, although somebody in the Executive did see fit to take an early draft of the paper and pass it on to parts of the press. Even those early figures that were leaked to the press showed the reduction in the Department for Regional Development, because we allocated £20 million, which had not been there in its baseline because of the inability or unwillingness of the Minister to access £20 million from the Port of Belfast. He has also been allocated £9.5 million to cover concessionary fares, so that, instead of becoming a political football, as it has traditionally become — the Minister usually pointed the finger at me or my predecessor and said that we were going to take the money away from that scheme — it is now for the Department for Regional Development to ensure that the concessionary fares scheme for over-60s is there.

That £29.5 million allocation, plus a pro rata share of the £124.5 million, meant that, instead of being in the sort of position that my Department is in, for example, where we have to find 11% reductions for next year, the Department for Regional Development is facing reductions of 4%. The Minister for Regional Development might want to characterise a 4% reduction — I accept that it is a reduction and will lead to difficult decisions having to be made

by the Minister — in that way, but it is nowhere near as savage a reduction as many other Departments, indeed, the majority of Departments in the Executive, are facing in future years. I think the reason for the Member characterising that as savage was to set himself up for the vote that he made on Thursday. He had no intention of voting for the Budget and wanted to try to characterise it as a deeply difficult Budget for his Department when that was not the case.

In terms of the Translink reserves, the Minister wrote to me last week indicating, much like his inability or unwillingness to seek money from the Port of Belfast, that if he was to pursue Translink's sizeable reserves, which the Member talked about, it would almost empty it of any money and any reserves at all. My understanding is that the figure that the Member talked about was around £50-odd million. The Minister has pointed out that it has a £12 million loss this year and anticipates similar next year. That still leaves a considerable amount of money in the reserves of Translink, which the Minister could pursue if he wanted to, but I fear, based on past behaviour and his record, that the Minister does not have the political courage to pursue those reserves any more than he had to pursue the Port of Belfast for the £20 million that it had.

**Mr Newton:** I thank the Minister for his very detailed statement. I have to say that I think that Northern Ireland is in a better place today than it was 10 or 12 days ago, and I thank him for all the work that he has done on that. The Minister outlined in his statement the £100 million that has been granted as a loan facility for this year. Will he detail how that might be repaid next year?

**Mr Hamilton:** The £100 million loan that the First Minister and I secured from the Chancellor a few weeks ago was derided by many in the House as a "payday loan". It is the only payday loan that I have ever seen that involves no interest. However, it clearly produced a pressure on our Budget for next year. Had that £100 million come out of our resource budget, it would have added another reduction of 1%, or maybe close to 2%, for some Departments' budgets. The fact is that we were able to take cuts down from 15% to closer to 10% for the worst-off Departments, but they would have gone back up again if we had to repay that amount of money.

Through some imaginative thinking on our capital receipts, we have already been able to bank £108 million that Departments identified through the sale of surplus land and properties

and the repayment of loans, including financial transactions capital loans, that come back in to the Executive. We are seeking, and anticipate getting, permission from the Treasury to switch that £108 million from capital to resource so that there is no additional pressure on our resource budget, which is under the most pressure in the next financial year. There may be those who are concerned that that takes money away from capital, but we have increased the target. As I say, we have banked that £108 million to repay the £100 million, but that does not mean that there are not other assets that can be sold to bring in revenue. So, we have increased the target to £150 million, which will mean a replenishment of at least half that capital receipt, which will go into our capital budget. That budget will, of course, rise next year, never mind the £1 billion investment fund that we will, hopefully, have up and running next year as well.

**Mr Dallat:** In a unique moment of inspiration during his statement, the Minister told us that our economy can never be:

*"strong enough to stand on its own".*

Is that a stark reminder that we need to sort out our political differences, North and South, so that we can develop an all-island economy that benefits both parts?

**Some Members:** There will be water charges there.

**Mr Hamilton:** I have been —

**Mr Wilson:** Who is leaning on who?

**Mr Deputy Speaker (Mr Beggs):** Order.

**Mr Hamilton:** I am used to being misquoted over the last week, but I will not let the Member misquote my statement. I did not say that we will "never" be able to pay our own way; I said that we are not in a position to be able to pay our own way. That is a fiscal reality that makes rebalancing our economy incredibly challenging in Northern Ireland. It is one of the reasons why we are continuing to pursue the devolution of corporation tax powers as a tool that will allow us to further rebalance our economy beyond that which has taken place over the last number of years.

I welcome that our nearest neighbour's economy is doing much better than in recent times. That clearly benefits the people of Northern Ireland, particularly those in business who trade into that important near market.

However, I do not necessarily agree with his characterisation that that economy is standing on its own feet, because it is being bolstered considerably by the troika that includes the IMF and the European Union —

**A Member:** The British Government.

**A Member:** The taxpayer.

**Mr Hamilton:** — and, of course, yes, as colleagues have reminded me, by a £7 billion non-repayable loan from her Majesty's Treasury. So, whilst I welcome that it is doing much better, I do not necessarily agree that it is standing on its own two feet as well.

**Mr Humphrey:** I thank the Minister for his statement and appreciate the work that he has done on behalf of the people of Northern Ireland. It is sad that we have parties in the House that are financially and fiscally illiterate, as is continually exemplified by the SDLP —

**Mr Deputy Speaker (Mr Beggs):** Can the Member ask a question, please?

**Mr Humphrey:** What does the Minister believe the Executive can do to reduce the number of people working in the public sector if he believes that it is overloaded?

**Mr Hamilton:** I thought that all in the House had subscribed to rebalancing our economy. I know that our party certainly has, and that is why we have been pursuing corporation tax powers. Whilst that will not in itself transform our economy and rebalance it from the public to the private sector, it is the single best tool available to us to assist us along that road. Although I think that we are all agreed on the need to rebalance our economy, I do not think that any Finance Minister or Administration would want to reduce the size of our public sector without there being a need to do so.

We are in a position in which we have less money to spend. Cuts of £213 million are being applied to Departments this year. If you look at the projections that the Office for Budget Responsibility is talking about, you will see 13% reductions in real terms. To contextualise that, we face a 1.6% real terms reduction this year, so we are looking at almost seven times more in reductions over the next three financial years. We cannot have a situation like that and be sensible and plan for the long term if we think that we can keep the public sector at the size that it currently is. It stands to reason that, if you have less money, you spend less money

on public services and therefore need fewer people to deliver those public services.

I think that this is an opportune moment to bring forward a voluntary exit scheme, which is what my Department will be looking at over the next number of weeks. That will allow those who want to go — no one will be forced — to leave and to do so with a package that will assist them in the short to medium term. We have had a reduction of around 4% in the size of our public sector, which is still large at 212,000 people. That still accounts for around 35% of our total workforce, which is far higher than anywhere else in the United Kingdom. If we were to have the same degree of reductions as in the rest of the United Kingdom, that would mean not 4% but an average of 10%. If we were to follow that trend, we could save hundreds of millions of pounds on a recurrent basis. That would not only allow us to get us out of the resource expenditure problems that we are facing next year and in future years but help us to fund a reduction in the rate of corporation tax, which has the capacity to transform and rebalance our economy between the public and private sectors.

**Mr Moutray:** I also thank the Minister. Will he outline what the draft Budget means for welfare reform?

**Mr Hamilton:** An allocation of some £70 million has been made in the draft Budget to fund a package of welfare reform measures. Those are the sorts of measures that the previous Social Development Minister, Nelson McCausland, negotiated successfully, unlike any other part of the United Kingdom, with the Department for Work and Pensions. In that package of measures were ways of ensuring that the bedroom tax would not hit existing customers in Northern Ireland. There were a series of flexibilities around payments, frequency of payments and direct payments to social landlords. As well as all those measures that we negotiated, there is a contingency fund of around £30 million within the package of £70 million. My party and I believe that that fund can be used if members of the Executive or Members of the Assembly want to target specifically areas in which there will be considerable welfare reform impact as we learn from the lessons of the roll-out of welfare reform in Great Britain.

I hope that, now that agreeing a draft Budget has been taken off the agenda, time and space within the talks process has been freed up to address where the issue of welfare reform is and should be. I think that parties can sensibly and maturely discuss the issue, particularly the

suggestions that my party has submitted to the talks process, in order to try to find a way through welfare reform that ensures that we can implement it, keep welfare payments happening in Northern Ireland and avoid the worst effects of welfare reform as they have happened across the water.

The draft Budget does not account for any future penalties. The £114 million penalty for next year is not in it, nor is any cover for the development of an IT system for Northern Ireland. The cost of doing both those things would have been around £200 million. Looking at the draft Budget, I think that it is clear to everyone that, if we had to find a further £200 million of reductions, that would have equated to 4%, 5% or even 6% reductions for Departments above and beyond the cuts that they are facing next year. That is a price that this Executive and this country could not afford. The way that we have found through the issue of welfare reform, trying to bring it to a head and focus on a package of measures that will mitigate the worst effects of welfare reform, is the right way to proceed.

**Mr Anderson:** I thank the Minister for his detailed statement to the House. The issue of corporation tax powers has been much talked about inside the Chamber and outside. Has the Minister taken into account in the draft Budget the possible devolution of corporation tax powers to the Northern Ireland Assembly?

**Mr Hamilton:** The draft Budget does not take into account the devolution of corporation tax, although we are obviously still hopeful of a positive decision by the Prime Minister, and that will be announced no later than when the autumn statement is made by the Chancellor, which is due to be on 3 December. We have made a very robust and good case for the devolution of corporation tax powers and expect a positive decision in that statement.

Even if we get a positive statement, it will be a number of years before we will have to implement a cut in corporation tax, which means that it will be a number of years before it will impact on public spending in Northern Ireland.

## 2.00 pm

What the draft Budget does, in dealing with current resource pressures and future pressures, which could include corporation tax, is to set us up for reforming and restructuring the public sector in ways that could release savings in years to come that, whilst being

applied against the reductions that we face as a result of austerity from London, could also allow us to pay the cost of corporation tax, which would help us to transform and rebalance our economy.

**Mr Deputy Speaker (Mr Beggs):** I call Claire Sugden. The Minister will have about a minute to reply.

**Ms Sugden:** I thank the Minister for his statement. I note that Belfast is now the number one global destination for financial technology investment. In his draft Budget, how is the Minister mindful of encouraging technology investment on the other side of our country, particularly when we have a huge transatlantic cable coming ashore in my constituency?

**Mr Hamilton:** I thank the Member for her question. I do not represent a Belfast constituency, but I think that we could all welcome the fact that Belfast is doing so well in attracting IT investment from around the world. Belfast is now home to firms like Chicago Mercantile Exchange, Concentrix and big global brands that, 10 years ago, we would never have thought were likely to invest in somewhere like Belfast or Northern Ireland.

There are, of course, investments in the north-west, particularly in the IT sector. In response to Mr Ramsey's doom-and-gloom prognosis for Londonderry earlier, I mentioned Fujitsu and Seagate's investment in that part of the world.

**Mr Deputy Speaker (Mr Beggs):** The Minister must draw his remarks to a close.

**Mr Hamilton:** The Member will know — she and I have spoken before — about the enterprise zone that is being developed in the Coleraine area and the potential that Project Kelvin creates for it and the wider north-west region.

**Mr Deputy Speaker (Mr Beggs):** That concludes questions to the Minister on his statement. I ask the House to take its ease for a few moments as we change those at the Table.

*(Mr Principal Deputy Speaker [Mr Mitchel McLaughlin] in the Chair)*

## Oral Answers to Questions

### Agriculture and Rural Development

#### Rural Development Programme: Policy Objectives

1. **Mrs McKeivitt** asked the Minister of Agriculture and Rural Development to outline how the final rural development programme proposals reflect her departmental policy objectives. (AQO 6909/11-15)

**Mrs O'Neill (The Minister of Agriculture and Rural Development):** Go raibh maith agat, a LeasCheann Comhairle. Our proposals for the rural development programme 2014-2020 are designed to help to meet my Department's vision for a thriving and sustainable rural economy, community and environment to promote social and economic equality. The programme will continue strongly to help the agrifood industry to prepare for future market opportunities and economic challenges, improve the lives of farmers and other rural dwellers by targeting resources where they are most needed and help to deliver improved sustainable environmental outcomes.

I recently announced the publication of the Executive's response to 'Going for Growth', which outlines the actions that Departments and agencies will take to address the recommendations made by the Agri-Food Strategy Board to grow the agrifood sector. One of the key actions for DARD is the delivery of a farm business improvement scheme as part of the next RDP. The scheme will comprise a range of measures aimed at knowledge transfer, innovation and capital investment. It will provide support for increasing farm production sustainably and improving competitiveness through increased efficiency, more integrated supply chains and adapting to market requirements.

The RDP also includes proposals for a range of schemes to support agricultural production methods that help with the protection and improvement of the environment and countryside. Through the programme, we propose to support the planting of new woodlands and the management of existing forests to help to reduce the effects of climate change.

The RDP will focus on developing and improving rural areas by promoting economic

growth through the provision of support for rural businesses and rural tourism. We propose to support the renewal of rural villages linked to village and community plans that will be developed by the new councils. There will also be measures to improve the living conditions and welfare of those who live in rural areas.

**Mrs McKeivitt:** I thank the Minister for her response. She mentioned her vision. Will she outline her plans to provide financial support through the rural development programme or other EU funding schemes to support farmers who live in ASSIs?

**Mrs O'Neill:** As I said very clearly, we have set out the vision, which is to create sustainable rural communities going into the future. Obviously, that takes into account anybody who lives in an ASSI. Tomorrow, I will meet a group of farmers from that background to discuss the challenges that they have, and I am keen to do that. However, the core of Going for Growth and the rural development programme is supporting farmers right across the board, assisting and enabling them to grow and supporting them, whether that is with capital investment through the farm business improvement scheme, knowledge transfer, innovation or practical support in looking at their production and efficiency. Quite a range of measures will be there to support all farmers, no matter how difficult the conditions that they farm in.

**Mr Lynch:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. Gabhaim buíochas leis an Aire as an fhreagra sin. Will the Minister outline the timings in place for the scheme opening?

**Mrs O'Neill:** The first important stage is that we receive EU approval for the programme. Once we have clarity on the EU scheme rules, we will be able to design the scheme documentation and guidance in preparation for opening the schemes. On the delivery mechanisms, my officials have been looking at the timelines of the previous programme for establishing the local action groups and the axis 1 delivery agent, and they are factoring those into the delivery plans for the next programme. The date for opening the schemes will then depend on the programme being signed off at European Commission level and getting the necessary business case approval in place. At this stage, I am pretty confident that we will hit the ground running. We have done a lot of preparatory work to be in a state of readiness once we have that EU sign-off. We will have initial correspondence from Europe in January 2015,

and we hope to have formal, official sign-off at European level in mid March, which will allow us to have our strategies in place and open the schemes, in line with the new programme start date, in April/May.

**Mrs Dobson:** In the light of today's draft Budget announcement and the further tightening of public spending, will the Minister now be upfront about the budget for a key rural development programme proposal: the farm business improvement scheme? You mentioned it, Minister, in answering the previous question. Will you guarantee that the Executive, when requested by the strategy board, will be able to provide the £250 million?

**Mrs O'Neill:** Clearly, the Executive face very difficult decisions. You and your party probably know more about how the Tory Government carry out their business than I do, but we face this climate because of the onslaught, year on year, from the Tory Government. We must always remember that context when we discuss the Budgets that we in the Executive deal with and the tough decisions that we will have to take in the time ahead.

The Executive have clearly put on record their support for the agrifood industry and the schemes that we have outlined through Going for Growth. I look to the Executive to honour their commitments, and I have no reason to doubt that that will be the case. Will there be challenges in each element of the programme? Absolutely, and I do not have a problem saying that. We may need to look at how we introduce the implementation of elements of it. As I said, it is a quite far-reaching programme, and there are a lot of elements to it. For me, being mindful of all the challenges that my Department, alongside others, will have to address in the time ahead, what is most important is that I take a fair and balanced approach in finding any necessary savings. That will be done in consultation with the industry.

**Mr Principal Deputy Speaker:** Mr Alex Maskey is not in his place.

## **Tackling Rural Poverty and Social Isolation**

3. **Mr McAleer** asked the Minister of Agriculture and Rural Development for an update on the delivery of the Tackling Rural Poverty and Social Isolation framework. (AQO 6911/11-15)

**Mrs O'Neill:** The programme is making a real difference to the lives of many rural dwellers by

addressing, through a suite of schemes, issues of poverty, social isolation and disadvantage in rural areas across the North, as identified in the Tackling Rural Poverty and Social Isolation (TRPSI) framework. I am delighted with the significant outcomes achieved through the delivery to date of the framework, which is on course to meet its £13 million Programme for Government target by 31 March 2015. Schemes being delivered include youth employability and entrepreneurship programmes; the maximising access in rural areas (MARA) project; fuel poverty/energy efficiency work; the assisted rural travel scheme; the rural challenge programme; the connecting elderly rural isolated project; the farm family health checks programme; the rural borewells scheme; support for the Rural Support charity; and support for rural community development work. Many of those initiatives are excellent examples of the benefits of successful partnership working across government and with the statutory sector. I am particularly pleased with the increased access to services in rural areas, which is being achieved through the delivery of these initiatives, and I remain committed to tackling the key challenges facing those living in rural communities in the time ahead.

**Mr McAleer:** Go raibh maith agat. What actions are being delivered for young people in rural areas in relation to anti-poverty and social inclusion?

**Mrs O'Neill:** Through the tackling rural poverty and social isolation framework, my Department has been supporting two key rural youth initiatives aimed at increasing employability and promoting entrepreneurship among vulnerable young people in rural areas. Through the youth employability programme, which is marketed as BOOST, unemployed rural young people have an opportunity to develop skills, increase their employability and improve their chances of securing a job. The programme is currently the only employability programme in the North specifically targeted at 16- to 24-year-olds living in rural areas. BOOST, which is also supported by the Department for Employment and Learning, offers a tailored package of intensive support, including face-to-face workshops, CV clinics, an interactive support package, access to a network of employment mentors and the provision of industry-endorsed certification from the Federation of Small Businesses on completion. The programme is targeting almost 1,500 unemployed young people in the age group of 16 to 24 by 31 March 2015. More than 1,000 young people have received their completion certificates to date.

The Department is also supporting the rural youth entrepreneurship programme, which has recently been extended in the North, following the evaluation of an initial 28-month pilot that was delivered through international partnership in Finland, the Faroe Islands and Greenland, as well as by two local partners: the Rural Development Council and Advantage Foundation Limited from Carrickfergus. The rural youth entrepreneurship programme remains an awareness-raising and animation programme designed to stimulate 16- to 30-year-olds in disadvantaged rural areas — predominantly rural dwellers in the top 50% of multiple deprivation measures — to consider self-employment and entrepreneurship as a viable career path for young people whilst allowing them to stay in their rural community. The programme also creates the foundations for the development of future rural businesses through a series of interactive workshops, networking events, masterclasses, study visits, seminars and mentoring sessions. Over 500 disadvantaged rural young people participated in the initial pilot, with 100 completing business action plans and progressing to further business development support through the programme's inbuilt referral process. Quite a lot of work is ongoing on tackling rural unemployment.

**Mr Principal Deputy Speaker:** I know that that was a detailed answer, but we should work to the two-minute rule.

**Mr Campbell:** The Minister will be aware that there are considerable numbers of severely disadvantaged people in rural areas. She has had an opportunity to look at the draft Budget: how does she believe it will affect the framework as she has outlined it to date?

**Mrs O'Neill:** The whole area of tackling poverty and isolation remains my priority; it is a policy priority for me. That, obviously, will be factored into any future budget decisions that are taken. That said, it is a draft Budget. I am committed to making sure that we go out to consultation and talk to rural stakeholders, the farming community and people who live and work in rural communities and that any decisions taken will be taken in that context in the round.

As I said, DARD had a long-standing weakness in the Budget because we traditionally relied on in-year monitoring to secure additional funding. I was delighted to receive an allocation of funding through this Budget process. However, it is a draft process. I intend to go back to the Executive for further discussions as part of that

process on the back of the discussions that I will have with stakeholders.

**Mr P Ramsey:** Further to the original question, is the Minister content with the level of collaborative work with other Departments in setting action plans to look at the most vulnerable disabled people in our rural communities?

**Mrs O'Neill:** I am content that the work that we have done under the TRPSI project has been excellent. The stats stand up for themselves. We are still evaluating the outcomes of some of the pilot programmes, but the outcomes of quite a number of the programmes are clear to be seen. The fact is that so many young people are involved in the employability programmes. The MARA project for maximising access to benefits has helped a large number of people, particularly with access to disability and other benefits. The programme absolutely stands up in terms of merit and taking it forward. It also has, in a way, leveraged other Departments to do things that they might not have done if the pot of funding had not been there. I very much look at it as leverage funding. Whilst the programme was £13 million, the actual overarching value of it was way beyond that. I do not have that figure with me, but it is a significant investment in rural areas.

**Mr Kinahan:** I thank the Minister for her answer. In her original answer, she mentioned fuel poverty. Given that the Department for Social Development is a relative failure there, what is her Department specifically doing to help those in rural areas in fuel poverty?

**2.15 pm**

**Mrs O'Neill:** My Department, as part of the TRPSI framework, is trying to alleviate that and work with other Departments. As you rightly said, DSD has primary responsibility for tackling fuel poverty, and my Department is represented on the interdepartmental working group on fuel poverty, which was established by DSD to ensure effective coordination of policies and actions across Departments. The warm homes scheme has been the primary tool of DSD and the Government, and, as you said, whilst there have been benefits to that, there have been challenges and things that could be done better. My Department has supported DSD through the extension of the warm homes scheme, particularly when it comes to homes that are very hard to heat due to having old cavity walls and other challenges that the DSD grant would not cover. That has been my focus, and it has been successful.

We are coming to the end of the programme, so we need to look at new proactive ways to help those in rural communities who have additional challenges, maybe because the type of walls in their home is making them hard to heat. I am committed to making sure that I do that. As I said, that work is a policy priority for me.

## **Flooding: East Antrim**

4. **Mr Dickson** asked the Minister of Agriculture and Rural Development to outline the measures she is taking to mitigate flooding in East Antrim. (AQO 6912/11-15)

**Mrs O'Neill:** My Department is planning to deliver culvert upgrading works in the East Antrim area, costing over £150,000, over the next 12 months. In addition, Rivers Agency will continue to carry out maintenance to designated watercourses to ensure that they are free-flowing and are performing their drainage function. Designated open watercourses are inspected routinely, with those benefiting rural areas typically being on a six-year rolling inspection programme and urban watercourses being inspected and maintained annually. Where a designated watercourse has been culverted, it is inspected on a three-year cycle. In addition, culvert inlet grilles are inspected and maintained on a frequent basis, many of them weekly. Additional grille inspections are undertaken when heavy rainfall is forecast and after flood events, as debris can often be carried downstream by high river flows, which can cause obstructions. We are also drafting flood risk management plans for the north eastern river basin district, which will set out a range of objectives and measures to reduce the risk of flooding from all significant sources.

**Mr Dickson:** Thank you, Minister, for your answer. I trust that you subscribe to concerns about climate change, unlike others who do not seem to understand that it is a reality. What actions are you taking to mitigate the worst excesses of climate change and plan for the future so that flooding can and will be alleviated in those areas that you have responsibility for, not only in East Antrim but across Northern Ireland?

**Mrs O'Neill:** Rivers Agency has been very proactive, particularly in working with the Met Office. It signed an agreement recently with the Met Office on forward planning for the impact of climate change. The map systems that we have can always be improved. We are in a better position with the maps, which is the result

of a collective effort and will hopefully improve things.

Rivers Agency is obviously very focused on the fact that we have a different climate. We have seen extreme weather, such as the snow in March almost two years ago and the extreme flooding that occurs within an hour's notice. That is obviously factored into the Rivers Agency's work programme and its maintenance work and is part of its business plan.

**Mr Milne:** Go raibh maith agat, a Príomh-LeasCheann Comhairle. How does the Minister prioritise funding for flood alleviation projects?

**Mrs O'Neill:** Each area is considered on its own merit, and funding for projects across the North is prioritised on the basis of the level of risk posed to people and property, the associated costs and the benefits of the project to the alleviation of flooding. Given the economic climate, we are always trying to look at where we can get the best value for the investment. Rivers Agency takes that forward in a constructive and structured way, but basically it boils down to prioritising on the level of risk to property and the associated costs and benefits that can be derived from that investment.

**Dr McDonnell:** I thank the Minister for her answers, particularly regarding flooding in East Antrim. What initiatives are being undertaken to deal with the watercourses in south Belfast that lead to persistent flooding in Finaghy, Lisburn Road and across south Belfast in general?

**Mrs O'Neill:** I have spoken to the Member about this before at Question Time, so he will be aware that there is a cross-departmental working group in place to look at south Belfast. My Department plays a key role in that and knows what it needs to do. I have visited south Belfast and met residents to discuss the problems that we have. In the past, additional members of staff were employed to deal with the issues, and we increased inspections of the grilles because there were problems with debris and so on. Hopefully, that will assure the Member that Rivers Agency is playing its role in tackling the problems faced by people in south Belfast.

## **DARD HQ: Ballykelly**

5. **Mr Beggs** asked the Minister of Agriculture and Rural Development for an update on the plans to relocate her departmental headquarters to Ballykelly. (AQO 6913/11-15)

9. **Ms Sugden** asked the Minister of Agriculture and Rural Development to outline how the establishment of her departmental headquarters in Ballykelly will stimulate both rural development and the local economy in East Londonderry. (AQO 6917/11-15)

**Mrs O'Neill:** With your permission, a LeasCheann Comhairle, I will answer questions 5 and 9 together.

On 26 June, the First Minister and the deputy First Minister conveyed agreement to the relocation of my departmental headquarters to Ballykelly. The project is now proceeding and involves a new build to accommodate 400 workstations to be completed by the end of 2017 and an extension to accommodate a further 200 workstations to be completed by the end of 2020. My officials continue to liaise with OFMDFM, DFP and other Departments and agencies about the design, planning, construction and access arrangements. The current programme plan indicates that the tender for the construction phase will be awarded at the end of 2015.

The relocation of my Department to Ballykelly will stimulate rural development and the local economy through increased local spending, provision of high-quality and high-value public sector jobs and, potentially, jobs associated with the construction and ongoing servicing of the new accommodation. That will be a welcome boost to the construction industry. It will help to share wealth across the economy, contribute to better-balanced economic growth and help to address disparities in the distribution of public sector jobs across the North.

**Mr Beggs:** The Minister, along with the First Minister and the deputy First Minister, appears indifferent to the possible poor use of our limited public funds. Why has a full cost-benefit analysis not been published to ensure good practice? Will she ensure that money is spent in the most efficient way and we minimise the money that has to be spent on buildings and future travel costs? Does she accept that, in getting there, there should be agreement with the Department of Finance and Personnel? Indeed, has her accounting officer agreed with this proposal?

**Mrs O'Neill:** I will work in reverse. My accounting officer is working to my direction. The Executive have agreed to the movement of DARD to Ballykelly, and I am committed to taking that project forward. We have a

programme board in place; it is full speed ahead, and work is ongoing. We are working closely with staff on staff planning and moving forward. We have a business case, which has cleared all DARD's internal assurance processes. Executive approval was given on 26 June. I can say no more; it is as clear as that.

**Ms Sugden:** Would the Minister consider working with local businesses and community and voluntary groups such as the Shackleton Aviation and Space Museum on the Ballykelly site to maximise use and encourage local people and the local economy?

**Mrs O'Neill:** I absolutely agree. DFP and the Executive, as the owners of the site, are keen to explore that. Once we had made the decision, it was evident that there were a lot more people with an interest in the site. There are massive potential benefits for the north-west, not just because of the public sector jobs that are coming but because of everything else that will flow from it. I am absolutely happy, in planning and moving forward, to work with the local community because the benefits for that community are clear to be seen, particularly around construction and the increased footfall for the area. I am happy for that to be the case.

**Mr G Robinson:** Does the Minister agree that the potential jobs boost and economic stimulus through the use of the entire site at Ballykelly, including her Department's headquarters, which my colleague Gregory Campbell and I strongly lobbied for, will be a vital aspect of the economic recovery of the north-west of Northern Ireland and even further afield?

**Mrs O'Neill:** I absolutely agree that there will be a knock-on impact. The core of this is that we will have a fair distribution of public sector jobs. Those jobs will be a boost to the north-west, to the local construction industry and to Ballykelly itself, where there will be an increased footfall. The potential on that site is fantastic, and it will be a really good news story that will trickle down over the years to come. When DARD moves, the other things will follow. It is absolutely a good news story for the north-west.

**Mr Dallat:** I thank the Minister for her response. Given that this is a major element in the redevelopment of the Shackleton site, has she had any discussions with the Minister for Regional Development about establishing a railway point, which would clearly be of enormous benefit to so many people?

**Mrs O'Neill:** Yes, I have met the Regional Development Minister, and we have had discussions. It is a great idea. It is not without its problems or challenges, but that is being explored by the Regional Development Minister and his officials, so we look forward to maybe some positive outcomes from that. It was very evident from the first discussions that we had that there were a number of challenges with timings in the north-west, but it is still under consideration, and maybe we will have something positive from that.

**Mr McMullan:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. Minister, I am sure you will agree that the benefits of relocation far outstrip the negativity of some of the arguments put against the planned relocation of the headquarters.

**Mrs O'Neill:** Yes. As I said, the economic benefits are clear to be seen: the jobs stimulus; the ongoing servicing of the building; the construction of the building; the knock-on impact for the local economy; and the follow-through with other businesses coming to that site. It is all going to be of tremendous benefit to the north-west. For me, this is about a fairer distribution of public sector jobs, and it is about stimulating that local economy. It is also about bringing DARD closer to its rural roots. For me, the opportunity that we have to be the first Department to move lock, stock and barrel into the north-west is to be welcomed. Maybe it is something that other Ministers will consider in any moves in the future, making sure that they create employment in rural areas and opportunities for those in the public service.

**Mr Lyttle:** Given the costs involved and the level of objection from Belfast staff to this significant relocation, is this really a proposal with which the Minister should persist? Can she give us reassurances that it is not going to cause utter chaos in the delivery of the functions of her Department?

**Mrs O'Neill:** On the views of staff, I outlined this before: it was taken forward in a number of phases. The headquarters staff in Dundonald House, given that it has been there for 50 years, is predominantly made up of people who live in the greater Belfast area and it is only natural that, when it comes to change, those people may not want to move. That is why we had a long lead-in time and are phasing it in to allow for those staff changes to happen. That is being done in full consultation with the unions and staff side representatives. That is the only way we are going to be successful.

This is a wider project even than DARD in staff and public sector movement. This is about new ways of working and working right across all Departments. After the initial survey with just DARD staff, we went out to the wider departmental staff and to the wider Civil Service, and there are more than enough people who want to pursue opportunities closer to home to give them a better work/life balance. It is only right that they should also have the opportunity to achieve promotion, and not have to come to the greater Belfast area to be able to get that. So, I am confident that we are able to manage the staff issues, in full consultation with them and their union representatives, in moving forward. The phased process that we have stepped out fairly clearly allows us to do that.

### **Farm Business Investment Scheme**

6. **Mr McKay** asked the Minister of Agriculture and Rural Development what preparations are being made to ensure the timely roll-out of the farm business investment scheme. (AQO 6914/11-15)

**Mrs O'Neill:** The farm business improvement scheme, which includes a portfolio of measures to support sustainable growth in the farming sector, is under development as part of the wider rural development programme 2014-2020. On 14 October, I announced the submission of the draft programme to the European Commission. Formal approval and a Commission decision will depend on the nature and extent of the comments on our draft programme. My officials are working to obtain a Commission decision by April 2015.

In conjunction with seeking EU approval on the overall funding package, my officials will continue to work to develop the detail of the farm business improvement scheme and the associated business cases. The date for opening any calls under the scheme will depend on the programme being signed off by the European Commission and on getting the necessary business case approval for funding in place. In rolling out the scheme, the early focus will be on making advice and support available to farmers to help them to clearly identify their needs and to make the right decisions about developing their businesses. Officials are also considering how best to communicate and publicise the scheme once it is ready to open.

**Mr McKay:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. I thank the Minister for that update. Under this scheme, what support will be available for young farmers?

2.30 pm

**Mrs O'Neill:** Subject to the necessary approvals, the proposed farm business improvement scheme is going to include tiered capital grant support of up to 40% of eligible costs and initiatives to promote the sharing of knowledge, encourage innovation and improve the quality of the land. There is also the potential for additional grant aid of 10%, up to a maximum of 50%, under the capital investment scheme for those defined as young farmers, for innovative projects and for projects that help to improve the environment. So, match funding will be weighted more towards young farmers as we go forward, and I know that the young farmers will obviously welcome that.

**Mr Byrne:** Will the Minister indicate whether she or DARD have had any discussions with the banks to make sure that there will be co-funded finance on the farm business improvement scheme when it comes forward?

**Mrs O'Neill:** I have regular engagement with the banks. However, as part of the programme, we are still working up the scheme. Once we have more detail of the scheme and its rules, we will, as part of the roll-out of the process, want to engage with the banks. The Member will note that, last week, another bank launched a pot of money for prioritising young farmers. That is to be welcomed. It shows that there is maybe more willingness on behalf of the banks to loan to the farming community. It also talked about extending credit. However, that is just one bank among others, which obviously have all sorts of different offers. Maybe there is a change in the tide in willingness to lend, but, as part of the farm business improvement scheme and what we roll out, we will engage with the bank sector and those who may be involved in financing farmers.

**Mr Principal Deputy Speaker:** That ends the period for listed questions. We will now move on to 15 minutes of topical questions.

### **Single Farm Payments: Remote Sensing**

T1. **Mr Frew** asked the Minister of Agriculture and Rural Development whether, given the fact that, within one month, farmers and producers can expect to receive their single farm payments, she has communicated with them about the areas that will be subject to remote sensing inspections this year and which are the

four areas that have been selected. (AQT 1661/11-15)

**Mrs O'Neill:** The Member will be aware that, given EU rules, there are certain things that we can and cannot do and can and cannot say at certain times. At this moment, I can say that I have announced the targets, and we are on target to pay 93% of all claimants in December, which I am very much committed to. That includes 500 remote sensing inspections, which is double the number from last year. So, I hope to continue with the positive trend that we have developed over the last number of years. Remote sensing has worked very effectively this year, and most associated field visits will be completed in the next number of weeks. However, farmers cannot be told about the remote sensing at an earlier point in the year because of the controls and the potential of Europe coming down on us. So, the focus this year has been on reducing the time from when an inspection case reaches the Department and when it goes out to payment. We are very much focused on making sure that we pay the majority of those people in December. As I said, that is 500 inspections, which is 250 more than last year. You are right in saying that four areas have been identified this year. However, again, we cannot at this stage inform people. I took on board the commentary that we had last year on where we were at, and we intend to inform people as soon as we possibly can within the confines of the European rules.

**Mr Frew:** I thank the Minister for her answer. However, does the Minister realise that, in no other business world, would this be allowed to happen? People are waiting for and relying on thousands of pounds in December and do not know, at this stage, whether they will be able to get that money. There is nothing positive in coming out with a statement that you will have so-much percentage paid, given that those four areas will be subject to so much pressure. It will affect not only the producer but the whole community, including retailers and suppliers of those businesses.

**Mrs O'Neill:** I am very aware of the impact that it has, which is why we now have four control areas as opposed to two, and that will hopefully lessen the impact that we saw last year. My job is to protect the fact that we are paying out over £300 million in single farm payments every year and to show Europe that we are very cautious about the controls that it has dictated. We are being proportionate about that. We are taking every step that we can to inform the farmer as soon as possible, within those rules, that they will receive their money at whatever stage.

My principal aim is to make sure that we get to the stage where, first, everybody is paid by December and, secondly, we have part payments. That is what we are striving towards. We are clearly going in that direction; the trajectory has been set out very clearly. Over the last number of years, there has been improvement, year on year, and I am committed to making sure that we drive forward. That is all in the context of CAP reform, the new payment system and all the other changes that are being made in the Department. Even with all of that, the Department has made improvements, year on year, and will continue to do so. I will make sure, within the rules that are set down, that every farmer who is impacted on by remote sensing is informed of that as soon as possible.

## **Budget Cuts: Food and Drink Manufacturing Sector**

T2. **Mr Dickson** asked the Minister of Agriculture and Rural Development for an assessment of the likely effects and impact that the cuts in the draft Budget will have on the food and drink manufacturing sector. (AQT 1662/11-15)

**Mrs O'Neill:** As I said earlier, the Executive are clearly facing very difficult decisions as a result of the year-on-year reductions to the block grant because of the Tory Government's cuts to public services. Our block grant has not received an uplift, year on year, so we are facing real-terms cuts. As I also said earlier, DARD has a long-standing weakness in its budget, in that we had to bid in-year in the monitoring round for part of our funding. Therefore, I welcome the fact that the Executive allocated almost £20 million of funding to the Department. However, alongside that, we, like other Departments, are subject to a cut, which is going to be difficult to manage.

What I am very clear about at this stage is that we need full public consultation. This is a draft Budget position. I know that I have policy priorities, but I want to consult very clearly with the industry and stakeholders in taking decisions to make sure that any outcome is balanced, fair and the best approach to finding the necessary savings.

**Mr Dickson:** Thank you, Minister. Do you not recognise that failed Sinn Féin public sector financial policies have led to the impasse and will lead to students not getting places in universities and colleges to deliver in the food and agriculture sector in Northern Ireland, which is one of the vital aspects of life in

this community that contributes to our economy? Perhaps you can explain to the House why that is.

**Mrs O'Neill:** I know that the Alliance Party likes to sit on the fence, but we cannot do that. There are difficult decisions to be taken, but you always have to put those in context. Why are we in this position? We are in this position because of the Tory cuts, year on year, to our block grant. Instead of bickering with each other in the Chamber, people would be well served by working together to fight against the British Government and the cuts that they are imposing on us. That is the approach that we should be taking.

In the difficult decisions that have to be taken in the time ahead, let us never lose focus that they are as a result of our block grant being cut, year on year, by the Tories. On top of that, they want to attack those on welfare. I do not believe that this is something that we can stand over, and I do not think that any elected politician should be able to stand over it. I therefore ask you to go away and think about your party's position of sitting on the fence and letting the Tories impose these cuts, year on year. Maybe that is where you should go. *[Interruption.]*

**Mr Principal Deputy Speaker:** Order.

### **Payment System: IT Bid**

T3. **Mr Elliott** asked the Minister of Agriculture and Rural Development whether she intends to install a new IT system for basic payments this year, for which she bid for £2.2 million. (AQT 1663/11-15)

**Mr Elliott:** We are back to more mundane, agricultural issues in my question.

**Mrs O'Neill:** We have to put our new payment system in place because of the changes to CAP reform and the fact that the payment process will be different. We have to take that forward. We were not successful in the bid, but that does not mean that we will not do it. The money is now going to have to be found from within the Department's budget because it is a necessary part of us being able to get payments out to farmers on a timely basis.

**Mr Elliott:** I thank the Minister for the clarification. We are coming close to the start of the payment system for the single farm payment. Will not having the new IT system in place now impact on farmers, particularly those

who had inspections this year, and further delay their receipt of the single farm payment?

**Mrs O'Neill:** I give the Member an assurance that the 93% target that we set will be met. That will not be impacted on by the budget position; it has more to do with the changes post-2015. This year, we are on course to meet the target that I set. My aim is to pay the majority of people in December.

### **Single Farm Payment: Payment Target**

T4. **Mr Craig** asked the Minister of Agriculture and Rural Development, having listened with interest to all the issues around the single farm payment and noting that she said that 90% will receive their payment by December, whether that figure is feasible and achievable as, for a number of years, farmers have not received their payments until, in some cases, June. (AQT 1664/11-15)

**Mrs O'Neill:** Just to be clear: I have set a target of 93%. The situation has improved each year since I have taken up my post, and we have seen year-on-year increases in the number of people who have been paid in December.

As I said in answer to a previous question, my aim is for everybody to be paid in December; that is where we want to be. Secondary to that, we want to be in a position to be able to make part payments. Part of getting us to that position has included the use of remote sensing and an increase in the number of people whom we inspect in that manner. Notwithstanding all the difficult challenges I have set out, we are on target to meet the 93% in December.

**Mr Craig:** I thank the Minister for that answer. Obviously, 7% will not be paid on target. Does she have any idea of the timescales for when they will receive payments or even part payments, as she is trying to indicate.

**Mrs O'Neill:** Part payments will not be an issue this year; we will make such payments in future years. If we can do better than 93% in December, it will be all well and good. The remainder will be paid as early as possible throughout January, February and March next year.

### **Rivers Agency: PEDU Recommendations**

**T5. Mrs Cochrane** asked the Minister of Agriculture and Rural Development what progress has been made on the PEDU recommendations to move the Rivers Agency to the Department for Regional Development and whether any work has been done to establish a flood alert and forecast service for Northern Ireland. (AQT 1665/11-15)

**Mrs O'Neill:** I have always said that I am very open to the PEDU recommendations but that they have to be in the context of wider discussions about Departments and the roles of each Department. I am not opposed to the idea, but it has to be considered in the round. Perhaps that will be part of the discussions that we hope to enter into over the next couple of weeks in the talks process. The other work is ongoing. We recently signed an agreement with the Met Office, which will get things moving. That is the first stage of taking that issue forward.

**Mrs Cochrane:** I thank the Minister for her response. What other measures has she taken to prepare for possible adverse weather conditions over the winter months?

**Mrs O'Neill:** We are working on that and will go out to the press for the farming community over the next number of weeks to discuss preparations for a state of readiness in case we find ourselves in situations of adverse weather. We are giving out advice and signposting to our advisory service in CAFRE. Our advisers are available on the phone or in person to meet the farming community to talk about the challenges. Those are our attempts to try to assist the industry to be in a state of readiness.

### **Farm Diversification Projects: Income**

**T6. Mr Gardiner** asked the Minister of Agriculture and Rural Development how much farm income in Northern Ireland comes from farm diversification projects. (AQT 1666/11-15)

**Mrs O'Neill:** I do not have those figures on me, but I am happy to provide them to the Member in writing.

**Mr Gardiner:** If the Minister does not have the figures with her, she will not be able to answer the other part of my question. I will just wait on those.

### **Brucellosis-free Status: Progress**

**T7. Mr Poots** asked the Minister of Agriculture and Rural Development what progress is being made in achieving brucellosis-free status in Northern Ireland, particularly in relation to bovine brucellosis. (AQT 1667/11-15)

**Mrs O'Neill:** We have made great progress, and I am pleased that we are continuing on that trajectory. The last confirmed case of brucellosis was on 28 February 2012, and, as a result, we recently consulted on proposals to relax our pre-movement testing controls proportionally. That would mean a pre-movement testing saving to the industry of £7 million, which we have been working very hard to achieve. We are on target to receive brucellosis-free status in 2015.

**Mr Poots:** On the basis of receiving brucellosis-free status, is it the intention to relax further some of the standards that have been set as part of the quite tight regulations over the last number of years?

**Mrs O'Neill:** Under the revised arrangements, the age of the animals that are to be pre-movement tested will increase from 12 to 24 months, and the validity of tests will be extended from 30 days to 60 days for a single movement. Those changes came into effect today, 3 November. Providing there is no reversal in the trend, and we continue in the same direction, we are, as I said, on target to have brucellosis-free status for the North in March 2015. That will obviously create a brucellosis-free status across the island.

**2.45 pm**

### **Agricultural Land-use Strategy**

**T8. Ms Lo** asked the Minister of Agriculture and Rural Development whether she has had any discussions with ministerial colleagues, particularly the Minister of the Environment, about an overall strategic land-use strategy, following her recent publication of the agricultural land-use strategy. (AQT 1668/11-15)

**Mrs O'Neill:** I have not had any recent discussions with the Minister. However, officials regularly engage in taking forward the issues. In particular, there has been a lot of work recently on the Nitrates Action Programme (NAP), of which the Member will be aware. That work is ongoing. Standing items of discussion at official level are land use, the Nitrates Action Programme, the water framework directive and all the other

environmental issues in which the two Departments have a common interest.

**Ms Lo:** It is very useful for all Departments. What other Departments do you think should be involved in overall strategic land-use discussions?

**Mrs O'Neill:** The main partners for discussion are obviously DARD and DRD, but perhaps we would benefit from a lot more discussion. Land use and protecting our future are in everybody's interest, so I am very keen that, if the discussions were to be widened, my officials and I play a role in taking that forward.

**Mr Principal Deputy Speaker:** Order. Time is up. There is a lot of noisy chatter on the Back Benches. Members should give the questioners and the Minister the opportunity to be heard.

## Culture, Arts and Leisure

### Irish Language Strategy

1. **Mr D Bradley** asked the Minister of Culture, Arts and Leisure what funds have been identified to implement the Irish language strategy. (AQO 6924/11-15)

12. **Ms McCorley** asked the Minister of Culture, Arts and Leisure for an update on the progress of the Irish language and Ulster-Scots language, culture and heritage strategies. (AQO 6935/11-15)

**Ms Ní Chuilín (The Minister of Culture, Arts and Leisure):** With your permission, a Phríomh-LeasCheann Comhairle, I will take questions 1 and 12 together.

The strategies are being finalised, and I hope to publish them by the end of January 2015. My officials will then establish the structures for their implementation, working closely with other Departments, all of which will have a role to play in delivering them. The strategies set out road maps for the Irish language and for Ulster Scots over the next 20 years in a wide range of areas such as education, public services and community and the media, to name but a few. I previously informed the Assembly that Ministers will be responsible for funding actions relating to the strategies from their own budgets. As the strategies are included as building blocks in the Executive's Programme for Government, I expect ministerial colleagues to ensure that funds are put in place to allow their proper implementation. As I said at the Culture, Arts

and Leisure Committee on 9 October, I will continue to be a strong advocate to ensure that funding for these strategies is forthcoming. There is much expectation in the communities following the public consultations, when people put forward proposals based on evidence from their experience on the ground. I believe that Ministers have a duty to fulfil these commitments.

**Mr D Bradley:** Gabhaim buíochas leis an Aire as ucht a freagra. Is é an cheist atá agam ar an Aire, i bhfianaise an bhuiséid a d'fhógair an tAire Airgeadais inár láthair inniu, cad é mar is féidir a bheith cinnte go mbeidh airgead ann leis an straitéis seo a chur i bhfeidhm? I thank the Minister for her answer. In light of the draft Budget that the Finance Minister revealed today, what hope is there that there will be funding in any Department to implement the strategy?

**Ms Ní Chuilín:** I thank the Member for his question. As the Minister of Finance and Personnel outlined today and previously in other debates, he will, after putting the draft Budget out for consultation in the Assembly, engage in a series of bilateral meetings with Ministers. I do not think that people can shirk their responsibility and use lack of affordability as a reason for not doing it. It is in that vein that I will continue to pursue the full funding of these strategies.

**Ms McCorley:** Gabhaim buíochas leis an Aire as a freagra. An dtig liom fiafraí den Aire cá huair a fhoilseofar an dá straitéis, agus an dtig léi a rá cé acu a chuirfidh a cuid comhghleacaithe sa Choiste Feidhmiúcháin i bhfeidhm iad? When will the two strategies be published? Will there be full implementation of the two strategies by the Minister's Executive colleagues?

**Ms Ní Chuilín:** I thank the Member for her supplementary question. I am sure that she picked up on the primary response that I gave to Dominic Bradley in relation to the strategies for the Irish language and Ulster Scots. I intend to publish the strategies at the end of January 2015. There is a duty placed on the Executive, through the 1998 Act, to adopt strategies in relation to the enhancement and protection of the Irish language and, indeed, Ulster Scots. I intend to make as sure as possible that every aspect of the strategies is adopted, particularly since we went out on a robust consultation. It was a very good consultation in terms of responses. The responses were realistic, and they reflected the work that is going on on the ground. It is important that other Ministers and

Departments factor them into and make them a feature of future Budgets.

**Mr Campbell:** Curry my yogurt can coca coal yer. The Minister has outlined what she is talking about with the Irish language strategy and an Ulster-Scots strategy. Would it not be more inclusive to have a minority languages strategy so that nobody would feel left out?

**Ms Ní Chuilín:** If what you have just done is anything to go by, we do not need a strategy for pure ignorance. Pure ignorance. Your conduct is not befitting a Member of this Chamber, and it does not warrant an answer.

**Mr Cree:** Will the Minister detail her Department's mainstream projects that have an Ulster-Scots, Irish language or other cultural activity that remain unspent at this time and are unlikely to be spent in 2014-15?

**Ms Ní Chuilín:** I am sure that the Member, who is new to the Committee for Culture, Arts and Leisure, will appreciate that the North/South arrangements for work around Ulster Scots and the Irish language have experienced difficulties. There were difficulties for the Irish Government in particular in relation to their contribution to the budget, but I have been led to believe that that has been corrected. That is good, because the work that the Ulster-Scots Agency and Foras na Gaeilge are doing, not just independently but collectively, is very good. That in itself will lead to the third part of your question by building good and better relations across the island, particularly through the conduit of languages. I anticipate not only the money being spent but a demand for an increase in their budgets.

**Mr B McCrea:** Would the Minister care to comment on whether she regrets the loss of Ultach in the past couple of days?

**Ms Ní Chuilín:** I do. I thank the Member for his supplementary question. I heard part of Aodán's contribution on Radio Ulster the other night. It is with regret that he has had to close his doors, and it is with regret that he and a few other groups did not participate fully in the reconfiguration around core funding. I am delighted that his fears around the deficit that it may create for the Protestant, unionist and loyalist community around the Irish language will not be realised. I believe that Linda Ervine, through the East Belfast Mission, is fulfilling that role. It is with regret that Iontaobhas Ultach is now closed.

## Ulster Orchestra

2. **Mrs D Kelly** asked the Minister of Culture, Arts and Leisure what discussions she has had with other Executive colleagues about a rescue plan for the Ulster Orchestra. (AQO 6925/11-15)

**Ms Ní Chuilín:** I thank the Member for her question. The Ulster Orchestra needs to develop a long-term, sustainable approach to address its current financial difficulties. My officials, together with the Arts Council, have been liaising with the orchestra and its management to discuss potential future operating models and alternative funding mechanisms. In addition, I recently met representatives of the orchestra to explore the nature of some of those problems, the problems that it faces and the work it is undertaking to identify possible solutions. Further work will be undertaken by the orchestra over the next few weeks to identify potential options and associated costs for the future.

If the orchestra identifies a new sustainable operating model, I will give it serious consideration, and, subject to receiving assurance that it can be delivered, I will engage with Executive colleagues to assess how we might support it.

**Mrs D Kelly:** I welcome the Minister's comments. She will be aware that many other major cities across these islands have been able to retain their orchestras. Have you explored how those orchestras are supported by their town authorities or central government? What time frame are you working to in relation to a rescue plan?

**Ms Ní Chuilín:** I thank the Member for her question. I have done some research and have been on the computer looking at Glasgow, London, which has a few symphony orchestras, Dublin and Australia. Indeed, my officials, along with the Arts Council, are preparing additional research. From what I have seen, all orchestras across the world are struggling to fully publicly fund themselves. Because of the financial situation over the past few years, orchestras have had great difficulty in getting corporate sponsorship and, when they get it, it is not over a long time. So, sustainability is a problem.

The deadline for the management of the Ulster Orchestra to come up with a rescue package is 15 December. I am sure that the Member will appreciate that it is called the Ulster Orchestra, but, with respect to local government, Belfast

has done a lot of the heavy lifting. I have spoken to the management team, and I think that it is going to talk to other local government bodies, but it knows that, by 15 December, it needs to have some short-term interim funding or the Ulster Orchestra will be in serious difficulties.

**Mr Humphrey:** Can the Minister correct what the questioner asked in relation to the Ulster Orchestra? Will she confirm that it is a regional orchestra that belongs not to Belfast but to Northern Ireland? Can she also confirm that, quite rightly, Belfast's council has supported the Ulster Orchestra? Has she met other councils to try to secure funding and a joined-up approach to secure the future of the Ulster Orchestra for this region? Given her initial reply about the management, how much will her Department put forward if her concerns are addressed?

**Ms Ní Chuilín:** I thank the Member for his supplementary question. Mrs Kelly acknowledged the fact that Belfast has done a lot of the heavy lifting. It is not my job to go round all the councils on behalf of the orchestra to drum up support — pardon the pun — it is the orchestra's job. It has been very sensitive, thankful and grateful for the support it has received from Belfast City Council over the years and has acknowledged some small support that it has received from other councils.

The 15 December date is looming large for the orchestra. The Member will appreciate the fact that, unless there is some long-term sustainability in new proposals brought forward by the orchestra, we could be here in a couple of months having the same discussion. None of us wants that. We want to make sure that the proposals, hopefully, on new models and new ways forward, will be sustainable and robust and will attract additional sources of funding.

**Mr Ó hOisín:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. Gabhaim buíochas leis an Aire as a freagra. How much money has been invested in the Ulster Orchestra by the Department in recent years?

**Ms Ní Chuilín:** I thank the Member for his supplementary question. I stand to be corrected, but, since 2010, approximately £10.9 million has been invested in the Ulster Orchestra. Recently, on top of what the Arts Council put in, DCAL invested just over £48,000. Since 2010, the Arts Council has invested £10,573,490. As well as that, the Ulster Orchestra received over £190,000 from

the lottery fund, notwithstanding the fact that Belfast City Council also put substantial money in. It is substantial money. It is expensive to run orchestras. Those are ballpark figures.

**Mr Nesbitt:** The Minister referred to research benchmarking the Ulster Orchestra against similar orchestras elsewhere. Has she reached an opinion on the balance of performance between formal recitals on a Friday night in the Ulster Hall and initiatives like the paper orchestra and the outreach educational programme? Has the Ulster Orchestra got it right?

**3.00 pm**

**Ms Ní Chuilín:** Just to correct the Member, I did not do research into the Ulster Orchestra to benchmark it against others; I just wanted to find out through my own research what other orchestras were experiencing in respect of financial sustainability.

The paper orchestra is an initiative that came from DCAL in conjunction with the Ulster Orchestra, and it happened in the Shankill and the Colin. If additional investment were to come forward as a rescue package or if there was a continuation of support from DCAL through the Arts Council, those initiatives would be conditional to that funding. Young people who have never experienced an orchestra need to have that opportunity, and they need to be inspired. They have a good conductor with a new approach, and it is regrettable that we are looking at rescue packages. However, if something were brought forward, initiatives that have outreach and the ability to bring what the orchestra has to offer to communities that would never have thought of going to see an orchestra will be right in the centre of what we hope to do in the future.

**Mr McCallister:** The Minister will be aware that she replied to my question for written answer about her involvement in the efficiency reform process. To date, her Department has not delivered any efficiency savings. How does that sit with her call and demand for the orchestra to set out a new programme and efficiencies to make sure that it saves itself, which I hope we all support?

**Ms Ní Chuilín:** Efficiency drives across all Departments are certainly more acute now. However, the Member will be aware that, if the Ulster Orchestra were to receive some short-term funding from whomever, it should be before 15 December. Thereafter, there could be a longer-term support package based on a

new approach, but efficiencies will dictate what that support will be. We live in very stringent economic times, but that is not to say that the Ulster Orchestra, just like any other service, is not entitled to receive support. Certainly, efficiencies will dictate the level of support. Even for the orchestra, efficiencies will dictate what new models it will bring forward to make it more sustainable in the future.

## Commonwealth Fly Fishing Championships

3. **Ms P Bradley** asked the Minister of Culture, Arts and Leisure to outline the assistance her Department provided to competitors representing Northern Ireland in the Commonwealth Fly Fishing Championships. (AQO 6926/11-15)

**Ms Ní Chuilín:** The 2014 Commonwealth Fly Fishing Championships were held in the south-west of England in June. I congratulate the local team entered by the Ulster Provincial Council of the Trout Anglers Federation of Ireland (TAFI) on winning the bronze medal and Kenneth Ferguson on winning the individual silver medal.

DCAL did not receive a specific request for assistance in relation to the 2014 championships. DCAL has been approached by various angling associations in the past for support to participate in similar events. I met representatives of TAFI and indicated that I would support a future championship being hosted here in the North.

I am pleased to advise that the National Coarse Fishing Federation of Ireland, in partnership with Craigavon Borough Council and DCAL, has been successful in its bid to host the 2015 World Lure Championships at Craigavon Park Lakes.

**Ms P Bradley:** I thank the Minister for her reply. I congratulate the members of the Northern Ireland team; I know that some of them are from my home borough of Newtownabbey. The Minister is also aware that fly fishing is truly an inclusive sport, no matter what age you are, what culture you come from or whether you are an urban or a city dweller. Will the Minister look at how funding is allocated for that type of sport? As I said, it is very inclusive. There are no barriers when it comes to fly fishing; it is there for everybody.

**Ms Ní Chuilín:** I thank the Member for her question and her supplementary question. She has rightly pointed out what I was going to say:

fly fishing and angling across the board is a sport that, fortunately in recent years, has received a bit more prominence. In our constituency, there are a few angling projects, particularly for children and young people who would never have had any access, other than through family members, scouts or local clubs. They can now go to our lakes and waterways and even to our local parks for fishing. I am looking at the future of angling. Sport NI conducted a review, and I look forward to seeing how we can roll that out in future. It is important, not just for young fellas but for young girls. As we can see from the 2014-15 bid, young girls are now involved in angling, and I am sure that the Member will agree that that is a good trend and a good way to go forward in future.

**Mr McMullan:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. I thank the Minister for her presentation. Can she outline to the House what international angling competitions and events DCAL has supported?

**Ms Ní Chuilín:** In 2013, DCAL supported the World Youth Fly Fishing Championship and the World Lure Fishing for Predators from Boats Championship. The World Police and Fire Games had game angling competitions as well, and the Department was involved in the Erne Coarse Classic and the Erne Pike Classic. A number of those competitions involved DCAL working in partnership with the IFI and Loughs Agency, certainly in the marketing and promotion of those events. I am delighted to say that that experience has actually helped us to secure the bid for next year for the World Lure Championships in Craigavon.

## Tourism Events Fund

4. **Mr Dickson** asked the Minister of Culture, Arts and Leisure for her assessment of the cultural impact of the decision by Northern Ireland Tourist Board to withdraw funding from the tourism events fund. (AQO 6927/11-15)

**Ms Ní Chuilín:** I thank the Member for his question. The fund in question has been a key source of support for some of our highest-profile festivals and events, and I recognise that many of those will be significantly impacted by its potential withdrawal. Events such as Féile an Phobail, the North West 200, the Milk Cup and Foyle Cup and the Walled City Tattoo, just to mention a few, will potentially be affected by the decision of the Tourist Board. Those events are about much more than simply showcasing what we have to offer here in terms of money; they also help to break down barriers within our

local communities and develop mutual respect amongst our increasingly diverse population.

While I recognise the value that those larger events bring in economic and social benefits, I think it is important that the whole impact of small community events also has to be acknowledged. I understand that those events remain a priority for the Tourist Board and that it will endeavour to source budgets for those events in future years.

**Mr Dickson:** Thank you, Minister, for your answer so far. Can you explain to the House what actions you intend to take to ensure that that range of significant cultural and sporting activities that have been taking place will not be lost to the economy and to Northern Ireland as a result of changes in the budget?

**Ms Ní Chuilín:** The Member might be surprised, but I learned about the withdrawal of the funding through the media. Again, it is still speculation as to which events will be supported and which will not. I am trying to find out exactly what the Tourist Board will support, but, as I said to other Members who have raised it with me — I want to be totally clear on this — the Tourist Board made a decision not to bring forward events funding. That does not mean to say that the responsibility for that gets passed to DCAL. It is not my responsibility to be the first source of funding for those events. I am certainly loath, because one department has made a decision, to pick the ball up and run. That is not happening.

**Mr Humphrey:** I thank the Minister for her answers. In relation to the Milk Cup, which was mentioned as part of the question, can I ask the Minister why, after the evidence given by the Milk Cup organisers only a few weeks ago at the CAL Committee, her Department did not give any funding to the Milk Cup? It is internationally renowned, attracting thousands of spectators each year, with hundreds of players coming from across the world, and DCAL was unable to sponsor that event. Why is that?

**Ms Ní Chuilín:** I am confused about why the Member thinks I have never invested any money in the Milk Cup and Foyle Cup: I have. In the October monitoring round, for the Milk Cup and the Foyle Cup — the Milk Cup for this year — we were advised by the organisers that they could not spend the money before the end of this financial year. Obviously, that information has not been fed back to the Member, in fairness to him.

**Mr Milne:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. Gabhaim buíochas leis an Aire as a freagraí go dtí seo. Does the Minister agree that it is vital that sports and cultural events are supported, as they are vital to the local economy and a key factor in attracting tourism?

**Ms Ní Chuilín:** Yes, I agree. It is vital that that cultural package for events or the events support for a cultural package in sports and even some of the bigger events is supported as best as possible in future years. The Member will know better than I, coming from a rural background, that events, particularly in small rural areas or communities, are sometimes the only opportunity for regenerating some of the local economy. Local and small businesses have come to rely on those benefits on an annual basis. It is with regret that I say that they are now in the situation of wondering what will happen this year. It is important that the Tourist Board has indicated that, where possible, it will try to focus on those events as a priority. However, like many others, those groups are still waiting for funding to become available.

**Mr Dallat:** I do not intend to chastise the Minister for the gross errors of the Northern Ireland Tourist Board, but will she accept that she now has a responsibility to give leadership and guidance to the organisers of events such as the Milk Cup, the North West 200, the Foyle Cup and so on, who have clearly been grossly let down by the Tourist Board, which apparently does not see beyond the Titanic centre?

**Ms Ní Chuilín:** I am happy to forward a copy of the Hansard report of these questions to the ETI Minister so that she can forward it to the Tourist Board. I know that some of our officials have engaged with some of the events' organisers, and I am sure that the Member will not be surprised that they have come to DCAL seeking support and assistance. The Member will also be aware that, for reasons that will become known in the future, what small support and assistance we gave to the events was transferred from DCAL in 2010. It is regrettable that these people are now in the situation of not knowing whether they can plan events at all. It is important, particularly for areas like the north-west, that such events have more security and sustainability in the future.

### **Anglers: Licensing Regime**

5. **Mr McAleer** asked the Minister of Culture, Arts and Leisure how she intends to simplify the licensing regime for anglers. (AQO 6928/11-15)

**Ms Ní Chuilín:** I thank the Member for his question. The range of angling licences in the North reflects the different types of fishing available. They offer choice and value for money to anglers, particularly concessionary licences for senior citizens, those with disabilities and, indeed, visiting groups. I recognise, however, that there is scope to simplify the current regime, and we are making good progress on that.

My officials have been working with NI Direct in identifying an e-commerce solution to simplify the existing licensing system. In an initial step, the layout of these licences has been changed, which has reduced the number of different licence books held by distributors. We have also centralised the administration of licences and permits to my Department's Portadown office.

In April 2014, the NI Direct-led project was prioritised as a Programme for Government commitment to improve citizen services. A project board has been established to advance that work, and NI Direct has this week commenced an exercise to scope the business and IT requirements for developing e-commerce solutions for a new licensing and permit system.

**Mr McAleer:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. Will the Minister update us on the development of an all-Ireland e-licensing system?

**Ms Ní Chuilín:** The Special European Union Programmes Body (SEUPB) commissioned a scoping study in conjunction with the Loughs Agency, DCAL and inland fisheries with the purpose of exploring the possibility of implementing e-licensing projects to meet needs. A future product to arise from this work could be the provision of all-Ireland e-licensing for salmon and sea trout angling and other angling. The study makes recommendations for an all-Ireland e-licensing system online marketing platform that will increase the efficiency of current sales and management. The report makes a series of recommendations and cost projections to advance the project. The business case is being commissioned and will examine those issues in detail and take into account the opportunity to integrate the inland fisheries group's current NI Direct project, with the purpose of achieving an all-Ireland solution.

**Mr Kinahan:** It is good to hear that the Minister supports anglers so much. When it comes to councils, has she had discussions with that

Minister and that Department about the future use of reservoirs that have been made redundant and been sold, given that they, too, affect anglers?

**Ms Ní Chuilín:** Not just with councils but with your colleague the Minister for Regional Development. I hope to have discussions with him in the future. I know that officials have been working across the board in looking at some of the reservoirs that NI Water has found to be surplus to requirements. We are certainly looking at the management arrangements for those. It is about affordability, but, particularly when angling has been and is currently available on those reservoirs, there is an expectation that that service and that access will be continued, regardless of whether they are surplus to requirements for NI Water. We are considering what, if any, arrangements we can make for the future, but I am very supportive, as hopefully other Ministers will be, because there will be a cost implication. Rather than get on with the work, I am waiting to find out what the cost will be.

**3.15 pm**

**Mr Lyttle:** Does the Minister have any update on the regulation of inshore sea angling, which is similar to freshwater angling?

**Ms Ní Chuilín:** I do not have any responsibility for sea angling, although the fish do not know that. However, the Member will be aware that we brought forward a consultation on salmon and trout conservation in inland waterways and that there is now mandatory catch-and-release. Through working with colleagues in DARD and the Loughs Agency through the Agri-Food and Biosciences Institute (AFBI), we are looking at inland waterways and sea fishing, but I am afraid that the Member's question will be have to be asked of the Minister of Agriculture and Rural Development.

**Mr Principal Deputy Speaker:** That ends the period for listed questions. We now move on to topical questions.

### **Casement Park: Legal Challenge**

T1. **Mr Weir** asked the Minister of Culture, Arts and Leisure for an update on the redevelopment of Casement Park in light of the legal challenge from residents. (AQT 1671/11-15)

**Ms Ní Chuilín:** Given his legal background, the Member should be aware that the fact that the

challenge is still within the courts means that it is not appropriate for me to comment.

**Mr Weir:** Notwithstanding the legal challenge, does the Department have a target for the start date of actual works at Casement Park?

**Ms Ní Chuilín:** I anticipate a response from the judicial review hearing some time this month, if that is what the Member is trying to extract from me. That will hopefully be in the next few weeks. If that decision is favourable to the Department, work will commence almost immediately.

**Mr Principal Deputy Speaker:** I call Mr Weir for a supplementary.

**Mr Weir:** I think that you will find that I have already asked it.

**Mr Principal Deputy Speaker:** I beg your pardon. I call Michaela Boyle.

### **Creative Industries: Strabane**

T2. **Ms Boyle** asked the Minister of Culture, Arts and Leisure what plans she has to ensure that Strabane is included in the creative industries, given that she will be aware from previous questions from Ms Boyle to her Department of Ms Boyle's particular interest in the creative industries. (AQT 1672/11-15)

**Ms Ní Chuilín:** I thank the Member for her question and for her ongoing interest in the creative industries. I am aware that she, along with other representatives of the area, met DCAL officials to discuss how such services can be extended as part of the legacy of the City of Culture. I assume that those discussions will be ongoing with her, other representatives and community representatives. The Member should be assured that Strabane and other areas surrounding the city of Derry will be included in any future plans.

**Mr Boylan:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. I thank the Minister for her answer. Given the demand for creative learning centre support, can the Minister advise whether any community planning by her north-west team will factor in specific outreach of areas of funding to Strabane and surrounding areas?

**Ms Ní Chuilín:** I am happy to give the Member an assurance that Strabane and other areas will be factored into that. If you look at the work of

the Nerve Centre in Derry, you will see the plans that it has to bring that work out to surrounding areas. The areas in question will be part of any consultation on what that service should look like. It is important that elected representatives work closely with my Department to bring that forward, because a lot of people have been looking very thankfully to the city of Derry, and they want some of that in their community. I will ensure that DCAL will be consistent in its approach to ensuring that services in the city are spread throughout the area.

**Mr Principal Deputy Speaker:** I will not call the Member who is listed for question 3 for reasons that have already been outlined to the House. I call Mr Gordon Dunne.

### **Hamas Flag: Cliftonville Match**

T4. **Mr Dunne** asked the Minister of Culture, Arts and Leisure what her views are on the display of an illegal Hamas flag during a Cliftonville football match at Windsor Park on Saturday 18 October, when, as Mr Dunne understands it, the flag was displayed for over an hour. (AQT 1674/11-15)

**Ms Ní Chuilín:** The Member will know that I am a Cliftonville supporter, but I was not at the match in question. I have absolutely no information about the displaying of that flag or any other flag for over one hour at that match. I imagine that it is a position that the IFA and UEFA will take up with the club.

**Mr Dunne:** Will the Minister give us an assurance today that she will be in contact with Cliftonville Football Club about the issue and give us a further assurance that this will not reoccur?

**Ms Ní Chuilín:** The Member is a bit naive to think that I have any control over Cliftonville or any other soccer club.

**Mr Dunne:** You are a supporter.

**Ms Ní Chuilín:** I am a supporter. Like the Member, who is a supporter of his local clubs, I condemn any behaviour that is not in keeping with the guiding principles of the football club. I will happily forward his comments through my Department to the IFA and — pardon the pun — pass the ball to it.

### **UK City of Culture: Legacy**

T5. **Mrs Dobson** asked the Minister of Culture, Arts and Leisure to detail the make-up of the capital bid for the UK City of Culture legacy. (AQT 1675/11-15)

**Ms Ní Chuilín:** I am happy to write to the Member on the details of that. Certainly, it is in keeping with the announcement that I made in the city last November. I did not receive all the funding that I would have hoped for. In every monitoring round, I have consistently made a bid to fulfil the legacy of the City of Culture. I was very lucky to receive some capital money in October. I will continue that trend throughout the monitoring rounds.

**Mrs Dobson:** Is the Minister satisfied that this budget will be spent during the year? What are her plans for 2015-16 for the legacy?

**Ms Ní Chuilín:** I have no doubt that the money will be spent because, as the Member will be aware through her work in her constituency, when groups are waiting for funding to become available, not only do they have their projects ready and good to go but they have the money spent in their heads before they get it. I have not yet met a group in the city or the surrounding areas that is sitting swinging its legs. They are all busy getting themselves ready. The money will be spent. Certainly, for 2015-16 and even through the duration of the next mandate, I anticipate that the legacy of the City of Culture and the legacy that we need to fulfil in the north-west area will continue from one mandate to another.

### **Football Clubs: Funding**

T6. **Mr G Robinson** asked the Minister of Culture, Arts and Leisure whether any finance will be made available to upgrade Irish league football clubs, such as Coleraine. (AQT 1676/11-15)

**Ms Ní Chuilín:** What has become known as the subregional programme for soccer will become available in the next CSR period. I will soon make a bid to my Executive colleague the Minister of Finance and Personnel for those funds, which are substantial, for the IFA for new facilities. Notwithstanding the fact that the Member mentioned Coleraine in particular and despite some speculation in the media, no decisions have been made on any areas where that funding will be invested.

**Mr G Robinson:** Will that include B division clubs such as Limavady United? *[Laughter.]*

**Ms Ní Chuilín:** It is a matter for the IFA to present a facilities management strategy. Certainly, it is for me to make the decision on what investment the strategy will receive, notwithstanding the fact that the Member has a right to ensure that smaller clubs are not forgotten in any potential investment. I am sure that he will lobby, along with his colleagues from that area, to ensure that his constituency is not ignored when it comes to future investment.

**Mr Principal Deputy Speaker:** I am sure that any centre forward would be pleased with that opportunism.

Mr Ross Hussey is not in his place, so I call Mr Trevor Lunn.

### **Fish Kills: DCAL Involvement**

T8. **Mr Lunn** asked the Minister of Culture, Arts and Leisure to outline the extent of her Department's involvement in the aftermath of all-too-frequent fish kills, including the one at Glenavy and, more recently, the kill in the Sixmilewater. (AQT 1678/11-15)

**Ms Ní Chuilín:** I join the Member in saying that these fish kills are very worrying. There has been a lot of speculation about their cause. One potential cause is pollution, another is the effect of global warming on the environment and a third is the biosecurity of lakes and waterways. The Member gave the example of the Sixmilewater. Although that is a private waterway, it is regrettable. Many local anglers have privately stocked these lakes from their own pocket. My Department is working with the Department of the Environment and AFBI to ascertain the causes of the fish kills. We need to learn the lessons and identify, if possible, the sources of the fish kills and try to eradicate them.

**Mr Lunn:** I thank the Minister for her answer so far. However, these fish kills have been going on since time immemorial. One expects a succession of them at this time of year because of the run-off from slurry tanks into rivers. It seems to me that, when you try to sort out what is going on and who is to blame, at least four Departments are involved — your Department, DETI, DARD and the Department of the Environment — but nobody ever seems to get the blame. Will the Minister commit to working with the other Departments to put together something that might produce a more cohesive approach to the problem and a better outcome?

**Ms Ní Chuilín:** The Member is right in saying that several Departments are involved, but none should be blamed for the pollution of the waterways. We are left to pick up the pieces, frankly. If the cause is pollution, we should identify the source and prosecute, applying the maximum fine to ensure that there is a deterrent. I know of one case that was in the media, but there have been other cases of several fines being levied on one person. These people seem to pay their fine and get on with it. The environment, including the fish and the local flowers and fauna, has been experiencing pollution not just for the here and now but for generations to come. It is incumbent on us all to ensure that we tackle this problem as best we can. I give the Member a commitment that I will try to find the source of this latest pollution and go for prosecution with the maximum penalties.

### **Arts: Funding**

T9. **Mr Attwood** asked the Minister of Culture, Arts and Leisure whether she can be definitive, given today's Budget announcement, about when she will be able to tell the Arts Council and all the other funding bodies about their budget line for next year, especially as he had the great joy of attending the last night of the Belfast Festival in the form of 'The Gloaming' at the weekend and Anna Lo attended an event that saw the recreation of the great tradition of Irish traditional music in an image of something different from the past. (AQT 1679/11-15)

**Ms Ní Chuilín:** I thank the Member for his question, and I congratulate the Ulster Bank Festival at Queen's and other festivals for the wonderful gift that they give, particularly the activities in the city of Belfast. I had the pleasure of attending one performance — the internationally renowned show 'Guide Gods', which was shown on television.

I have meetings scheduled for within the next fortnight on the budget lines. My officials are meeting arm's-length bodies this week to outline the percentages of the budget that they will have. It is important that we get those indications sooner rather than later so that planning can occur.

**Mr Attwood:** I welcome that answer, as far as it went. I welcome the fact that there will be meetings, but when will you be able to say what the Arts Council and all the other funding bodies will have in hard cash as their budget line or baseline for next year? Will it be in a month? Will it be in two months? I note, of

course, that it is all subject to the approval of the Budget by the House in March.

**Ms Ní Chuilín:** The Member is being a bit silly. He will know, from his experience as Minister, that the indicative figures are already there. The ALBs have them, so they have an indicative spend.

We will be meeting again this week, so they will know exactly what they have, particularly from today. The ALBs will work out the figures for what they have, as the Member put it, in cold cash.

3.30 pm

### **Ballynure Angling Club: DCAL Support**

T10. **Mrs Cameron** asked the Minister of Culture, Arts and Leisure what support her Department will provide to Ballynure Angling Club following last week's fish kill. (AQT 1680/11-15)

**Mrs Cameron:** I apologise if my question is similar to Mr Lunn's. I did not quite pick up what he said about the fish kill in the Sixmilewater.

**Ms Ní Chuilín:** We are working with the angling clubs and, as I mentioned to Mr Lunn, other Departments to try to identify the causes of the fish kill and to try to look at ways in which we can eradicate some of the difficulties. The Sixmilewater, as the Member knows, is a private estate and club. Certainly, the expense of restocking lakes, rivers and waterways is more acutely felt when it comes out of members' pockets. We need to identify the causes. If the cause is pollution, we need to identify the people responsible for that and prosecute them.

**Mr McCarthy:** On a point of order —

**Mr Principal Deputy Speaker:** I will take points of order after the conclusion of Question Time.

## Question for Urgent Oral Answer

### Health, Social Services and Public Safety

#### Multiple Sclerosis Respite Unit: Dalriada Hospital, Ballycastle

**Mr Principal Deputy Speaker:** I remind Members that, if they wish to ask a supplementary question, they should rise continually in their place. The Member who tabled the question will be called automatically to ask a supplementary.

**Mr McKay** asked the Minister of Health, Social Services and Public Safety what provision will be made for multiple sclerosis (MS) respite when services at Dalriada Hospital, Ballycastle are closed.

**Mr Wells (The Minister of Health, Social Services and Public Safety):** In my statement of 30 October 2014, I said that my priorities are to ensure that services provided by Health and Social Care (HSC) are safe and effective, and to ensure that my Department achieves financial balance, which is required of all Ministers. To achieve those aims, trusts have provided a range of contingency proposals. Each trust has provided assurances that its services will remain safe and effective.

As part of its contingency plans, the Northern Trust has proposed the temporary closure of respite beds in the Dalriada Hospital, Ballycastle for sufferers of multiple sclerosis. I regret that the trust has had to take that action. As a consequence of the Budget pressures, it would simply not be possible to maintain the current levels of service provision in the absence of the entire required funding of £130 million right across HSC. However, I assure Mr McKay that the trust will endeavour to minimise the impact on front line patient care. Key workers are therefore arranging to meet service users and families over the coming days to ascertain their specific needs and identify the providers that would provide the best alternative to Dalriada Hospital. That will include the consideration of individual and group bed-based provision. Where service users would prefer to have direct payments made so that they can make their own arrangements, that will also be an option.

Respite services to MS patients will still be provided, and everyone who requires respite

will receive it. The trust will be working with everyone involved to ensure that service users' assessed needs are central to the process moving forward. The trust has also assured me that respite care for anyone who has been booked in for November will be honoured and that there will be no change to the booking. My Department will monitor the situation closely over the coming months to ensure that the service provided to MS sufferers in the Northern Trust continues to meet the needs of the local population.

**Mr McKay:** Go raibh maith agat, a Phríomh-LeasCheann Comhairle. I find that answer utterly pathetic. MS patients, their families and the patients of the entire Dalriada Hospital are devastated at having been given only four weeks' notice to move out before the hospital closes. Providing many of those MS patients with the option of going into a care home is absolutely pathetic because it does not meet their needs.

The Minister and the trust have outlined that it is a temporary closure. The people in Ballycastle and north Antrim are not fools. This is not a temporary closure: it is the closure of the Dalriada Hospital. As far as all the patients are concerned, they are being tossed out into the street.

I went to a protest on Friday night outside the hospital, and it was powerful and very moving, Minister. I find it utterly disappointing that you are standing four-square behind the trust in its long-running agenda to run down the Dalriada Hospital and run down referrals to it. Stop hiding behind the Northern Trust, and stop hiding behind the trusts and all their decisions that affect our community.

**Mr Principal Deputy Speaker:** I need a question.

**Mr McKay:** Will you postpone the closure of the Dalriada? Will you do the decent thing and meet the patients concerned, the MS Society and the people in Ballycastle about this devastating news that you and the trust have thrust upon us?

**Mr Wells:** The answer to the last question is, "Yes". This morning, I met the MP for the area, Ian Paisley Jnr, Mr Mervyn Story, an MLA for North Antrim, Dr Mary McLister and Dr Martin O'Kane, who made very articulate points about the future of the Dalriada Hospital. I have undertaken to interrogate the Northern Trust on the points raised with me this morning. They put those points much more politely than the

Member just did, but apart from that they were very similar.

**Mr McKay:** *[Interruption.]*

**Mr Principal Deputy Speaker:** Order.

**Mr Wells:** Certainly, very valid concerns have been raised about the whole issue, and I intend to make absolutely certain that the Northern Trust, on this occasion, has made the right decision.

I also need to emphasise the fact that I have to balance the books by the end of this financial year. We are £70 million short of doing that, and therefore each of the five trusts, not just the Northern Trust, has had to make very difficult decisions. I have received representations from Bangor, Whiteabbey, Armagh and from throughout Northern Ireland on similar difficult decisions, but this is where we find ourselves as far as budgets are concerned.

**Mr Frew:** I ask the Minister to assure the House that he will scrutinise the decision by the trust vigorously to satisfy himself that it is the right one. Even though the trusts say that these decisions are being made to save money, the patients in this case — not only MS sufferers but those who are in the hospital for respite care and rehabilitation — will have to go somewhere else. Will he assure the House that he will scrutinise the decision and make sure that, in the long run, when those people have to go somewhere else, such as A&E and other care homes, that that will not burden the trust and cost more?

**Mr Wells:** The temporary closure of respite beds and intermediate care beds in the Dalriada Hospital will save £0.6 million in this financial year. The difficulty I have with this decision and many others is that, if by chance I listen to the comments made by the Members for Northern Antrim and reverse the decision, I will have to ask the Northern Trust to come up with another saving of £0.6 million. No one from North Antrim in the Assembly has given me any indication of where they would like that cut to be made.

**Mr Frew:** Middle management.

**Mr Wells:** The honourable Member for North Antrim makes a very valid point about middle management. The problem is that over 90% of the cost of management comes from staff costs. Even if I decide to save that money in staffing immediately, it would mean redundancies and you would not save any

money for three years. That is the difficulty we have: 63% of our budget in Health and Social Care comprises wages, pensions and National Insurance, and we have no flexibility whatsoever to save money there. So it sounds like a good argument until you analyse it.

Mr Frew has also made some very good points to me about this decision. Mr Storey, Mr Paisley and Mr Frew have been very articulate in putting their views across on this issue. I will make absolutely certain that this decision stacks up, because new information has been made available to me by the GPs, and I have to interrogate the Northern Trust on that.

**Mr McKinney:** Perhaps the Minister could outline in some detail how this plan and indeed others that he has outlined here this afternoon are in any way consistent with Transforming Your Care. Does this decision and the others not represent a further series of nails in the coffin of Transforming Your Care, which is underfunded and failing?

**Mr Wells:** The honourable Member for South Belfast would like to be the undertaker for Transforming Your Care: he takes every opportunity to knock that fundamental review of healthcare provision.

The reality is that, if we were starting with a blank sheet of paper, we would not make these decisions because we are in a firefighting situation. Seven months of the financial year have gone, and we have five months in which to save £7 million. *[Interruption.]* The decisions that I have to take are not long term and strategic; they are firefighting decisions to try to get the books to balance. The one option that I do not have this year is to over-run or overspend; it has been made very clear to me that that cannot happen.

I agree with the Member that such decisions make it more difficult to implement Transforming Your Care, but we have very little room in which to manoeuvre in making cutbacks when we are seven months into the financial year.

**Mr Swann:** I thank the Minister for his answers. I also commend him for saying that he thought that the MP's contributions were articulate in his meeting today. I did not hear those, but I did see the comments in the press where the MP for the area said that this plan was a total disgrace, and I agreed with him.

When the Minister looks at the balance of the privatisation of MS respite in the Northern Trust

area in the long term, which is basically what this is when we move people out of hospitals into private homes, will that balance the books? This closure is temporary; over how long is he going to do this calculation? How long will he take before he reverses the temporary nature of this closure?

**Mr Wells:** I welcomed the extra £60 million that we achieved in the monitoring round and the £20 million in June, but I do not think that I am having in making the books balance. The trust faced an almost impossible situation, and it had to go forward with a policy that was the least-worst option in reducing its outgoings from now to the end of March. Therefore, if we had not made a move, we were destined to over-run.

As far as privatisation is concerned, I have no difficulty with private provision; it is less than 2% of the entire Health and Social Care budget. I personally prefer the provision that is best for the patient or the client; I am not hung up on where that is provided. However, this is not part of any ongoing privatisation policy. This is simply trying to find out where we can find £7 million in the Northern Trust in five months, nothing more, nothing less, and in a way that does not affect front line acute care. This is what the trust has said to me, and I have to respect its judgement because it is at the coalface. Am I going to question trusts on these proposals? Absolutely.

**Mr McMullan:** To close the MS centre in Ballycastle is to close the only regional MS centre that we have in the Six Counties. It is not that long ago that I was contacting the Minister's predecessor about another sustained attack on the MS centre in Ballycastle when its respite hours were cut down. This has been a sustained attack to get rid of the MS centre that has been going on for years.

The Minister says that he has to make a saving of £0.6 million in this Budget. As he said himself, this is a temporary arrangement and we have to save £0.6 million. The majority of that is in staff costs, but, if you are going to move the staff, you still have to pay them, and that payment is still there in the Northern Trust. You are not saving that money by moving the staff if it is only temporary. It does not make sense in a financial set-up to do that. Moving young people with MS —

**Mr Principal Deputy Speaker:** I ask the Member to come to his question, please.

**Mr McMullan:** — into private sector nursing homes is not the way to go. The MS authorities will tell you that. I ask the Minister to reverse this decision on those grounds and to listen to the public.

**Mr Wells:** The Member for East Antrim is slightly mistaken. It has been termed the regional centre, but 80% of the patients who go there are from the Northern Trust, with the remainder coming from the Western Trust and only two from Belfast. The South Eastern Trust and the Southern Trust do not provide any patients whatsoever to it. Technically, while it is a centre that provides for a wide part of Northern Ireland, it is not an official regional centre.

I can only go by the professional judgement of those who have been at the coalface in the Northern Trust for many years. They tell me that they can save £600,000 through this particular change in service provision. *[Interruption.]* I can assure you that that will happen, because they will not have the £600,000 to spend; it will be taken from the budget. Therefore, on that basis, I have to accept that what they are telling me is true.

**Mr McMullan:** How can they do that on a temporary basis?

3.45 pm

**Mr Principal Deputy Speaker:** Order.

**Mr Wells:** The staff will be moved elsewhere, but, of course, the costs associated with running the service will cease: the heat, the light, the electricity etc. That will stop for the next five months, and then the decision will be reviewed. I can only go on the information that is given to me by those who should know their facts.

**Mrs Dobson:** The Minister will be aware that we discussed this vital issue at our meeting first thing this morning. I am aware from my constituents of the increase in MS sufferers and their absolute anger at this decision. Minister, what impact will the additional budget oversight by the head of the Civil Service have on your Department? Was this particular move subject to additional oversight or accountability?

**Mr Wells:** As the Member knows, we have experienced a 6% increase in demand for health service provision over this last four years, and a 2% increase in income. Therefore, we should not be surprised that we are in this very difficult situation. Something

had to give, and we are at that point. Demand is exceeding resources by a very considerable margin. This was not forced upon me other than for one simple reason: if I did not take action now, we were heading towards a very significant overspend on the budget for 2014-15. I had to take action, and the later we left the decision, the more difficult it was going to become.

I am not unique within this Assembly; other Ministers are facing exactly the same pressures. Indeed, in the rest of the United Kingdom, we are told, they need £8 billion to balance the books on health. Well, the Barnett consequential of £8 billion, as the honourable Member knows, is £240 million. If I had £240 million today from the Finance Department, I would be absolutely delighted and could deliver all the services I have promised. This is not unique to my situation. It is UK-wide and, indeed, it affects the Irish Republic as well.

**Ms Sugden:** I think the decision is regrettable, to say the least, and it has created a significant shortfall in care for people suffering from multiple sclerosis. I am concerned about the shock of staff and patients at how this information was received. Will the Minister detail his understanding of when and how this information was given to the relevant people?

**Mr Wells:** My understanding is that in most trusts — I do not know specifically about the Northern Trust — MLAs and MPs were called together for a briefing prior to the decision. Certainly I know that that happened in the South Eastern Trust. Then, there was a written statement, which I issued, providing details of the decision, and there was also a media briefing by the chief executive of the Health and Social Care Board. These decisions came about very suddenly, because we did not know where we stood until the October monitoring round was concluded, where we got the extra £60 million. I say to Mrs Sugden that, if we had not got that extra £60 million, we would be having a very different conversation indeed and the cuts would be much more severe.

The trusts were under considerable pressure to act quickly, and I hope that we have tried to be as open and transparent as we can be. My door is open. If she has concerns about this, she can come and see me. Other representatives have asked to do so, and I will speak to them and try to explain the decision. Also if the honourable Member for Londonderry East has an alternative way of saving £600,000 in the Northern Trust, please let me know.

## Assembly Business

### Extension of Sitting

*Resolved:*

*That, in accordance with Standing Order 10(3A), the sitting on Monday 3 November 2014 be extended to no later than 9.00 pm. — [Mr Swann.]*

### Point of Order

**Mr Maskey:** On a point of order, Mr Principal Deputy Speaker. A Phríomh-LeasCheann Comhairle, I apologise to the House and to the Agriculture Minister for not being in my place when I was called for a question for oral answer this afternoon.

**Mr Principal Deputy Speaker:** Thank you for coming in personally to make that apology. It is a matter of regret when Members, having taken the trouble to submit questions, find for one reason or another that they cannot attend. I do appreciate the fact that you came in this afternoon personally to apologise.

**Mr McCarthy:** On a point of order, Mr Principal Deputy Speaker. I ask you to rule on why the sports Minister did not find the time, given that she had three quarters of an hour, to congratulate the Portaferry hurlers on winning the Ulster senior championship yesterday for the first time in their history. *[Laughter.]* The first time in their history.

**Mr Principal Deputy Speaker:** I am glad to see that Mr Robinson is not the only opportunist in the House. However, you know as well as anybody else that that is not a point of order.

## Ministerial Statement

### Coleraine to Londonderry Rail Track: Phase 2 Project

**Mr Principal Deputy Speaker:** The Minister for Regional Development wishes to make a statement.

**Mr Kennedy (The Minister for Regional Development):** Thank you, Mr Principal Deputy Speaker. With your permission, I wish to make a statement on the Londonderry to Coleraine rail track, specifically phase 2 of the project. I set out in a previous statement on 10 October 2011 my continuing support for the key Programme for Government commitment to improve the rail link between the two main cities in Northern Ireland. Phase 2 is one part of that.

Members will recall that this key project is being taken forward in three phases. Phase 1 involved the relaying of the end sections of the rail line at Coleraine and Londonderry, completing essential bridge works in those locations. That was completed in March 2013 within budget and ahead of time. That ensured that, having addressed the immediate safety concerns, Translink continued to run services in and out of Londonderry every week. Phase 2 involves the completion of resignalling works and the construction of a new passing loop. Progress on that phase is the key focus of the statement. The passing loop creates the infrastructure for a more frequent hourly service. Phase 3 involves a full relay of the middle sections of the track between Coleraine and Londonderry and the potential introduction of a half-hourly train service.

There are always risks attached to major capital projects, including procurement risks. I referred to that previously, in my statement in 2011. Whereas phase 1 has been delivered smoothly, on time and within budget, that has not been the case with phase 2. In September 2013, I explained in response to a question for oral answer that Translink had encountered difficulties in connection with the procurement on phase 2. Translink took the decision last summer to abandon the planned combined design-and-build procurement and to start again. That meant that the project would be delayed for around one year. At that time, I made clear my disappointment with Translink, specifically at the way that the decision was communicated and its impact upon the timetable for the project. Therefore, I mandated Translink to make the delivery of the project an absolute priority going forward. On top of that,

Translink took the procurement forward on the basis of a separated design-and-build approach for the signalling works.

However, in the light of this detailed design work, it has become clear that the projected cost of between £20 million and £22 million for phase 2, prepared by Translink in September 2011, was a gross underestimate. The detailed design work now suggests that overall costs could be of the order of £40 million. Translink made my Department aware of that development earlier this summer. Given the gravity of the issue, I immediately commissioned an external review of the project management and the updated cost estimate. The review was in the form of a project assessment review (PAR) commissioned through the Major Projects Authority of the Cabinet Office, which is a process normally reserved for projects seen as central to the UK economy, such as high-speed rail.

The review took place in mid-September, and a final report was presented to me at the end of September. Because the report deals with commercially sensitive information, I do not intend to make it available at this stage. The key conclusions are that the original cost projection was a high-level estimate not backed up by any detailed planning or design work, which Translink did not make clear at the time; that the original projection was underestimated at least partly due to failure to build in contingency at an appropriate level for a complex signalling project of this kind; and that relying on a single source of cost estimation, even if it is independent and specialist, in the original appraisal and currently, represents a potential vulnerability.

That remains an issue, and the review recommends that a further review of the latest cost estimate be undertaken.

Other key conclusions are that a figure of £40 million, including an appropriate level of contingency is more realistic for the overall project; that, although this is a significant project in Northern Ireland terms, it is relatively small in national terms and thus may not be seen as particularly attractive by suppliers; and that, based on the information provided to the review team, the Translink decision not to proceed with the single bidder last year was justified.

The review makes a number of recommendations on how to take the project forward, including an immediate engagement with the supplier market to generate interest; a further check on the cost estimate to inform a

pre-tender estimate; applying a higher level of contingency to a cost estimate for an updated economic appraisal using guidance in use in the Department for Transport; and reviewing the content of the contract for the signalling element of the project to ensure that it is clear that contractor payments have an upper limit.

I have accepted the project assessment review and its recommendations. My officials have engaged with Translink to draw up an implementation action plan. Progress will be subject to a further external review in December before a decision is made to enter into a contract. One of the key review recommendations is a lessons-learned plan, to which I attach particular importance. I expect the Translink board to address that urgently and for the new group chief executive to grasp the issue. I will not tolerate anything like this happening again. I will also commission a review of how my Department assesses and reviews all major capital projects, not just those in Translink, and review reporting arrangements to me on particularly important projects.

The findings of the report disappoint me. Translink continued to plan using figures that were not based on fact. The original estimate was frankly little more than a guesstimate. Unfortunately, as a result of the review and the resolution of the issues arising, there may now be a further minor delay to the project. Needless to say, I am very disappointed and let down by that. Translink has had custodianship of this key Programme for Government commitment and has singularly failed to discharge it effectively. Nevertheless, I remain committed to the project and to improving transport links between the two cities.

My priority now is to move to procurement. We are at an important point in the project. Translink must begin the procurement process for the signalling part of the project soon if we are to get close to the revised timetable of the end of 2016. As I said, I remain fully committed to the completion of phase 2. There are two pressing priorities to enable the signalling procurement to proceed. First, an updated economic appraisal must be produced to validate phase 2 remaining value for money. That is already in hand and will be supplemented by a further independent review of costs before the procurement. The revised appraisal will require DFP approval. Secondly, I will engage with Translink and look again at capital plans in my Department over the next two years to establish how the project will be funded.

*(Mr Deputy Speaker [Mr Beggs] in the Chair)*

I realise that this is not a pretty picture after the aborted procurement last year. It is clear that the project cost was underestimated from the start, but there have been no cost overruns and no taxpayer money has been wasted. Members will no doubt ask why more problems have arisen on phase 2, when phase 1 was delivered on time and on budget. Translink started the process by combining both elements in one overarching design and build procurement. That appears to have been based on a template that is more relevant to a straightforward construction project than this project. The cost of the signalling element has clearly escalated, partly because splitting the project between permanent way construction and signalling involves two contractors being brought in at different times and, to avoid a line closure, overnight and weekend costs may increase. When that is combined with the fact that specialist staff rates have increased since 2011 because of market conditions, it means that the overall projected cost of phase 2 is higher.

#### **4.00 pm**

The decision last summer to separate the signalling and passing loop elements and the design of the signalling from its construction led to some delay. However, it was the detailed design work that laid bare the inadequacy of the previous estimate.

I am disappointed with the way in which Translink has managed this important project, given the particular importance that I attach to it and its Programme for Government status. I expect the Translink board and the new chief executive to review the organisation's failings comprehensively. As I said, I expect a comprehensive lessons-learned exercise and follow-up actions before too long.

My focus now is on sorting out a practicable and affordable way forward. I must be candid with Members and say that risks remain with the project, notably land purchases around the Bellarena passing loop and a potential lack of interest from suppliers. I will, however, expect my officials and the Translink board and senior executive team to manage those risks proactively and keep me fully informed.

Members will recall that I inherited a situation in 2011 in which there was a very real risk that the rail line between Coleraine and Londonderry would be closed for safety reasons because no budget had been set aside to carry out the essential track work that was needed. I took

immediate action to ensure that the line remained open, and the completion of the first phase of the project in early 2013 demonstrates my commitment. I have made the newly installed Translink chief executive aware that the next stage of the project must be a priority for him, and I assure Members that I will deal with any further failings. However, let us be clear: if I had not intervened in the first place, a service would not be operating on the line. I am committed to delivering an improved rail service on the line, and my actions demonstrate that.

My record on delivering improved rail services is also clear. We had a record number of 13 million passenger journeys last year, and there has been growth on all lines, including Coleraine to Londonderry. We have also had record customer satisfaction levels and fares that compare very favourably with other parts of the United Kingdom and the Republic of Ireland. I commend the statement to the House.

**Mr Clarke (The Chairperson of the Committee for Regional Development):**

I thank the Minister for affording me an opportunity to meet him to discuss the statement this morning. Unfortunately, due to business in the House, I was unable to make that meeting.

I listened to the statement, and the Minister repeated the word "disappointed" a few times. Rather than feeling disappointed, I think that he and his officials should feel culpable for the shambles of the way in which the Department handled the project. The Minister has been a cheerleader for the procurement process over the last 12 months and highlighted it as a model in the past, yet, in his statement, he alluded to the shambolic nature of the project and how Translink led it. That is very unfortunate and disappointing. It certainly is unfortunate and disappointing for members of the Committee for Regional Development and the wider public.

Will the Minister explain to the House why he is washing his hands of the procurement process that he and his officials defended over the last 12 months? Will he also explain how he will engage with Translink whilst looking at how the project will be costed within his Department's capital budget? Finally, will he outline whether the relationship between Translink and the Department is a case of the tail wagging the dog?

**Mr Kennedy:** I am grateful to the Chair of the Regional Development Committee. I am sorry that, for reasons of business in the House and meetings, we were unable to engage.

We did, however, take the opportunity to brief the Deputy Chair and the Clerk to the Committee, and I know that it was the Clerk's intention to relay that to the Chairman.

To say that I am disappointed is an understatement. I am very angry indeed that we have arrived at this situation. I remind the Member and the House that, in this operation, the original underestimate is where the fault lies. The cost was woefully underestimated as being in the region of £20 million to £22 million; a more accurate estimate of £40 million has now been arrived at. So, at least we know now the true extent of the work ahead of us. I am glad that the Member indicated the importance of this line and project, not least because it is a key element of the Programme for Government. I give him this assurance: I will pursue it and ensure that it will be pursued. I have made that clear not only to the board of Translink but to its new group chief executive. He is aware of my personal interest in this, and we will pursue it. I am not washing my hands or seeking to put others in the frame; I am simply saying that Translink, at an early stage, got this terribly wrong. It is important now that it recovers the position and that we move forward to progress a project that has, I believe, widespread political support.

**Mr McCartney:** Go raibh maith agat, a LeasCheann Comhairle. Gabhaim buíochas leis an Aire as a freagraí agus as a ráiteas. I thank the Minister for his statement and his answer to the first question on it. He talked about his anger and disappointment, which I know that many will share. Obviously, the Committee will delve into this in more detail. Here is another capital project — there are reports just this afternoon about the college at Desertcreat — in which consultants are paid large sums to come up with a project design.

**Mr Deputy Speaker (Mr Beggs):** Can the Member come to a question, please?

**Mr McCartney:** The consultants give us a cost, and we discover months later that it was grossly underestimated. Will the Minister give an assurance that he will find out why this went wrong, particularly the first estimate?

**Mr Kennedy:** I am grateful to the Member for his question. That is why it is so important that we have a lessons-learned review. The new group chief executive appears to be an almost ideal candidate to do that, given that he comes to the company from the private sector and will be able to assess the failings of the original

procurement process. I share the anger and the disappointment. I am determined that we move forward, and we will do that at all stages. I have cautioned that there may be reasons for suppliers not showing the necessary interest as we go forward, but let me be absolutely clear that Translink will be expected to deliver this Programme for Government priority on behalf of my Department and me.

**Mr Dallat:** Let me put on record my acknowledgement of the contribution that the Minister has made to there still being a railway line between Coleraine and Derry. That said, there might be some excuse for botching a procurement procedure once, but surely doing it twice is inexcusable. What has the Minister to say about the future of Translink and its motley board being in charge of an intercity rail service?

**Mr Kennedy:** I am grateful to the Member for his question, and I understand the frustration behind it. However, as I said in my previous answer to Mr McCartney, I expect Translink to deliver this project, and I am determined that it will. I am equally determined that, going forward, the lessons from this incident and process will be learned. We will pursue the issues in Translink as well as in my Department.

**Mr Swann:** I am sure the Minister is frustrated, as are his party colleagues in Coleraine and Londonderry. He has put that frustration across very well today. Given that the Minister brought in the high-level Cabinet review team, which identified that the original cost projection was a high-level estimate and not backed up with detailed plan or design, can he confirm that the new chief executive and his management team are fully aware of his dissatisfaction with the poor performance? Can he give a reassurance that any other projects that are being held by Translink in a similar process will be reviewed?

**Mr Kennedy:** I am grateful to the Member for his question. I am sure that there will be anger and frustration among the political representatives in councils and the Members from the area affected. I have already met Translink's new chief executive. He took up position last Monday. He is in no doubt as to the gravity with which I view the issue, and he is aware of the clear level of disappointment that I have expressed. I fully expect all the recommendations of the Whitehall Cabinet Office review to be implemented by Translink and accountability to be properly accepted, corporately and, may I say, individually.

**Mr Lynch:** Go raibh maith agat, a LeasCheann Comhairle. Gabhaim buíochas leis an Aire as an fhreagra sin. Minister, thanks for the briefing this morning. I know that this procurement process has lurched from crisis to crisis. You said that the £20 million came about as a result of "guesswork". I think that was the word you used. Guesswork is a very bad tool to use in estimating the cost of a major project like this. What confidence can we have in Translink to deliver the project?

**Mr Kennedy:** I am grateful to the Member for his question. I said that it amounted to "little more than a guesstimate". I believe that that is justified criticism; it is serious criticism levelled on my behalf and on behalf of those who undertook the review. Let me state this again: that review was done at a very high level by the Cabinet Office at Whitehall. So, we cannot be accused of not taking this situation seriously. We have to move the situation on. I have already outlined my intention that the new chief executive of Translink and the Translink board will carry it forward. I will be taking personal interest in it and will not rest until we see substantial progress on the project that is acceptable to me, my Department and Members.

**Mr Eastwood:** I thank the Minister for his statement. I find it absolutely astonishing that, when we are talking about tens of millions of pounds of public money, an organisation like Translink is able to guesstimate the cost to the public purse, end up getting it wrong and the costs, potentially, end up being more than double the guesstimated cost. This is an important question, Minister: are any heads going to roll in Translink over this fiasco?

**Mr Kennedy:** I am grateful to the Member for his supplementary question. If he was listening closely to a previous answer, he will have heard that I fully expect the recommendations of the Whitehall Cabinet Office review to be implemented by Translink and accountability to be properly accepted, corporately and individually.

**Ms Sugden:** I share the disappointment of many Members. I am mindful that we are to welcome the British Open in coming years. Will the infrastructure, including an appropriate Coleraine to Londonderry line, be in place, or will we be constantly facing further delays and significant costs to the public purse in the next few years?

**4.15 pm**

**Mr Kennedy:** I am grateful to the Member for the question. She will know and, at least, recognise my efforts to restore the line and make it ready for the future so that it can help to host events such as the Open in 2019. Phase 2 should be completed within that time frame, and we will seek to achieve that.

I remind the House that, when I came into office, I inherited the Coleraine to Londonderry line, which was simply in mothballs and being earmarked for closure. We have moved heaven and earth to make sure that it has been rescued and retained. We need to build on that and move to the next stage of the three-phase upgrade. That is a continuing commitment that I give again to the House.

**Mr Ó hOisín:** Go raibh maith agat, a LeasCheann Comhairle. Gabhaim buíochas leis an Aire. The Minister's memory of the Derry to Coleraine section being mothballed is slightly different from mine. I will reflect the comments of others. There will be anger and disappointment in the East Derry constituency and in the wider north-west. The Minister said that there was a possibility of suppliers not being interested. Could that further delay the project going ahead and, if so, for how long? The Minister will be cognisant that many other infrastructure projects in the north-west have been delayed.

**Mr Kennedy:** I am grateful to the Member for his question. I simply raised the issue of the contract work ahead because it is specialist, and my understanding is that it is carried out by a limited number of companies, primarily in the rest of the United Kingdom. We will seek to get the procurement process into place as quickly as possible to encourage firms to tender. I am not about to look forward to further failure on the project. I am determined to see the project succeed and will take every reasonable step in my power and under my control to ensure that it does.

**Mr G Robinson:** Like my colleagues, I am very disappointed to hear the news that the Minister has delivered here today. I have a couple of points. The passing loop at Bellarena was critical, and lots of people living near that section of the track were looking forward to it. Will you, in your capacity as Minister, make sure that that takes place when the project is back on stream again? How many jobs could be affected by what has happened?

**Mr Kennedy:** I am grateful to the Member for his interest and his question. I am aware that there are issues around the passing loop at

Bellarena. I will endeavour to write to the Member and give him an updated position on that. Current jobs are not at risk. The important thing is that we move to enhance the service, which will bring benefits as well as increased passenger numbers and will continue to generate public transport availability between Belfast and Londonderry for tourism. For those who work in either destination, it has been an important link and transport benefit, and I want to see it enhanced. That is why I want to see the project succeed as quickly as possible and to overcome any issues that there may be around the passing loop at Bellarena.

**Mr Deputy Speaker (Mr Beggs):** That concludes questions to the Minister on his statement. I ask Members to take their ease for a few moments as we change staff at the Table.

*(Mr Deputy Speaker [Mr Dallat] in the Chair)*

## Executive Committee Business

### Food Hygiene Rating Bill: First Stage

**Mr Wells (The Minister of Health, Social Services and Public Safety):** I beg to introduce the Food Hygiene Rating Bill, which is a Bill to provide for the operation of a food hygiene rating scheme in Northern Ireland.

*Bill passed First Stage and ordered to be printed.*

## Committee Business

### Elective Care: Review of Waiting Times

**Mr Deputy Speaker (Mr Dallat):** The Business Committee has agreed to allow up to two hours for the debate. The proposer will have 15 minutes to propose the motion and 15 minutes to make a winding-up speech. All other Members who wish to speak will have five minutes.

**Ms Maeve McLaughlin (The Chairperson of the Committee for Health, Social Services and Public Safety):** I beg to move

*That this Assembly notes the Committee for Health, Social Services and Public Safety's review of waiting times for elective care; and calls on the Minister of Health, Social Services and Public Safety to prioritise and tackle this issue.*

Go raibh maith agat, a LeasCheann Comhairle. I welcome the opportunity to move this important motion. The Committee for Health, Social Services and Public Safety identified, as did many others in society, the issue of waiting times for elective care as one of our strategic priorities for 2013-14. Long waiting times for elective care have been an issue of concern for the public, the Department and the Assembly for more than a decade.

Elective care is a wide-ranging issue and covers outpatient appointments, surgery for procedures such as hip replacements, treatment of skin diseases and neurological conditions. While those procedures are classified as elective, that does not mean that they are not serious. It is important to point out that many people waiting for elective care endure significant levels of pain, even disability, which impacts on their ability to work and to manage daily tasks, which, of course, then impacts on their mental health.

Since the start of this Assembly mandate in 2011, the Department has submitted bids at nearly every monitoring round for money to reduce waiting times for elective care. Some of that money is to pay for more in-house provision, while some is used to pay private sector providers to treat health service patients. A significant number of bids has been met since 2011, indicating that reducing waiting times is of major importance to both the Department and the Executive. Given that context, the Committee believed that it would be timely and

relevant to carry out a review of the Department's approach to managing waiting times for elective care. The terms of reference for the review were to assess the effectiveness of the Department's current approach to reducing waiting times for elective care and to identify effective approaches that have been used in other countries or regions that could be applied here.

In gathering evidence to inform the review, the Committee was very outward-looking in its approach. We took evidence from a range of expert witnesses, including academics and government representatives from a number of European countries. In doing so, we learned about the variety of approaches in places such as Portugal, Scotland, England, New Zealand, Scandinavia and the Twenty-six Counties.

The review has produced five recommendations that cover the following issues: how waiting times should be measured; the types of targets that should be put in place; how targets should be enforced; and the use of the private sector. All those issues will be covered by my Committee colleagues later in the debate. However, I wish to focus the remainder of my remarks on the Committee's first recommendation — probably the most fundamental recommendation — which is that the Department of Health should introduce referral-to-treatment time targets.

At the moment, the North of Ireland does not have a system of referral-to-treatment time targets whereby the complete journey time from GP referral to start of treatment is measured and a target set for that journey time. Rather, our health service measures separate parts of the patient's journey, such as the waiting time for a first outpatient appointment, the waiting time for a diagnostic test and the waiting time for an inpatient admission. However, those parts of the journey are not linked up, and the waiting time for a review appointment is simply not measured at all. That means that currently there is no way to measure the time it takes from when patients are referred by their GP to when they begin treatment. Referral-to-treatment time targets are used in Scotland and England, and the target is that patients should expect to wait 18 weeks — four and a half months — between being referred by a GP for an outpatient appointment and beginning treatment. Denmark also operates that type of target, and Portugal hopes to move towards that system.

The general opinion among the experts who gave evidence to the Committee was that referral-to-treatment time targets are a good

idea. They give patients a clear sense of how long they should expect to wait to receive treatment for their condition. For example, an official from the Scottish Government explained that one of the reasons why the referral-to-treatment time targets were introduced in Scotland was that they were popular with medical staff. They understood that it instinctively feels right to measure the patient's journey from the patient's perspective, because what matters to the patient is the time it takes to get their problem sorted out and begin their treatment.

The Committee discussed the possibility of introducing referral-to-treatment time targets with departmental officials during the review. We were pleased that the Department told us that it saw a move to referral-to-treatment time targets as highly desirable. The Department recognised that it would better reflect the patient experience, it is regarded as international best practice and it removes potential perverse incentives for delays at stages of the journey, which are present at the moment with stage-of-treatment targets. However, the Department outlined three main challenges associated with moving to referral-to-treatment time targets: policy, resource and technical feasibility.

The Committee acknowledges that measuring referral-to-treatment time targets is indeed a complex task. However, given that those issues appear to have been overcome in England and Scotland, it would seem reasonable to believe that the Department would be able to learn from the English and Scottish experiences through engaging with their counterparts in the relevant Departments.

In terms of resource, the Department explained that referral-to-treatment time targets would take years to put in place and would involve expenditure. However, the Department was not able to provide us with an estimate of how much it would cost to implement, because such a costing has not yet been undertaken.

Whilst the Committee is fully aware of the financial pressures that the Department faces, it is of the view that investment in referral-to-treatment time targets would ultimately lead to more efficient spend on elective care. It may also lead to less reliance on the private sector to deal with backlogs, which could also lead to cost savings in the long term. It is important to point out that we have to remember that the Department is spending between £55 million and £65 million on private sector elective care every year. Surely, some of that money could

be used instead to bring in referral-to-treatment time systems.

Given the evidence presented by the waiting times experts on the benefits of referral-to-treatment time targets and the Department's position that such a move would be desirable, the Committee recommends that they should be introduced in the North and looks forward to receiving the Minister's response to that recommendation.

**Mrs Cameron:** As a member of the Health, Social Services and Public Safety Committee, I support the motion on the review of waiting times for elective care.

I am sure that I would not be the only one in the Chamber to say that my constituency office regularly deals with members of the public who contact me to request assistance as they have been on a waiting list for elective care for a considerable time after being referred by their GP. In many cases, people have been left in considerable pain and are often left dealing with the distress and anxiety caused by the extended waiting time. In addition, a great number of people that I have spoken to have had to take periods off work as they are unable to work owing to their condition. The situation is far from ideal and can have wider implications for their long-term physical and mental well-being.

We in the UK are blessed with an excellent health service that is free to users at the point of delivery, but the reputation of the NHS is often tarnished by the image conveyed by poor patient experience. With no linked-up method of measuring the patient's journey from GP referral until the start of treatment, it is impossible to provide targets or, indeed, to give patients a clear indication of how long they are likely to wait until their life-improving treatment at specialist level commences. That adds further distress for a patient during what can already be a worrying time.

There appears to be some ambiguity around where the responsibility lies in managing and reducing waiting times in Northern Ireland. In England and Scotland, dedicated teams and departments are tasked with monitoring and managing waiting times. Without similar measures being in place in Northern Ireland, there seems to be an element of passing the buck between the Department, the board and the trusts as to who is ultimately accountable for ensuring that patients do not wait excessive periods for referral. Although it may not be feasible for an entirely new team to manage waiting lists, it is clear that a more joined-up

approach between all bodies is required to reduce waiting times.

The Committee has been particularly concerned with the health service trend of using the private sector to manage waiting times. It seems that Northern Ireland has a growing over-reliance on the private sector to treat those who have spent extended periods on a waiting list for NHS treatment. With a relatively small pool of specialists, it is evident that there are potential conflicts of interest, with doctors treating patients in both a public and private capacity. Although the need to meet patient waiting time targets is of huge importance, it is vital that maintaining long waiting lists is not incentivised, making patients feel that they have no option other than to be treated privately.

The use of the private sector is often seen as a way in which to meet targets and save money. However, it has been shown that that approach does not work in the long term and is usually more expensive than doing additional work in the public sector. Patient treatment needs to be based on clinical need and not simply be an exercise in box ticking to manipulate figures. We must work urgently to reduce the £72 million spent on private sector treatment in 2013-14 and redirect the spending to address baseline capacity and match supply with demand.

There is a groundswell of public opinion that the use of private sector providers, some of which employ doctors who also work in the public sector, is a method of privatisation of the NHS by the back door. I understand that point of view, as the current position is simply one of moving patients around the system among the same groups of clinicians. The NHS is an excellent and equitable system, and it seems unfair for it to become a two-tier system that allows those who can afford it to be treated sooner.

I appreciate that there is a need for the private sector to support the health service and was extremely impressed during a recent visit to a private health care facility. I am concerned that our health service has the ability to perform in exactly the same manner but often underachieves owing to management issues. I suggest that a more businesslike approach should be adopted throughout the health service to maximise its potential and minimise waste. That said, I feel that the private sector should be used only at the very margins of need and not as a way to manipulate waiting list figures. The money saved could be ploughed into long-term planning to fill consultant posts, particularly in areas of recurring need such as

joint replacement, ophthalmology and gastrointestinal services.

I particularly support the Committee's recommendation to develop policies that proactively mitigate potential conflicts of interest for doctors who carry out private work as well as working in the health service. In order to understand those potential conflicts of interest more fully, the Department should ask the Patient and Client Council to carry out research to examine the extent to which health service patients are advised about the option of paying for treatment in the private sector.

**Mr McKinney:** As health spokesperson for the SDLP and a member of the Committee for Health, Social Services and Public Safety, I welcome the opportunity to speak on such an important issue as waiting times for elective care. I thank the Members who have spoken and endorse their remarks. I also acknowledge the great work done by the Committee in bringing the debate to the House. I will speak on one issue: recommendation 4 on the use of the private sector in providing elective care in the public sector.

The Committee's report on waiting times for elective care notes that, over the past number of years, there has been an increase in the use of the private sector to provide such care. The Committee has received evidence that, since 2009, the amount spent on private sector elective care is between £55 million and £65 million a year, as was mentioned, with spend in 2013-14 being £66 million. That represents a worrying 5% of the total spend on the private sector for elective care. In comparison, the Committee has received expert evidence comparing the approach adopted by other jurisdictions in the UK.

It is important to highlight the fact that England and Scotland provide private sector elective care only to accommodate additional capacity at the margins that is not required all year round. In the Scottish system, that amounts to just over 0.2% of that provision. We must, therefore, ask ourselves why we spend considerably more on the private sector for such care here. How much of that growth is the result of cancelled hospital appointments, when an operation is then provided in the private sector? Last year, we cancelled 185,000 hospital appointments, not all of them directly related to operations. Are we effectively paying twice for the same operations? The unfortunate situation is that, over the last number of years, demand has increased, by 5% to 6% last year, and appropriate action is not being taken to

alleviate that, especially in drilling down to why we are cancelling those appointments.

As demand exceeds supply, it results in heavy backlogs and excessive waiting times. The private sector is the main means to alleviate that, and it costs more. There is a further question about whether the Department is getting the best value in negotiating these deals with the private sector and whether the relevant staff have been properly trained to conduct such negotiations. In Professor Normand's evidence to the Committee, he highlighted the fact that, in the Republic of Ireland, civil servants were not properly trained in negotiating good deals with the private sector. One must ask whether that could also be the case for our health system.

The problem is that we have an excessive over-reliance on the private sector, which tells us that the baseline capacity is not aligned to meet increased demand. Using the private sector repeatedly is only a quick fix solution. It does nothing to alleviate the long-term systemic issues that we face. It is not sustainable by any means, and we need to find quickly in-house solutions to these problems that will alleviate the ever-increasing waiting times for elective care. It is imperative that the Minister and the Department take due consideration of the issues raised and take immediate action, not in dealing with the short-term problems but rather in taking a consistent and thoroughly planned approach that is needed over the next three to five years if we are to meet increasing demand and deal with excessive waiting lists. In that sense, the Department must be innovative and proactive.

The Committee welcomed the Department's policy intention to reduce its reliance on the private sector in the future by better matching in-house supply with demand. However, the Committee is of the view that these policy intentions lack a supportive action plan that would clearly set out how this will be achieved. The Committee, therefore, recommends that the Department produce an action plan, detailing how it will decrease spend on private sector elective care over the next two to five years by making better use of in-house, service-based solutions. The action plan should include projected costs for spend on private sector elective care for the next three to five years; proposals to develop capacity in the health service sector to better match supply against demand on a long-term basis; proposals to ensure that any private sector contracts required demonstrate value for money; and a timetable setting out the key milestones in this process.

I would like to add that the SDLP is committed to seeking greater transparency and accountability from DHSSPS on the budget. I further add that these issues are not dissociated from those that we face in the budget: on the one hand, potentially doubling spending to ease a significant pressure; on the other, cutting budgets with, it appears, no consistency with the strategy to put community provision front and centre. We need longer-term strategic thinking with transparency and accountability at its core. Otherwise, we will have an ever-pressurised health budget bouncing between an unexamined demand and a shortage of funds.

**Mr Deputy Speaker (Mr Dallat):** Will the Member bring his remarks to a close?

**Mr McKinney:** It is no way to run a health service.

**Mrs Dobson:** I welcome the opportunity to speak on the Committee report. Before I begin, I would like to pay tribute to my colleagues Roy Beggs and Sam Gardiner, who were members of the Committee throughout the many sessions.

Many officials in the Health Department, the Health and Social Care Board and, not least, the trusts may resent the fact that waiting times need to be set and should, in theory, be worked towards. However, in reality, we should consider them as quite an effective barometer of the real state of play in our health service. Of course, targets are not set just to ensure that Health Ministers live up to their responsibilities; they are set because there are sound reasons to ensure that people do not wait for excessive periods.

Patients who wait on a list for what can seem an excruciating period for non-emergency surgery will often end up costing the taxpayer far more through increased GP consultations and prescriptions, but we must never forget the human cost — the worry, pain and concern of family members. This should be to the fore of any discussions on waiting times.

I know that the Minister's priority will be life-saving operations. However, I have to say that I found it frustrating when, only a few weeks ago, he said:

*"One way to control the budget is to ask people to wait longer."*

Of course, it is easy for often unnamed officials to point to the numbers, look at the balance sheets and emphasise how much could be saved, but, away from the computer screens and balance sheets, in patients' homes, the reality is much more brutal. It means that people wait longer at home for treatment for painful and debilitating conditions. People, young and old alike, and their families wait anxiously for the post every day and have to put up with that pain. No matter how many painkillers they take, nothing seems to dull it completely. That is the true cost of a failing budget.

I hope that the current Minister will be more gracious than his predecessor and accept culpability for the current situation. There can be very little doubt that his predecessor, by leaving it well into the last year of a four-year Budget before speaking out on the financial situation facing Northern Ireland's health service, compromised wide-ranging patient services. I am not sure whether he or his party were to blame for that delay. Either way, Northern Ireland's finances are in an appalling situation, and there is no doubt that patients' safety has been compromised.

Unfortunately, we witnessed the beginning of the impact last week. As we know, elective care is one of the areas singled out for savings. Waiting times here will inevitably rocket. Indeed, the language that the chief executive of the Health and Social Care Board used last week was that they will "go through the roof."

Of course, another important decision taken — maybe too late for this Committee report to consider — was the suspension of using private clinics. Whilst I believe that the costs were becoming too great and trusts were becoming far too dependent on their services, this has unfortunately resulted in patients who had initial appointments finding themselves back to square one, including some who had already undergone pre-ops. I am sure that I am not alone in the Chamber in helping constituents who have been placed in that position.

**4.45 pm**

I ask the Minister to tell us how many people have found themselves in that situation. Of course, once again, it was through no fault of their own. Despite the constantly moving environment, the Committee's report is timely. Introducing a system of recording referral-to-treatment times, for instance, would at least allow us to make a more informed assessment of what is really going on across our hospitals.

I welcome the publication of the Committee's report, and I look forward to the Department implementing its recommendations without further delay.

**Mr McCarthy:** As a member of the Assembly's Health Committee, I am delighted, like other members, to contribute to this very important debate. The Health Minister is present for the debate, and we can but hope that he and his officials will take very seriously the contents of this review and implement our recommendations — there are only five of them — at a very early date.

I sincerely thank the Committee staff for the work that they have done to assist us, the members, to compile this report on the problems of waiting times and come up with solutions. We are also grateful to the research staff who provided great assistance, and we thank the individuals who came to the Committee to give evidence of their experience, allowing us to consider the various methods in the different jurisdictions so as to arrive at what we consider to be the best solutions.

I am sure that every elected representative has had contact with constituents who have had to wait for far too long for operations. We do our best, as public representatives, to assist. Unfortunately, for various reasons, solutions are out of the hands of elected people in most cases, and thus the suffering and pain continues for the patients.

In the report, we consider the submissions of a number of experienced people, and we arrive at five recommendations, as the Chairperson and other members have said. The issue of referral-to-treatment times comes top of the list. In its evidence, the Department agreed that the move to referral-to-treatment targets is highly desirable because it better reflects the patient experience and clinical interests. It also removes potential perverse incentives for delays at stages of the journey, which are present with stage-of-treatment targets.

The Department also acknowledged that RTT was the direction of travel for those who are at the leading edge. The question is whether we in Northern Ireland wish to be at that leading edge. I say that we certainly do; I do not think that there is anybody in the Chamber who would disagree with that. RTT is the direction in which we will have to go. So that is a fairly positive ideal for the Department, even prior to the Committee's recommendation.

The Alliance Party and I fully endorse the introduction of referral-to-treatment time

measurement. The whole issue of waiting times goes right to the question of public confidence in our health service and the effectiveness of that service in relation to targets. At times, targets can be limited in effect without enforcement. I am sceptical about punishing health providers, particularly about fining them for poor performance in managing waiting lists. If fines are levied against trusts, or anticipated resources not delivered, the reduction in spending power immediately punishes the very patients whom we are supposed to be helping. In my opinion, it would be better to seek to hold managers, at an individual level, more directly accountable. Fines may be levied on them personally.

Our report refers to the concerns now being expressed regarding the interaction of the National Health Service and the private sector. The private sector has its role, of course, but there are concerns about the sums of money spent in the private sector in an attempt simply to manage waiting lists, the use of the same personnel offering the same treatment, and the potential conflicts of interest and distortions that flow from that.

We all want to see an end result that simply cuts the length of time that our constituents are forced to wait for their operations.

Unfortunately, waiting times have been getting longer despite the fact that, a few years ago, they were reducing. With the budgetary constraints being forced on all of us for the considerable future, our recommendations in this report should, when implemented, go some way to reducing waiting times for all our patients. I plead with the Minister, who was a member of our Committee not so long ago and went along with how we dealt with the business, to do his best to implement the recommendations as early as possible.

**Mr Brady:** Go raibh maith agat, a LeasCheann Comhairle. I, too, support the motion. I welcome the Minister here today. I reiterate what Mr McCarthy said: I thank the Committee staff for the work they have done in relation to the review.

During the Committee's review, the question of how best to enforce targets set for elective care emerged as a key issue. The Committee learned that, in England, a very strong approach, characterised as "targets and terror", was adopted. Under that system, NHS senior executive's jobs were under threat if their organisation performed poorly. In evidence, Dr Findlay said to the Committee:

*"In England, they did targets and terror. It achieved the result; there is no denying that. When the coalition Government came in, they experimented with not having centrally enforced targets, and they were promptly rewarded with ... failure".*

Even though the targets-and-terror approach appears to have been successful in the English case, Dr Findlay introduced a word of caution. He said:

*"There is a risk that the target can be literally something that you try to hit as accurately as possible, but it should be a backstop, a minimum standard, something that the NHS usually comfortably exceeds so that it is rare and unnecessary to enforce it."*

The Committee was advised that the withholding of revenues when targets are not met rather than heavily fining providers is another approach to enforcing targets. We were given evidence by Professor Siciliani, who told us:

*"you do need enforcement. The current policy in England in which part of the revenues are retained if the target is missed seems to be a compromise. You need enforcement otherwise changes are not going to happen, but what I outlined is not as radical as the extreme fines that had been put in place. So, attaching some serious financial incentives to the maximum waiting times seems to be a reasonable compromise and balance."*

We were also given evidence on how approaches have been tried in Portugal. We were told that the Portuguese Government had produced benchmarks in productivity to identify which hospital or which sector in a hospital is performing badly compared with others. They also measure levels of non-conformity against rules that relate to maximum waiting times. The Portuguese Government operate a system whereby patients automatically receive a voucher when they reach 75% of the maximum waiting time, which is nine months in normal cases. The voucher can be used in a private hospital, and the public hospital must foot the bill. Mr Gomes, in his evidence, explained:

*"Patient transfers are automatic when the risk exists of exceeding the maximum waiting times guaranteed for surgery. In this case, the original public hospital pays the bill."*

The Committee discussed the issue of enforcing targets with the Department and the HSC Board during the evidence session. We were advised that the HSC Board has legislative responsibility for the performance management of trusts to ensure that ministerial targets are met. That includes targets for elective care. It is led, in the board, by the director of commissioning and the director of performance. Officials from the board told the Committee that, in 2013-14, it had introduced sanctions whereby, if a trust underperforms against its agreed core activity, funding is withdrawn. However, as the evidence session progressed, the board appeared to move away from the idea that the withdrawal of funding was a sanction or punishment for poor performance. The board said that only 25% of the funding is withdrawn and it is largely related to consumables and would not have an impact on patients, which, obviously, is what we are talking about. The impact that the waiting list has on patients should be paramount.

The board further advised that, in the first three quarters in 2013-14, £1.5 million was withdrawn from the trusts for underdelivery. The board advised the Committee that it was in the process of trying to change the nature of its relationship with the trusts away from a transactional arrangement to one where clinicians are more empowered. The board was quite firm in stating that it did not want to create a blame culture. The board was asked whether, if it did not favour a blame culture, it favoured using incentives. Officials replied that the board was actively looking at what incentives might be put in place. It said that the board had progressed discussions with a small number of provider organisations in the North in recent months around a small number of specialities. That has been a much more open-ended discussion, which is why they can move away from a transaction-based approach whereby the relationship with the board as a provider is to provide three of those. From the evidence presented, the board appears to favour a partnership approach with the trust, and the Committee acknowledges the value of that attitude in some circumstances. However, the Committee was concerned that the board's emphasis on partnership working with the trust was not matched with strong performance management arrangements.

**Mr Deputy Speaker (Mr Dallat):** Will the Member bring his remarks to a close?

**Mr Brady:** The Committee recommends that the introduction of referral-to-treatment targets be accompanied by a clearly defined policy on

how compliance against targets will be enforced. I ask the Minister to consider that.

**Mr McGimpsey:** As a new member of the Committee, I was not involved in the drafting of the report, but I support the motion and the recommendations in the report. It is important to reflect on what we are about, which is patient outcomes and giving the best care that we can to patients who present to the health service. Many's the time I stood in the House in Jim Wells's position, he stood in mine, and we discussed these issues. As far as I am concerned, this is a team game. It is not about politics; it is about all of us working together to deliver the very best outcomes for our patients.

In the recommendations, the Committee has rightly looked at elective care and the waiting times in those areas, because they are a good indicator of how well we are addressing patient need. The recommendations will help, but, in my experience — I am sure that the Minister will make this point in due course — it is difficult to do anything without the proper resource to run your health service. The Chair referred to certain things having to happen to get the recommendations in place: policy, resource and technical ability. Policy is delivered and determined by the Minister, and you can create technical ability, but for both you need the resource. The resource is clearly not there as far as the health service is concerned. It has been seriously underfunded over the four years of the current Budget, and, despite large amounts of investment coming through in in-year monitoring — several hundred million, I think — it still has not reached the required level. This is a perfect indication of where we are with the health service. When we look at the target for 80% of people to be seen within nine weeks, the actual figure is down to just over 60%. When we look at the target for nobody to wait more than 15 weeks, the actual figure is around 80%. Clearly, there are issues that need to be addressed, and investment is needed. When we look at the figures, we see, unsurprisingly, that the worst offender is the Belfast Trust. The Belfast Trust is a very big fish in a very small pool, and it is finding it most difficult to address the need.

We had a discussion today on the Budget. The Finance Minister said how difficult money was, and everybody said that more money was needed, but there are certain key things that we have to do as a Government and cannot escape from. Upholding the rule of law and protecting life and property may be the number one priority, but, as far as I am concerned, cradle-to-grave health and social care that is free at the point of delivery is the second key

thing that we do. It is more important to spend the money there than in many other areas in our Departments.

**Mr McCarthy:** I thank the Member for giving way. There are patients who have been on a waiting list for a considerable time and have eventually got an appointment for treatment and suddenly get a letter in the post to say that, for whatever reason, that appointment has been cancelled. That happens time and time again. Does the Member agree that that is the worst possible scenario and that the Minister and the Department should avoid that at all costs?

**Mr Deputy Speaker (Mr Dallat):** The Member has an additional minute.

**Mr McGimpsey:** Thank you, Deputy Speaker. I agree with Kieran McCarthy. I have had patients in my constituency office who have had that experience of going through all the pressure, stress and trauma with their family of going for a procedure only to have the operation cancelled on the morning of the day it is due to take place. That is appalling and, of course, is not down simply to resource. It is also down to how we manage lists.

The fact is that the resource does not exist here at the minute, and Members have to face up to the reality that supply has to meet demand. If you have a certain demand and the supply does not meet it, you have a problem. If supply is less than demand, we have these waits. That point has been made over and over again, and we in the House are inclined not to properly face that reality. Until the health service is properly resourced — I am making some of Jim Wells's arguments for him — and we are not talking about huge extra amounts —

5.00 pm

**Ms Maeve McLaughlin:** I thank the Member for giving way. I ask him to consider that the referral-to-treatment time part of the issue has not yet been costed. Maybe the Member will agree that that should be the first stage. Indeed, the £14 million that was received as part of the monitoring round for elective care should support the process of establishing referral-to-treatment time targets.

**Mr McGimpsey:** I do not disagree with what the Chair has to say, but I make the point that strategic money coming in, in a budget that you can see several years ahead, is far more valuable to you than money that comes in at the last minute through in-year monitoring or has been announced in the new Budget today. Of

course I welcome that £150 million very much, but it is better to know that it is coming so that you can plan to use it.

I understand the position Jim Wells is in. I understand where the Department is, and I believe that there are major improvements that can be made. However, I do not expect that simply introducing all these recommendations will do the trick. Therefore, I look forward to listening to —

**Mr Deputy Speaker (Mr Dallat):** The Member's time is up.

**Mr McGimpsey:** — the new Minister giving us his assessment for the first time.

**Mr Wells (The Minister of Health, Social Services and Public Safety):** I welcome the opportunity to respond to the Committee's report on the review of waiting times for elective care and to the views expressed by Members today. As most Members will know, I was a member of the Committee until very recently, and I was party to the discussion and the drafting of the report. Therefore, I understand clearly the Committee's concerns and the challenges we face.

Members will be aware that long waiting lists and the time that patients spend on them are a concern not only in Northern Ireland but in many other countries. While most patients understand that there will be some delays involved in receiving their treatment, their personal concern is about the speed with which the queue moves, rather than the number of people in front of them. The longer they have to wait, the more anxious they become, which can affect their health and well-being. I thought that Mrs Dobson illustrated that very well. In addition, we are aware that delays in diagnosis and treatment can, in some areas, result in poor outcomes for the patient — a situation that we must always seek to avoid. I have to say, as a constituency representative, that this issue crops up time and time again in my inbox, whether by email, post or phone calls. I understand the pressure that Members are under in this situation.

Considerable resources and efforts have been used in recent years and have been directed at reducing waiting times, both here and in the rest of the United Kingdom, as they represent a key indicator of the health service's overall performance. It is acknowledged that focusing efforts on waiting time targets has delivered a substantial improvement in waiting times, although in recent years these have had to be

scaled back, in line with available resources and increased demand. Nonetheless, targets continue to be viewed as the best way to maintain and deliver improvements in performance. The targets set in Northern Ireland have largely been informed by similar targets in place elsewhere in the United Kingdom, and it is useful to see how well they have worked elsewhere.

I welcome the report's recommendation in relation to referral-to-treatment targets, known as RTT. It is clear that such targets provide a more transparent view of the patient experience. From the patient's point of view, it lets them know how long they can expect to wait from referral to treatment, rather than how long they will wait for each stage of the patient journey, that is, assessment to diagnosis and treatment. Again, the Chair articulated the point that, really, that is difficult for the patient to understand.

Members will be aware that a 25-week referral-to-treatment target was planned for Northern Ireland in the 2008 Programme for Government, but this was not taken forward at the time due to public sector funding pressures that made it unlikely that the investment required to deliver the target would be available to the HSC in the immediate future. I have to say, Members, that little has changed there. Instead, efforts were refocused on working to ensure that the HSC met existing targets so that, regardless of the measurement adopted, waiting times were minimised for patients.

The Committee's report makes it clear that the introduction of RTT targets in the National Health Service, in conjunction with the necessary investment in services, resources and technology, has delivered further improvements in waiting times for patients in England. However, as the Committee was advised in evidence, changing to an RTT target will not in and of itself deliver improvements in waiting times. The introduction needs to be supported by extra investment, training, technical support and, most critically, positive engagement from clinicians. I have therefore asked the Committee to look at the experience of introducing such targets elsewhere to better understand the scale of investment required, the potential benefits and whether such an investment could be justified in the current financial climate. I will consider that before making any decision on the introduction of a referral-to-treatment target and am extremely grateful to the Committee for the work that it has carried out, providing as it does in its report a substantial contribution to the Department's thinking.

Linked to the introduction of RTT targets, the Committee has made recommendations that new arrangements for managing performance and a clearly defined policy on how compliance with the targets will be enforced should be put in place. As Minister, I am content that the roles and responsibilities of the Department and the Health and Social Care Board in performance management are clearly defined in legislation, and the annual commissioning plan direction sets out formally the key strategic priorities and statutory obligations, together with the associated standards and targets that the sector must meet. Against that framework, I am pleased to report that work was recently commissioned by the permanent secretary to look at how the Department exercises its monitoring of performance management. That is being carried out by the Health and Social Care Board and the Public Health Agency, along with its direct accountability relationship with the arm's-length bodies, and has resulted in significant changes across the range of governance activities in the Department. The Department is working to develop, strengthen and build the governance framework surrounding the health and social care sector to ensure that, on behalf of the people of Northern Ireland, our service delivery is of the best standard possible for all our patients. I therefore recognise the Committee's recommendations as positive and certainly not at odds with the work being taken forward by the permanent secretary. I fully support the Committee's assertion that strong leadership is required from the Department. The Committee's recommendations relating to strong leadership, clearly defined policies and personal accountability will be considered further by my Department within the ongoing development of stronger performance monitoring structures.

Considerable comment was made by Members about the involvement of the private sector. I noticed that that made up a substantial part of Mrs Cameron's speech. It is important to indicate the level of investment that has occurred in the private sector in recent years. In 2009-2010, it was £57.5 million; in 2010-11, it was £24.7 million; in 2011-12, it was £52.6 million; in 2012-13, it was £66 million; and in 2013-14, it was £66.9 million. It is noticeable that there was a very substantial dip during Mr McGimpsey's tenure, which again indicates the pressures that he was under, as I am under, as far as funding is concerned. In 2013-14, that £66.9 million meant that 26,000 surgical procedures could be carried out. That is hips and knees and all sorts of elective, mostly orthopaedic, operations. That is 26,000 people who had their condition relieved. I have spoken

to people who have attended private clinics, and two things are evident. First, they do not care whether they get relief through an operation in a private clinic or a National Health Service hospital. What they want is urgent treatment. Secondly, we know from experience that numerous other outpatient activities are carried out in the private sector and that the treatment outcomes are extremely high. We had 91,000 outpatient activities in 2013-14. I have no great baggage about that. If we can use the private sector to relieve waiting lists and provide a high level of care and provided that that is done at a tariff that is affordable and cost-effective, I think that that is a very good use of public finances.

**Mr McCarthy:** I am grateful to the Minister for giving way. I do not think that anybody would disagree with what the Minister is saying. However, the real problem is the amount of money that is being taken out of the National Health Service to provide for that. Why can more of the operations that you speak of not be provided within the NHS, thereby making a saving?

**Mr Wells:** It is worth saying that the Health and Social Care Board provides funding only for procedures or diagnostic investigations in the private sector beyond that which is contracted by the trusts. There is no double funding here; this is additional. It is money being used in a very cost-effective way to reduce the huge numbers of people who require urgent or long-term orthopaedic interventions. I make no apology for using money that is available, either through monitoring rounds or from within the Department's existing resources, to try to relieve the pressure on waiting lists.

I visited these facilities quite recently, and I have to say that all the patients whom I spoke to were very complimentary about the treatment that they had received. I do not think that we should get ourselves into political silos on what we feel about this. This is good news all round. It still represents less than 2% of the entire health budget, excluding social services. We are not getting into an ongoing or rolling programme of privatisation. We use the private sector when required.

In order to deliver improvements in waiting times, there remains in Northern Ireland a need to bridge the gap between the capacity available in the health service and the demand for procedures, which continues to rise. To address this gap, we use the independent sector. The Committee is absolutely right to ask what we are doing to find more efficient ways to deal with increases in demand for in-

house procedures, but, in the long term, we will still rely somewhat on the independent sector. That is exactly what the Health and Social Care Board is doing in seeking to develop, in individual specialties across Northern Ireland, long-term strategic approaches so that demand can be managed in-house. However, this will take a considerable time to come to fruition. When money is available, we have to use the private sector.

As Members know, I wrote to the private sector on 1 October and said that no money will be forthcoming for the rest of this financial year for private procedures. The vast majority of those procedures in the system are wending their way through. I believe that all those procedures will have been carried out by Christmas. Apart from some diagnostics, there will be no further private sector involvement this year. I have to say that the situation for next year is not that rosy either.

The report recommends that an action plan be developed to decrease spend on the independent sector over the next three to five years. I am very mindful that the HSC should always have some access to the independent sector to be able to respond to specific demands while ensuring that in-house capacity is well planned and that there are arrangements to access additional in-house work, which is part of the normal planning process. However, I have to say that the figures over recent years from the tenures of Mr McGimpsey and Mr Poots and from my tenure indicate that the only way that we can make substantial inroads into waiting lists is to refer patients to the private sector. I am, therefore, content to ask the Health and Social Care Board to take forward the Committee's recommendation on the issue.

We should never overlook the fact that a very substantial amount of our health and social care is already provided by independent contractors. GPs, dentists and community pharmacists, for instance, are all private practices or individuals carrying out work on behalf of the trusts, the board or the PHA. So, let us not get too hung up on how we deliver. Let us ensure, first, that it is free at the point of delivery and, secondly, that it is of a high quality.

**Ms Maeve McLaughlin:** I thank the Minister for giving way. I ask him to address the issue of the perverse incentives that exist. The Minister, as a former member of the Committee, will know that evidence was given to the Committee that NHS appointments are sometimes cancelled and that there is often a perverse incentive for the same consultants to do work in a private setting. In some cases, as many as

30 hip operations can be carried out in an independent setting on a single day whereas, on the same day, there will be only five in the health service. Go raibh maith agat.

**Mr Wells:** The Committee dealt with that issue, and I was just about to answer that point. The Chair must have been using her Londonderry crystal ball to try to pre-empt what I was going to say. The Committee recommends that the Department develop policies to mitigate potential conflicts of interest for doctors who work in both the public sector and the private sector. I agree that there is that perception.

### 5.15 pm

The Committee made this recommendation on the basis of the anecdotal evidence and observations that it received. I have received those as well. However, as Minister, I want to make it clear that my Department has absolutely no evidence that consultants seek to divert patients to private health care or that they underperform in the public sector to maintain long waiting lists.

Northern Ireland's size makes sustaining a private health sector of any significant size that could utilise medical staff from elsewhere more difficult. The Northern Ireland independent sector, therefore, predominately utilises existing medical staff from the health service.

The potential for a conflict of interest has long been recognised and was addressed by the introduction of a code in November 2003. To avoid conflicts of interest between public and private work, 'A Code of Conduct for Private Practice', was agreed between the BMA Northern Ireland and the DHSSPS. The code is for consultants and includes — this will answer the points made by the honourable lady for Foyle — the requirements that programmed HSC commitments should "take precedence over private work" and that, in the course of their HSC duties and responsibilities, consultants should not:

*"initiate discussions about providing private services"*

for HSC patients, nor should they ask other HSC staff:

*"to initiate such discussions on their behalf."*

In addition, the Department's guidance, 'Management of Private Practice in Health Service Hospitals in Northern Ireland', sets out key principles, including that consultants and

their employing organisation — the trusts — should work:

*"to prevent any conflict of interest between private practice and HSC work."*

They should also:

*"minimise the risk of any perceived conflicts of interest."*

Nonetheless, it is clear that the Committee is concerned about HSC consultants who practise privately. In view of that, I am content to ask my officials to discuss with the Patient and Client Council the feasibility of undertaking research along the lines suggested by the Committee. I will inform the Committee of any outcomes of that in due course.

**Ms P Bradley (The Deputy Chairperson of the Committee for Health, Social Services and Public Safety):** I thank all the members of the Committee. I was not on the Committee when it was looking at this issue, although I certainly wish that I had been. I also thank all Members. It certainly has been a very interesting debate.

The National Health Service has, since its inception, always had to manage its resources. From talking to constituents, I know that waiting times for appointments and treatments are one of the biggest issues for service users. For patients, there are four distinct waiting times: to see their GP; between seeing their GP and receiving appropriate tests; for referrals to specialists; and from seeing specialists to receiving treatment. For some conditions, those waiting times can have a negative impact on long-term health outcomes. It is right that we explore ways in which waiting lists can be reduced so that appropriate treatment can commence.

In September 2000, an additional £5 million was made available to reduce waiting lists under four key areas: clinical initiatives, management actions, service planning and efficiency measures. Prior to 2002, cuts in services due to financial reasons had led to an increase in waiting times in three major areas. First, from 1996, there was a 30% reduction in elective procedures. Then, from 2002, there was a decrease of 18% in bed capacity, while an increase of 10% in inpatient surgery and delayed discharges impacted on a bottlenecked system. In 2009, I am happy to report that the PAC commended DHSSPS on the dramatic drop in outpatient waiting times, yet, in 2014,

we have bed pressures and extended waiting times.

At this stage, I will turn to what other Members had to say. The Chair, in moving the motion, said that the issue had been a concern for more than a decade. As someone who worked in the health service for many years, I fully understand that, as I understand the pressures that the health service is under. The Chair also said that waiting times are a serious issue and those for elective care are an extremely serious issue. She is absolutely right because there are people in severe pain, and the knock-on effect of that is poor mental health. There are other knock-on effects, too, and Mr McCarthy and Mrs Dobson spoke about the human cost. They said that, sometimes, we are very good at looking at percentages, facts, figures, finances and so on, but we need to come back, at every stage, to the human cost. That is not just for the patient but for the patient's family, the patient's employer and their work colleagues. It has a knock-on effect across the board.

The Chair is absolutely right that it is timely that this review is being carried out. The Committee looked at how other countries and regions handled their elective care, and it came up with five recommendations. The first recommendation that the Chair talked about was that to reduce the referral-to-treatment time targets. As I said earlier, our service measures it all in separate parts of the patient's journey, and, of course, that is no way to measure their journey. Their journey should be measured from beginning to end to give the patient a clear sense of how long they will have to wait for treatment. The Chair also acknowledged that this was a complex task, and the Department said that it would take time and money to implement. The Committee believed that this would lead to cost savings in the long term, and I absolutely agree with that. The Committee also recommended that this should be introduced as soon as possible in our health service here in Northern Ireland.

Mrs Cameron brought up the issue that I and many Members did about our constituency offices. Regularly, we have people calling in because they are suffering and are in pain and have come to the end of the road and do not know where else to turn. Quite often, they end up at our offices wanting our help. The Minister mentioned that he also is aware of that because he is also a constituency MLA. He is also aware of the amount of letters that we, as MLAs, send through to his office, asking that waiting times be looked at. A number of Members brought that up, and I do not see that changing any time soon. In fact, a lot of

Members said it, and they are absolutely right. I see that increasing as the months and years go on, and that really is a very sad state of affairs.

Mr McCarthy, in an intervention to Mr McGimpsey, mentioned the fact that we have constituents who have been given times and dates for surgery, only to receive notification that it has been cancelled. On a personal level, I have a 79-year-old father who has appeared for surgery twice. He has actually been to the hospital twice at 7.00 am, only to be told at 5.00 pm, "We are not doing your surgery today". That is the state of play that we are in. We have 79-year-old men brought into hospital, and that is the case. It does not always happen the day before or the week before. It is happening to our constituents and our own family members, people who we know and love, daily.

**Mr Wells:** Will the Member give way?

**Ms P Bradley:** Yes.

**Mr Wells:** Since I have become Minister, I have received letters from quite a few MLAs, even those who are in the Chamber, on this issue. Members, if that happens, I really do want to hear from you. I find it a matter of great concern if someone is caught in that position not once but twice. Indeed, I have a case before me at the moment where it happened on three occasions. I think that we need to get some assessment of how this is going because it causes enormous distress to patients, and I simply cannot understand at times why it is happening.

**Ms P Bradley:** I thank the Minister for that, and I will be speaking to him within the next day or two. This only happened last week for the second time.

**Mr McCarthy:** I am grateful to the Member for giving way, and I am also very grateful for the response from the Minister. There is one aspect of this problem that has to be taken into consideration, and that is that we are all fully supportive and behind suicide prevention and prevention of self-harm etc. Instances like that can result in leading people in that direction, and that is the last thing that we want to see. I am delighted that the Minister has acknowledged that and is prepared to listen and to try to do something about it.

**Ms P Bradley:** I thank Mr McCarthy for his remarks. He is absolutely right. We all know what it is like to be pain, and we know how much that can bring us down and how that

makes us feel. We also know that there is a heightened risk and a great risk of suicide among our elderly population as well. A lot of people waiting for care are older people. There is also the knock-on effect of having to have someone come in and look after you and your loss of dignity. There are so many different things to do with elective waiting times that need to be addressed very soon.

Mrs Cameron also brought up a recent visit to a private healthcare facility. The Minister also brought that up, as did other Members. I also was on that visit, and I saw a very efficient healthcare facility that appeared to be doing things in a much better way than our own health service. So, maybe there are lessons to be learned. Rather than us saying that we need to stop doing something, or that we need to do x, y or z, maybe our National Health Service needs to learn a few lessons about how to run its service more effectively. Mrs Cameron also talked about the ambiguity in our system and how we measure waiting times.

Mr McKinney spoke about recommendation 4, which relates to the use of the private sector for elective care. He said that, in 2009, £55 million to £65 million — 5% of the total spend on elective care — went to the private sector. He talked about other countries where private healthcare is used and told of how the demand in Northern Ireland has increased in the past years. That demand has, of course, exceeded our supply. That needs to be addressed as well. He questioned whether we were getting value for money from the private sector. We all know what the public opinion of private healthcare is, and the Minister has talked about it. We know the public's opinion on consultants who, maybe, are moving or manoeuvring lists, or whatever that might be. From what I saw in the facility that I visited, that certainly did not appear to be case. Many consultants there were purely private consultants.

So, I think we need to look at it on balance. Yes, these things do happen, but, again, there are other people out there who, for ethical reasons, are absolutely against using a system in which they would cancel NHS treatments in order to provide private treatments. Mr McKinney also said that we need to better match supply with demand. That is absolutely right. He also called for greater transparency when we look at the private sector. I think that better transparency would alleviate some of our concerns.

Mrs Dobson brought up the human cost, as I said earlier. That is an excellent point. When we look at how this affects the patient, we see

how difficult life becomes. She also spoke about the waiting times and the need for them to be set to ensure that patients do not have to wait for extended periods, as we are seeing at present. I think that all of us agree that those waiting times need to be reduced, regardless of whether we believe in the use of private healthcare or the use of the NHS.

I spoke earlier about what Mr McCarthy said. He talked about constituents, and he said that we need to cut the length of time that our constituents have to wait, because they are suffering and are in pain. You are absolutely right.

Mr Brady talked about "target and terror" in England: I think that that was the term he used. I found that quite interesting; I wonder how it would work. Yes, it might well work. In that approach, management was held to account. That is exactly who needs to be held to account because they should be managing their service more effectively. He also spoke of the need for enforcement and said that changes would not happen if there was no enforcement. That reminded me of being a mother. If you do not follow through with what you say you will do when you are trying to get a child to do something, changes will not happen. So, it is exactly the same across the board in any walk of life, regardless of what we are dealing with.

Mr Brady also talked about Portugal, its benchmarks, and what seemed to be like league tables showing who was performing and who was not. It would not be a bad idea to have that. When I sat on the Health Committee previously, we got various tables relating to elective and other types of surgery. They told us which hospitals and trusts were performing and which were not. He also spoke about incentives. That is another good idea. Recently, I have been looking at the women in politics issue. To try to make it more desirable for political parties, we should maybe look at incentives. It is probably something similar: in order for trusts to perform, and to perform to meet the demand, incentives are maybe a way forward.

Mr McGimpsey brought us back to what we should be remembering: we should be delivering the best care we can and the best outcomes for our patients. He used the words that I used many times in social services, "patient need".

Again, we forget sometimes when we look at all the facts, figures and statistics that patient need is the most important thing. Sometimes, we need to be brought back to that to remember

that that is important. The Member also mentioned the Belfast Trust, which is my trust. It was one of the worst offenders, although that is for many reasons. It is the largest trust and has the highest demand. It would be nice to see that changing in some way, but I know that it has a difficult task ahead of it.

The Minister highlighted the number of constituents he has. He is very much aware of all the complaints that we keep hammering on his door about. He welcomed the Committee's recommendations on referral-to-treatment targets, and he agreed that it would be more transparent for the patient. He also said that it would require investment, and that is not just financially, but through other doors, including clinicians, who would have to invest in it as well. We look forward to seeing what he can do and how it will be taken forward.

We all know that we face great financial pressures, and that is something else that the Minister has to face. However, we also have to face them, as elected representatives and members of the Health Committee. There are challenging times ahead, but I believe that the recommendations set down by the Health Committee are valued and would go more than some way towards alleviating the pressures of elective care.

*Question put and agreed to.*

*Resolved:*

*That this Assembly notes the Committee for Health, Social Services and Public Safety's review of waiting times for elective care; and calls on the Minister of Health, Social Services and Public Safety to prioritise and tackle this issue.*

**5.30 pm**

## Private Members' Business

### Pancreatic Cancer Awareness Month

**Mr Deputy Speaker (Mr Dallat):** The Business Committee has agreed to allow up to one hour and 30 minutes for the debate. The proposer of the motion will have 10 minutes to propose and 10 minutes to make a winding-up speech. All other Members will have five minutes.

**Mr Buchanan:** I beg to move

*That this Assembly notes that November is Pancreatic Cancer Awareness Month and that the disease is the cause of approximately 6% of all cancer deaths across Northern Ireland; regrets that only approximately 10% of pancreatic cancer patients undergo curative surgery as most patients are not diagnosed until the cancer is too far advanced for such treatment; acknowledges that 40% of patients visit their GP three or more times before being referred to hospital and that many patients begin treatment for other illnesses before they are diagnosed correctly; and calls on the Minister of Health, Social Services and Public Safety to work with service providers and relevant professional bodies to introduce new, improved and robust pancreatic cancer referral guidelines and to promote training and support for GPs and other health professionals to boost early diagnosis rates, reduce misdiagnosis and to ensure that pancreatic cancer survival rates are improved across Northern Ireland.*

I move the motion in light of Pancreatic Cancer Awareness Month this November and to bring this important topic to the Floor of the House. Today, 24 people will die from pancreatic cancer in the UK; that is 24 out of the 8,700 people who will lose their battle against pancreatic cancer this year. Pancreatic cancer is a deadly scourge that is sweeping across the UK at an increasing and alarming rate. It is time that we at government level put measures in place to stop the flood of pain, trauma and death that has been unleashed across the Province.

One of my constituents — Mrs Kerry Irvine, who is just coming into the Gallery — is the reason that I brought this matter to the House. Since losing her husband Noel to pancreatic cancer in 2011, Kerry has fought to raise awareness of this awful disease. I will let you hear what Kerry said about the day her life changed for ever:

*"April 22nd was the day my life changed. I changed, never to be the same person*

*again after I heard the words, 'Noel, you have cancer. It's pancreatic cancer which has spread to your liver.'"*

Kerry continued:

*"We quickly learnt that we were living on borrowed time. Six months to live a lifetime, how do you do that?"*

How can anyone put a lifetime into six months? Those haunting words are heart-rending, and, today, in Northern Ireland, too many people are thinking the same thing and asking the same questions. They have so little time left with their loved ones after receiving the diagnosis.

Pancreatic cancer is not a rare disease. The latest available figures show that, in 2012, 244 new cases of pancreatic cancer were diagnosed and, of those, 243 deaths were recorded. That equates to 6% of all deaths from cancer in Northern Ireland. In fact, the most worrying statistic about pancreatic cancer is that, unlike most other cancers, it is going against the trends, and mortality rates are increasing. Recent research from Cancer Research UK has shown that, thankfully, mortality rates for most cancers are declining, yet pancreatic cancer is not following those statistics. It is shocking to note that the five-year survival rates for pancreatic cancer have remained largely unchanged for the past 40 years. Northern Ireland is at the bottom of the pile, faring only slightly better than Bulgaria in the one-year survival rates for pancreatic cancer patients, and trails far behind the rest of the UK, which is already falling behind the European average. Those depressing figures culminate in the fact that pancreatic cancer has the worst survival outcome of any of the 21 most common cancers.

At present, the forecast for pancreatic cancer is bleak. By 2030, it is set to be the fourth largest cancer killer. Despite the enormity and seriousness of those figures, pancreatic cancer receives only 1% of the National Cancer Research Institute's partner spend. If we compare the spend on breast cancer of £3,426 per death per year, we see that pancreatic cancer staggers into oblivion with a measly £625 per death per year. That disparity in funding allocations to different cancers must be addressed. There is a direct link between funding allocation, research and tackling disease, and we cannot have success in fighting pancreatic cancer if research funding does not improve. The lack of funding over the past 40 years has led to pancreatic cancer being the neglected disease, and it is little wonder that pancreatic cancer has been

labelled the Cinderella of all cancers in relation to other cancers such as breast cancer and prostate cancer.

I am here to lobby for and to call for an equal allocation of funding for pancreatic cancer. In Northern Ireland, aggressive measures need to be put in place now to develop early detection and treatment tools before incidences of the disease are allowed to dramatically increase. The way in which pancreatic cancer is detected and treated now is not working. Ninety-five per cent of patients who are diagnosed with the disease die from it. During the early stages when the tumour would be traceable, there are usually no specific symptoms, which is why it is so deadly. It tends to be discovered at advanced stages when there may be abdominal pain or jaundice. Presently, there are no screening tools. The average survival time for a pancreatic cancer patient is just two to six months from diagnosis. That is largely due to the fact that, by the time the disease is diagnosed, it is too late for surgery. Around 80% of patients are diagnosed when the disease has advanced.

Related to that is another incredibly worrying statistic on pancreatic cancer: 40% of patients visit their GP three or more times before being referred to hospital, and over 16% of patients have had to visit their GP or hospital seven times or more before getting a correct diagnosis. That is despite research carried out by Pancreatic Cancer UK that has shown that nearly 25% of pancreatic cancer patients experience symptoms for up to 12 months prior to being diagnosed. Clearly, there is a problem, and that problem costs lives. Pancreatic cancer charities have repeatedly told of the pattern of missed opportunities to be diagnosed at GP surgeries or hospitals. Sadly, the speed of diagnosis has a direct impact on the eligibility for surgery or palliative treatment, and if those are consistently too late, lives will be lost needlessly.

It would appear that GPs have a problem when it comes to diagnosing pancreatic cancer. From investigation of GP guidelines it is clear that they are structured around cancer type rather than the symptoms. The GP must think cancer first, then think site and then compare patient symptoms. Surely that is illogical. Why are guidelines not written around presenting symptoms that would rule out a cancer diagnosis first? It would seem that it is difficult to get clinicians to think of cancer first when making a diagnosis. That goes some way to explain why GPs in the UK diagnose a measly 18% of pancreatic cancer cases.

This year, I met a remarkable and inspirational lady called Ali Stunt, who is a survivor of pancreatic cancer. Ali survived the disease and now heads up the charity that tackles pancreatic cancer head on. Rather than simply bemoaning problems surrounding the cancer, the charity has, as its name suggests, taken action and developed an online training module accredited by the Royal College of General Practitioners that is provided free for GPs and can be used for continual professional development. Pancreatic Cancer Action (PCA) is the first charity in the world to provide a practical solution to the problem of late diagnosis of pancreatic cancer patients. I congratulate Ali Stunt from Pancreatic Cancer Action on its very successful cancer awareness advertising campaign. Those controversial campaigns just last week won two highly acclaimed awards from the Institute of Practitioners in Advertising. I met Ali back in June when she came over here. We had a meeting with the then Health Minister, Edwin Poots, and Ali outlined for him the fully accredited online tool that PCA has made for GP training.

I am pleased to inform the House that, since that meeting, the training module on diagnosing pancreatic cancer in primary care has been fully published in the Royal College of GPs' members' newsletter and is readily available for GPs to access. I now call on all GPs in Northern Ireland to make themselves aware of that invaluable tool, which is freely available to them. I urge Queen's University Belfast, which is the principal medical school in Northern Ireland, to recommend that all its students take that practical module to raise their awareness of the matter. I also call on my colleague the Health Minister to oversee the promotion of the free tool right across Northern Ireland. In addition, I urge the Minister to talk to the Royal College of GPs in Northern Ireland to look for additional ways to promote the tool.

Delving deeper into the system of how pancreatic cancer patients are treated in Northern Ireland shows that it leaves a lot to be desired. At present, there is only one hepato-pancreato-biliary (HPB) nurse for the whole of Northern Ireland. That lady is the only specialist pancreatic cancer nurse for the whole population of our Province. Something more needs to be done on that matter. If we had more specialists in the community —

**Mr Deputy Speaker (Mr Dallat):** Will the Member bring his remarks to a close?

**Mr Buchanan:** — they would have access to help and clarity on these issues. I have a lot

more here, as you will appreciate, but I thank the House for allowing the issue to be debated today. I trust that something will be done to move it forward.

**Ms Maeve McLaughlin (The Chairperson of the Committee for Health, Social Services and Public Safety):** Go raibh maith agat, a LeasCheann Comhairle. I thank the proposer of the motion for bringing what is an important topic to the House today. I welcome the opportunity to participate in the debate.

It is appropriate that we do all in our gift to raise public awareness of pancreatic cancer in the first instance. It is important to point out that is not a rare cancer. The proposer of the motion reflected on a number of the statistics. The latest available figures that I have looked at show that there were 244 new cases and 243 deaths recorded in the North in 2012. None of those statistics suggests that it is a rare cancer. The proposer pointed out that it is responsible for almost 6% of cancer deaths in the North. Research by organisations such as Cancer Research suggests, as the proposer said, that it is set to become the fourth biggest cancer killer by 2030. We have survival rates and a lot of ongoing, good, positive work for most forms of cancer, and thankfully those survival rates have been rising, but the five-year survival rate for pancreatic cancer has simply remained unchanged. That is something that we need to be mindful of when we look at the need for public awareness and much more around that. In effect, it leaves pancreatic cancer with the worst survival outcome of any of the top 21 most common cancers. That is not something that we should be proud of; rather, it is something that we should target for the support, public awareness and resources that are required.

The proposer said that the early stages of pancreatic cancer often exhibit no symptoms, which makes diagnosis quite difficult. Treatment depends on the type, location and stage of the cancer. Surgery is often the only way to cure pancreatic cancer completely. However, the condition is usually so advanced by the time it is diagnosed that surgery, as some cancer charities indicate, is suitable for only around 15% to 20% of people. The cancer has advanced so much that surgery is not an option.

5.45 pm

**Mr Buchanan:** Will the Member give way?

**Ms Maeve McLaughlin:** I will indeed.

**Mr Buchanan:** Does the Member agree that one of the ways to defeat the spread of pancreatic cancer being caught too late is for GPs and clinicians to think cancer first and to go down the road of treating or looking at it as cancer and then treating all the other symptoms after that?

**Mr Deputy Speaker (Mr Dallat):** The Member has an extra minute.

**Ms Maeve McLaughlin:** I agree with the Member. I will come to that point, because we need to be mindful not only of the facts but of what we do about pancreatic cancer.

I go back to the point — I think that the proposer referred to it — that, according to figures from Cancer Research, 48% of pancreatic cancer diagnoses are made through emergency admissions. Even when a diagnosis is made, the patient experience is often extremely poor, and we need to be mindful of that. There is only one specialist pancreatic cancer nurse in the North. We should not be proud of that statistic and should actively strive to do something about it.

There should be better public awareness as well as better awareness among health professionals, including GPs and clinicians. I am aware of and welcome the fact that the Public Health Agency is discussing a generic cancer awareness campaign, but I ask the Minister to consider running a specific pancreatic cancer awareness campaign. What actions will he take to boost public awareness of pancreatic cancer and its symptoms? It is important to reflect on the evidence that was given to the all-party group on pancreatic cancer. One respondent said:

*"I went to my GP more times in the previous 12 months prior to my diagnosis, than I had in the previous 12 years."*

That statistic also needs to be taken into consideration.

What needs to be done? We need to develop screening tests. We need to invest a greater proportion of money in research funding. We need to look at better GP training and comprehensive referral guidelines. We need to look at referral pathways, including direct access to patients' CT scans for GPs. We also need to look at how to develop and roll out innovative referral pathways in the North. I welcome the fact that a pancreatic cancer charity has identified two pilot projects, and it

has identified the North as one of the locations for a pancreatic specialist nurse and a community involvement coordinator. I met representatives of the charity in June. I commend its work in this area and its continuing lobbying of the Health Minister and the Public Health Agency.

**Mr McKinney:** As SDLP health spokesperson and a Health Committee member, I welcome the opportunity to speak on such an important issue, which has affected and continues to affect many people here. I thank those who tabled the motion.

As noted by Members who spoke previously, pancreatic cancer is one of the leading causes of cancer death in the UK and has the worst survival rate of all cancers, yet it receives merely 1% of research spend. That comes in at around £5.2 million, which is significantly lower than is spent on other types of cancer. The five-year survival rate for pancreatic cancer is 3%. That has not changed in the last 40 years, despite significant advances in the treatment and survival rates of those with other cancers such as breast and prostate.

There are obviously serious problems, which the Assembly and Government can go some way to address. What can we do? Mr Buchanan said it: greater research funding is needed, along with a campaign for more public awareness of symptoms, as was said. GPs also need to be provided with greater support in their diagnoses — for example, through access to CT scanners. As Ms McLaughlin said, GPs must have in place a proper care pathway to fast-track hospital admissions for diagnosis and specialist treatment.

All that could be conducive to increasing overall survival rates. However, almost as deeply worrying is the international, national and regional differentiation of survival rates. According to a Eurocare study in 2009, the UK survival rate after one year is 16%, which is well behind the European average of 20.9%, with countries such as Belgium having almost double the survival rate of the UK. Most startling is that here in Northern Ireland, the survival rate after one to five years is, at 3%, the lowest of all. As I said, that has not changed. These are obvious failings, which are having a further detrimental effect on sufferers of pancreatic cancer.

The figures speak for themselves, but we must acknowledge the systemic issues and that some of it is our fault. It is without doubt that early diagnosis is paramount to increasing survival rates of patients suffering from

pancreatic cancer. I will underscore Mr Buchanan and Mrs McLaughlin's point again: 48% of pancreatic cancer diagnoses are made at emergency admission, when the cancer is at an advanced stage and it is too late for treatment to effect a cure. In those cases, only 9% survive after one year.

It is evident, from what we have heard, that numerous difficulties exist in diagnosing pancreatic cancer at primary care level. The fact that 40% of patients visit a GP three or more times before a diagnosis also speaks for itself. I refer to a point made earlier: if someone has not visited their doctor for 12 years, an alarm bell or red flag must welcome them on their first visit back, and their subsequent appointment should not be delayed. Mechanisms must be put in place to ensure greater dialogue between primary and secondary care providers. I echo the call for an efficient and effective care pathway to accommodate that.

Over the last number of years, significant attention has been focused on personalised medicine as a method of delivering treatment for cancer patients. There have been advances by organisations such as Cancer Research UK, which has conducted considerable research into tumours, noting in particular how individuals react differently to treatment. That means that patients can receive personalised medicine, and, of course, scientists are continuing to work on developing new drugs and treatments. There obviously needs to be an integrated approach to the delivery of treatment for cancer patients through personalised medicine.

My appeal is that we fully embrace the new, innovative cancer drugs that are available. The SDLP has spent most of this year highlighting the need for greater access to these specialised cancer drugs and, indeed, many —

**Mr Wells (The Minister of Health, Social Services and Public Safety):** I should point out to the Member that all the drugs available to treat pancreatic cancer in Northern Ireland are available without going through the individual funding request (IFR) mechanism. There is no impediment to their access in the Province.

**Mr McKinney:** I thank the Minister for his helpful intervention. Will he clarify whether Abraxane is included?

**Mr Wells:** Yes, it is.

**Mr McKinney:** Thank you very much. I was just about to refer to that. It is helpful that that drug is available to pancreatic cancer sufferers, but it does not take away from my wider point that, for all cancers, greater access to these drugs would, I think, make a difference.

I would like to underscore the point further: if we embrace the cancer drugs model, we could get them free under the Pharmaceutical Price Regulation Scheme (PPRS). That would also underscore our well-established drug development research at Queen's University. I fully believe, having travelled to San Diego in the summer, that there are real economic benefits to be had from embracing that overall model and in having a cancer centre of excellence here. Some years ago, in San Diego, the need for development in that area was recognised and a £5 billion a year economy was created around that. That would help not only pancreatic cancer sufferers but the wider population of cancer patients.

I am conscious that I am almost out of time, so I conclude by saying that we must move on this because another 40 years cannot pass with the survival rate remaining at 3%.

**Mrs Dobson:** I also welcome the opportunity to speak on this motion this evening. It is a sad fact that pancreatic cancer unfortunately does not have the same profile as many other cancers. There is a general unfamiliarity with the disease. Unfortunately, this runs from patients right up to the medical services. Sadly, as the motion says, too often, people are not diagnosed until it is too late. As has already been said, pancreatic cancer is one of the leading causes of death by cancer in Northern Ireland. In fact, according to Pancreatic Cancer UK, it is the fifth biggest cancer killer.

Unfortunately, as we know, the UK's survival rates are some of the worst in Europe. Whilst there have been some improvements in recent years, on the whole, the overall survival rate has barely budged over the past few decades when compared with those of other cancers. This is further compounded when you consider that, overall, people are now living nearly six times longer after cancer diagnoses than was the case 40 years ago, as Mr McKinney mentioned. While mortality for most common cancers is declining, as has been pointed out this evening, pancreatic cancer is set to become the fourth biggest cancer killer by 2030. I think that we need to ask why. With advances in medical research and medication, this should not be the case.

There is no doubt that one issue is public awareness and, in the case of pancreatic cancer, the lack of it. Early detection is key, but unfortunately its symptoms mirror those of a number of much less critical illnesses. That is why tragically so many people are misdiagnosed and miss out on help when they first go and seek it. This also contributes to its frighteningly short survival period of just two to six months from diagnosis. With a one-in-90 chance of getting the cancer and a 95% chance of dying once diagnosed, you can see why it does not attract the same commercial funding for research as the more treatable forms of cancer. This is proven by the fact that pancreatic cancer is responsible for 5.2% of UK cancer deaths but gets only 1% of the National Cancer Research Institute's partners' research spend.

Just because it might not be financially attractive to the drugs companies should not have to mean that research is neglected. For instance, Queen's University is becoming an increasingly significant global leader in tackling cancers. I would like to pay tribute to the vital work that is done there. I ask the Minister today whether, through the support his Department offers to bodies, including the National Cancer Research Institute, pancreatic and other neglected cancers could be prioritised more. One per cent of funding simply is not enough.

*(Mr Deputy Speaker [Mr Beggs] in the Chair)*

Research into innovative pancreatic cancer screening tests should be considered an absolute necessity, especially because of its difficulty to diagnose. The lack of awareness of the cancer is also putting a massive strain on the health service. Many people, as we know, learn that they have the disease only after being admitted as an emergency to their local hospital. As the Minister no doubt will be well aware, often the costs associated with these are huge. By improving awareness among both the public and medical staff, people could be diagnosed earlier and start receiving vital treatment quicker. Conversations need to be held with general practices about additional training that could be beneficial. We need to create a new screening practice. None of this should be impossible to achieve.

The purpose of this motion is rightly to raise the profile of pancreatic cancer. However, I would make it clear that getting this motion in the Order Paper and debated in the Chamber will do nothing unless it is followed up by tangible action. The measure of the Minister will be the action that he takes after this debate is over.

**Mr Deputy Speaker (Mr Dallat):** The Member's time is almost up.

**Mrs Dobson:** For the sake of pancreatic cancer sufferers and their families, now and in the future, I truly hope that the Minister will act.

**Mrs Cochrane:** I, too, welcome the opportunity to contribute to the debate today, which comes before the House at the start of Pancreatic Cancer Awareness Month.

## 6.00 pm

Like many similar campaigns for other types of cancer, this campaign provides an opportunity to celebrate with those who have survived, remember those who have been lost to the disease and raise awareness of the illness. It is also an opportunity for the Assembly to assess our current approach to tackling the disease and whether more can be done to prevent or treat it.

My colleague Naomi Long MP, who has often spoken of her concerns about this devastating illness, recently asked the Secretary of State for Health to provide estimates of the variation in survival rates for pancreatic cancer among UK regions, and the response was telling. England currently has a five-year survival rate of 4.7%; Wales, 5.4%; and Northern Ireland, just 3%, which lags far behind the European average of 6.9%. So, it is clear that there is work to be done.

The motion states that pancreatic cancer accounts for 6% of all cancer deaths in Northern Ireland, and we should note that it is predicted that, by 2030, it will have overtaken breast cancer as the fourth most common cancer killer. We must, therefore, understand the reasons behind that in order to try to improve survival rates. Other Members have already spoken about the fact that only 10% of pancreatic cancer patients undergo curative surgery, or perhaps that should be more accurately referred to as "surgery with curative intent". The main reason for this seems to be that, for many, at the time of diagnosis, the cancer is too far advanced for such surgery to have an impact and, therefore, it is the issue of early diagnosis that requires our pressing attention.

I note that the motion acknowledges:

*"40% of patients visit their GP three or more times"*

before specialist referral, and there is solid data to support that. However, we need to be careful not simply to blame our GPs for being selective about referring patients who present with common and usually benign symptoms. Furthermore, as there is no specific biological marker to indicate the malignant disease, it can be extremely difficult to detect and diagnose pancreatic cancer, especially in its early stages.

In my constituency, East Belfast, patients report high satisfaction with their GPs, despite struggling to access appointments in a context of increasing demand, and I believe that we need to support our GPs in their decision-making and recognise their value as gatekeepers to an overburdened secondary healthcare system. That said, there is an onus on the Minister and his Department to encourage GPs to make use of freely available and validated diagnostic aids; for example, the Macmillan cancer decision support tool, as well as open-learning opportunities that have already been referred to, such as the Royal College of General Practitioners' pancreatic cancer e-learning module. We should also be ensuring that GPs have access to CT scans etc as already mentioned by others in the debate.

Although the motion focuses on boosting early diagnosis to improve survival rates, we should also acknowledge that, even with those improvements, there will still be many who will not reach that five-year survival mark. Therefore, we should also call on the Minister to examine the current practices to ensure that there is optimal support and symptom palliation for those whose illness is terminal.

If we are to reduce the number of deaths due to pancreatic cancer, we must not only work to improve diagnosis but continue to combat the three greatest risk factors: smoking, obesity and excessive alcohol intake. Prevention, as we all know, is better than cure.

**Mr Dunne:** I, too, welcome the opportunity to speak in the debate on what is a very serious issue, and something that continues to have an impact on many families across Northern Ireland. Pancreatic cancer is yet another terrible form of cancer that can often have tragic consequences; it is a cancer that must be taken very seriously. Sadly, this cancer is now responsible for around 6% of all cancer deaths across Northern Ireland, which equates to around 200 deaths per year. It is now the fifth leading cause of UK cancer deaths.

One of the most worrying statistics is that the five-year survival rate of 3% has not improved in over 40 years, while survival rates for other

cancers have, thankfully, increased. There is a real issue with pancreatic cancer, in that it is difficult to diagnose and its symptoms often mirror those of other, less critical, non-threatening conditions. That is why pancreatic cancer has become known as the "silent killer". The fact that this form of cancer affects men and women equally is further confirmation that improvements need to be made in the fight against this terrible condition.

I fully support the sentiment in the motion, which asks the Minister to continue to work towards improving the diagnosis of the condition. Early diagnosis is vital. We need to reduce misdiagnosis across the health sector. The role of our GPs is vital in ensuring early diagnosis. Patients must be encouraged to report any symptoms at the earliest possible stage. It is important that GPs be fully competent in identifying such symptoms.

We need to do all we can to improve pancreatic cancer survival rates across Northern Ireland; the statistic that the average survival rate for a pancreatic cancer patient is just two to six months from diagnosis is shocking. That is largely due to the fact that, by the time the disease is diagnosed, it is often too late for curative surgical treatment. Sadly, about 80% of patients are diagnosed at a point where the disease has seriously advanced.

I pay tribute to and commend the charities and organisations that work with cancer sufferers and their families daily by providing support at such a difficult time for everyone suffering from that terrible condition. It is worth commending the Pancreatic Cancer Research Fund and Pancreatic Cancer UK for the important work that they do in supporting families and patients.

Education is important for improving and better targeting in our communities through public awareness campaigns and outreach programmes to raise awareness of the condition, its symptoms and measures to decrease the risk of pancreatic cancer developing. I recently spoke with a patient who is suffering from that terrible condition and who is undergoing treatment for pancreatic cancer. I urge the Minister to continue to support the funding of drugs for cancer sufferers. That patient is on life-prolonging drugs that are available through the system. We certainly appreciate that. We further urge the Minister to continue with the campaign for drugs in the battle against cancer. It is vital that the Minister focus on that in these difficult times. It is important that that focus remains.

Health promotion and public awareness campaigns that encourage healthier living all have a key role to play in helping to tackle cancer. Encouraging a healthier lifestyle, better diets, more exercise, and reducing smoking and alcohol consumption are all measures that should be worked on and fully encouraged. I support the motion.

**Mr McMullan:** Go raibh maith agat, a LeasCheann Comhairle. I support the motion. I also thank the Member for bringing it forward for debate. Each year in the North of Ireland, pancreatic cancer accounts for around 200 deaths, which is 5.5% of all cancer-related deaths. It is an extremely difficult cancer to diagnose and treat. Symptoms are vague, and they generally appear at an advanced stage of the disease. One of the main concerns is that there is no early diagnostic test available. Three per cent of those diagnosed with pancreatic cancer survive five years or more. Sadly, as Members have stated, that has not changed in 40 years. While this cancer is the fifth leading cause of death and has the worst survival rate of all cancers, survival rates for other cancers have remained steady. Bowel cancer is currently 54%; in 1971, it was 22%. Breast cancer is currently 84%; in 1971, it was 56%. Prostate cancer is currently 88%; in 1971, it was 31%. Those are just some of the survival figures.

What causes pancreatic cancer is not yet fully understood, but certain factors have been identified in the development of the disease. It especially affects people aged between 50 and 80. Smoking is a big one, as are diabetes and stomach ulcers. Although it is the fifth leading cause of cancer deaths and has the worst survival rate of all cancers, it receives only 1% of research spend. Dr Andrew Millar of London Cancer said in September of this year that there has to be a direct link between the lack of funding allocated to pancreatic cancer and the lack of progress in treating the disease.

People have a one in 90 chance of getting this cancer, but they have a 95% chance of dying once diagnosed. Those figures mean that research into pancreatic cancer is less likely to attract commercial funding than the more treatable forms of cancer. The Government need to step up to the plate and give more money to research.

Of the National Cancer Research Institute's 2013 budget, only £5.2 million — just 1% — was spent on pancreatic cancer. Breast cancer got £41 million, bowel cancer got £24.5 million, leukaemia got £32 million and prostate cancer got £21 million. The money spent on

pancreatic cancer research here equates to £625 per death per year compared with £3,426 per death per year for breast cancer. In the past 10 years, when the number of deaths from other cancers has been declining, the number of deaths from pancreatic cancer has been increasing.

As someone who has cancer, I understand how people feel. When you are sat in the room with the specialist and he comes out with that word "cancer", you go into a different world. The one thing that has been missing in the debate today — it is not the fault of Members — is the effect on families. I ask the Minister to bear that in mind. I totally agree with everything that Members have said and are going to say, but please do not forget the families, because they are left to pick up the pieces. The family is devastated when their loved one is diagnosed with cancer and is being treated, and they are grief-stricken when that person dies. There is not enough help for the families; they are left on their own. The man of the house could be self-employed and get cancer. What is he supposed to do? He is left with the prospect no income for the house. All those everyday questions have to be answered by the families on their own. There is movement on that through Macmillan and organisations offering advice, but there needs to be more help for families from the Department.

We need to treat cancer patients in a more humane way. If we have not improved the five-year survival rates in 40 years, there is something wrong. We are still supplying the drugs, as the Minister said, which is good, but there has to be something else. For 1% of the national budget to be spent on research into pancreatic cancer is a disgrace. That is not to say that the rest is going to other cancers; it is not. The more money that goes on research the better, but it is not enough for just over £5 million to be spent on research a year, and other Members will agree.

Minister, do everything you can after this debate, but please do not forget the families.

**Mrs Cameron:** I support today's motion on pancreatic cancer. On many occasions, I have spoken in the Chamber about the need for public awareness, support for our clinicians and an improvement in patient outcomes in the fight against cancer. I thank in particular my colleagues Tom Buchanan and Paula Bradley for bringing the motion before the Assembly this evening.

Pancreatic cancer is equally devastating for sufferers and their families. However, unlike

cancers such as bowel, breast and prostate, the five-year survival rates have remained unchanged, as we have heard, for the last 40 years. Contributing to 6% of cancer deaths, pancreatic cancer is the fifth biggest cancer killer in the UK, and it is expected to become the fourth biggest killer by 2030, overtaking breast cancer.

The lack of awareness and the difficulty in diagnosis has no doubt contributed to the poor survival rates, with only 10% of new patients being suitable for curative surgery due to late diagnosis. It is often the case that the patient has had a period of unexpected weight loss and jaundice prior to diagnosis. Unfortunately, by the time those symptoms appear, the tumour has become too advanced to treat surgically. As a result of the early stages of pancreatic cancer being largely asymptomatic, with the initial symptoms often being mistaken for other illnesses, around 40% of patients will visit their GP three or more times before they are referred to a specialist, with a staggering 16% visiting seven times prior to diagnosis. It is an unfortunate reality that 48% of diagnoses come following emergency admissions to hospital — twice the total of other forms of cancer.

#### 6.15 pm

I apologise for using a great number of statistics, but the disparity between the early diagnosis of pancreatic cancer and other forms of cancer is astounding and can be properly conveyed only in that manner. The one-year survival rate for patients diagnosed during emergency hospital admission currently stands at 9%. For patients diagnosed following GP referral, it is 26%. That statistic alone speaks loud and clear on the need to provide adequate training and support for health professionals in order to improve patient outcomes and, ultimately, survival rates.

As with most cancers, there is a link to our lifestyle choices that cannot be underestimated, with smoking, obesity and diabetes all being identified as contributory factors in the occurrence of pancreatic cancer. We must also take responsibility for improving our diet and general way of life. That said, there is growing evidence to suggest that a genetic link to predisposition to pancreatic cancer may be identifiable, in the same way as the identification of the BRCA2 gene has been instrumental in improving early diagnosis and survival rates for breast, ovarian and prostate cancer in people with a family history. We must invest resources in further research into the p16 gene, which has been identified as a possible faulty gene linked to pancreatic cancer. In

2013, only 1% of the National Cancer Research Institute budget was invested in pancreatic cancer research. Pancreatic cancer research clearly remains neglected, and more must be done to identify those at risk and to diagnose early to improve outcomes.

It is imperative that our GPs and health professionals receive thorough training and support to identify possible pancreatic cancer. In 2013, Macmillan Cancer Support launched an electronic cancer decision support tool pilot scheme that served to assist in the clinical judgement of patients. The tool works through the existing IT system by identifying patients' symptoms and the demography over the past 12 months. It calculates risk and highlights whether further investigation is warranted. That tool would be particularly useful in the diagnosis of pancreatic cancer, as the likelihood is not always immediately apparent and the symptoms can be non-specific. Further to the success of the nine-month pilot, the scheme was rolled out free of charge to all GPs across the UK.

Although the tool does not replace the interaction that a GP will have with his or her patient, it can only serve to enhance the community feel of the GP's surgery, which has to be recommended under Transforming Your Care. It could also lead to earlier diagnosis of difficult-to-identify cancers such as pancreatic cancer, thereby leading to possible surgical intervention and increased survival rates.

**Mr Deputy Speaker (Mr Beggs):** Will the Member draw her remarks to a close?

**Mrs Cameron:** I urge all our GPs to give serious consideration to using the tool in their practice to provide an effective and proven backup to their own clinical experience.

**Ms McCorley:** Go raibh maith agat, a LeasCheann Comhairle. Cuirim fáilte roimh an díospóireacht thábhachtach seo inniu. Cuirim fáilte fosta roimh an seans labhairt air. This is a very important debate, and I welcome the opportunity to speak in it. It is timely that we are having the debate during Pancreatic Cancer Awareness Month, particularly so given the low level of attention given to this fatal illness, which makes up 6% of cancer deaths across the North.

Seo an phríomhcheist sa díospóireacht. The key issue thrown up by the debate is the failure to diagnose pancreatic cancer early enough, which results in around only 10% of sufferers being able to avail themselves of curative

surgery. Cad é go díreach atá ag titim amach anseo? What exactly is happening here? Well, patients are going to their GP. They are complaining of symptoms that are vague and can be caused by many different conditions. They are then being sent away, told that they are OK or that they have got something else. The fact is that they are suffering from pancreatic cancer, and it is not being picked up until it is at a very late stage. In fact, patients are sometimes referred to hospital only after three or four visits to their GP, due to misdiagnosis or failure to be diagnosed at all. That means that people who find out that they have pancreatic cancer are often at a very advanced stage — about 90% of patients, we are told — and beyond the possibility of having curative treatment.

The facts are these: pancreatic cancer is the fifth leading type of cancer on these islands; it has the worst survival rate of all cancers; and it receives only 1% of research spend. When compared with other illnesses, survival rates for other cancers have increased significantly over the years. It is good to hear that, and that is no doubt due to increased awareness among health professionals and the public and because of research investment. However, the five-year survival rate for pancreatic cancer has not changed from 3% since 1971, whereas the picture has changed significantly for other cancers. Since 1971, bowel cancer has seen an increase in survival rate from 22% to 54%. As I say, that is good news. It is also good news that breast cancer survival rates have risen from 56% to 84%. Likewise, the survival rate for prostate cancer has risen from 31% to 81%. It is shameful that, in the same period, survival rates for pancreatic cancer have stayed the same. We can directly relate the increase in survival rates to the funding that has been directed at research. A National Cancer Research Institute graph shows the huge disparity in investment, with breast cancer at one end of the scale receiving £41 million in 2012, and pancreatic cancer at the opposite end receiving a mere £4.5 million.

The situation cannot be allowed to continue. We cannot let people drift to an early death when preventative measures could be taken to help to address the issues. What needs to happen? We need to ensure that appropriate investment is put in place to encourage the development of diagnostic tools for earlier diagnosis and to ensure that pancreatic cancer is placed on a similar footing to other disease research. We need to ensure that the correct training and support is in place for health professionals and GPs to increase early diagnosis rates. We need to know that an

awareness-raising campaign will be put in place so that sufferers of this deadly disease are not destined to be misdiagnosed in the future simply because of ignorance.

I commend the support organisations, which do sterling work to raise awareness of the disease. I commend my colleague Oliver McMullan for his openness and honesty in speaking about the effects of having cancer and how it feels and for raising the issue of family support, which is needed. Mar fhocal scoir — on a final note — I call on the Minister to work with the relevant bodies to introduce measures to ensure that pancreatic cancer survival rates are improved across the North in the future.

**Mr McGimpsey:** Much of what needs to be said has been said. It has been a sobering debate — bleak at times — as we listened to the information coming forward. We must always remember that this is about individuals. Oliver reminded us that pancreatic cancer diagnosis is almost invariably terminal. The five-year survival rate of 3% has been mentioned. That is an appalling figure. When we see that the survival rates for a number of other cancers have improved, it is clear that a great deal of work and investment is needed.

A couple of points are clear. The survival rate is much improved if pancreatic cancer is caught early. There is a difficulty in diagnosis, but, if it is caught by a GP, survival rates improve dramatically in the short term. If patients wait until they are at the point of pain and go to A&E, their chances are greatly reduced. The GP, as the gatekeeper to the service, has a vital role to play. It is about investment in that service, awareness for GPs and specialist training.

It is clear that age, smoking and family history are factors. Therefore, public awareness plays a very important role. The Public Health Agency has a very important role to play, so we need to look at how it can take forward a public awareness campaign.

There is also the issue of research. One of the key ways of improving survival rates of cancers such as bowel cancer and breast cancer is screening. As I understand it, screening is not available for pancreatic cancer at this time. That is an area for research, and it is vital that we look at the opportunities there. The Minister has confirmed that any applicable drugs are already available through our health service.

Given that the figures are so bleak — the five-year and even the one-year survival rates — it would be a serious dereliction of our duty if we were not looking at what we can do with what is

available to us to improve in these areas. It is also about how our health service works and learning from the experience of other parts of the Kingdom, the Republic and internationally in how we go forward to look for some form of screening. We need to find a solution that improves the survival rate and extends life expectancy so that, when individuals get this diagnosis, it is not one that is inevitably terminal in the short term.

**Mr G Robinson:** As a new member of the Health Committee, I welcome the opportunity to speak. I support this very worthwhile motion as it highlights the need for greater public awareness and better diagnosis of pancreatic cancer. The north-west of the Province seems to be harder hit by cancer, and that possibly needs research and investigation.

Even though pancreatic cancer is a particularly aggressive cancer, there are ways to fight it that significantly increase the odds of recovery. Doctors, consultants and other medical staff do their best and must be applauded for the unstinting work that they do, but, sadly, it may not be enough. That shows that there is a need to improve diagnosis techniques and awareness among GPs of the possibility of pancreatic cancer as a diagnosis. Pancreatic cancer does not usually give rise to any symptoms or signs in its early stages. Therefore, GPs have a huge disadvantage when trying to diagnose it. The symptoms can also be a sign of other common illnesses such as pancreatitis, gastritis, gallstones or hepatitis. All this means that patients may end up seeing their GP several times, or being referred for a number and variety of tests, before pancreatic cancer is even considered.

Unlike the majority of cancers, the relative survival rate of pancreatic cancer has improved very little since the early 1970s. Sadly, this can generally be attributed to difficulties in diagnosis. Increasing cancer survival rates must be a major priority. This must start with accurate diagnosis and early treatment to reduce the high death rate. I sincerely hope that the Minister will, as the motion suggests, be able to implement improved and robust guidelines and promote support for our GPs. By doing this, we can reduce the number of misdiagnoses, improve survival rates and have a positive effect on those in Northern Ireland who suffer from pancreatic cancer.

**6.30 pm**

**Mr Wells:** First, I pay tribute to Mrs Kerry Irvine, who, by her perseverance, has ensured that the

issue has been raised in the Assembly. It is a fitting tribute to her husband Noel that the issue is receiving such serious attention in the Chamber.

I welcome the debate to acknowledge Pancreatic Cancer Awareness Month and highlight issues relating to what is, frankly, a dreadful illness. I was shocked when I heard from Mr Buchanan that 24 people pass on every day in the United Kingdom as a result of pancreatic cancer. That is a truly shocking statistic. Each year, around 8,500 people in the United Kingdom are diagnosed with pancreatic cancer. According to the Northern Ireland Cancer Registry, in 2012, 244 people were diagnosed with pancreatic cancer in Northern Ireland. Frankly, even more shocking is that 243 died. Those are very worrying statistics. One of those who died was Adrian Patterson, a church elder in my church and a family friend. He got the terrible news that he had pancreatic cancer, and it was very quickly established that his condition was terminal.

Pancreatic cancer is the fifth most common cause of cancer death, causing 5% of all cancer deaths in the United Kingdom each year. The shocking statistic — there is no other word for it — that has been quoted by almost every Member who has spoken is that, in the 1960s, the rate of those with pancreatic cancer who were alive in five years was 3% and the survival rate now in Northern Ireland is still 3%. That is a truly dreadful statistic.

On my second day in office, I announced in the Assembly that, for the first time ever, Northern Ireland had passed a very important milestone and that there were more people alive with cancer after five years than had passed on. I am delighted to say that I got that wrong. It is not after five years but 10 years that 51% of cancer sufferers are alive. There have been tremendous successes in identifying cures for cancer in many fields. I quoted the example of leukemia. When I was a child, 82% of leukemia sufferers passed on, and now 82% of children with leukemia are alive after 10 years. That is a remarkable achievement. Unfortunately, pancreatic cancer is one of the cancers for which there has been no improvement of any note in the last four decades

I hope that Pancreatic Cancer Awareness Month will result in more patients seeking medical advice at an earliest possible stage of the disease. As Members will be aware, the Public Health Agency has an awareness campaign for the signs and symptoms of cancer. We believe that that is a key factor in detecting cancers early and increasing the

chances of successful treatment and survival. We are very much where we were with ovarian cancer and exactly the same principles have been established. I was very taken by the comments of the honourable Member for South Antrim Mrs Cameron who mentioned the fact that survivorship is so much better when the diagnosis is made by a GP rather than in a crisis situation during an emergency admission to hospital. By that stage, of course, it is often far too late. The Public Health Agency is working on a new cancer awareness public information campaign, and that work is well advanced.

I take the point that was made by the Chair about having a dedicated campaign for pancreatic cancer. The difficulty is that we have 21 main serious cancers in Northern Ireland, and it would be difficult to justify having 21 separate campaigns. I know that Una Crudden is very keen that we have a specific bespoke ovarian cancer campaign. My mind is not closed on that, but I can certainly see technical difficulties with doing that and doing it in a way that does not cause confusion among the public.

A stakeholder engagement session was held on 8 May and was attended by fifty representatives from the community, voluntary and charity sectors, who looked at the evidence and rationale to support the development of a cancer awareness campaign. The PHA was then tasked to complete qualitative research that aimed to establish the public attitudes, knowledge and awareness of cancer signs and symptoms. I am afraid that the key findings are not encouraging. They highlight that the awareness of cancer signs and symptoms is relatively low among our population in Northern Ireland. They also highlighted that many people put off going to their doctor because they are afraid of what the doctor may find. That seems to be a particular problem for males in Northern Ireland, who are four times less likely to go to their GP than the ladies. I think that that is something that we, as a gender, will have to address because, unfortunately, we can often present ourselves when it is far too late. There was poor awareness of cancer survival rates in general, and most people had little idea of life expectancy after a diagnosis of cancer. These findings have informed a forthcoming cancer awareness public information campaign, the visible signs of which will commence this month.

Most Members who spoke raised the issue that, unfortunately, the diagnosis of pancreatic cancer presents particular difficulties. No reliable screening test has been developed, and

the symptoms are often absent at the early stage of the disease. When symptoms do present, they are usually non-specific. In other words, they are common to many illnesses and often present at a late stage. Consequently, outcomes are poor for this form of cancer.

To ensure that the best services exist to meet the needs and preferences of people and are accessible to all regardless of where they live, a service framework for cancer prevention, treatment and care was published in February 2011. The framework sets out 52 standards that are common to all cancers in relation to the prevention, diagnosis, treatment, ongoing care, rehabilitation and palliative/end-of-life care for people who have cancer and those who have a bigger risk of developing cancer. A review of the framework is due to take place in 2015-16, and this will inform the way forward in our fight against cancer.

I fully support the efforts that GPs and other health professionals are making in a challenging situation to boost their awareness of early diagnosis, reduce misdiagnosis and ensure that pancreatic cancer survival rates are improved across Northern Ireland. GPs receive training in pancreatic cancer diagnosis in the GP curriculum. This includes interpreting common symptoms, understanding the indications for urgent referral for pancreatic cancer and understanding the risks associated with various symptoms that may indicate pancreatic cancer.

Most diagnosis of pancreatic cancer occurs in cancer units and in the cancer centre at Belfast City Hospital, and people are then referred to the regional multidisciplinary team as recommended by NICE guidelines. If surgery is deemed appropriate, it is carried out at the Mater Hospital in Belfast. As several Members indicated, only 15% of sufferers actually benefit from surgery because often it is simply too late to do anything at that late stage. Systemic anti-cancer treatments are provided in the Belfast cancer centre, and the decision as to whether surgery is appropriate is entirely clinical. Where surgery is not deemed appropriate and the disease is advanced, the only treatment may be referral to a specialist palliative care nurse. While acknowledging the particular difficulties associated with identifying the early symptoms of pancreatic cancer, which can be non-specific and common to a range of illnesses, I look to researchers and clinicians to advise on how best to improve pancreatic cancer referral guidelines in ways that are practical and evidence-based.

Belfast City Hospital is a major research centre for cancer, and there are close links between the Belfast Trust and the universities, including academics and clinicians. The Northern Ireland cancer trials centre and network enables patients and others from across Northern Ireland to participate in clinical trials of potentially beneficial prevention strategies, diagnostics, treatments and care. Currently, almost one fifth of patients newly diagnosed with cancer in Northern Ireland participate in clinical trials.

Since 2000, Belfast has had a successful pancreatic cancer clinical trials portfolio. The completed trials have led to major publications, thereby adding to the global knowledge available to clinicians who are treating pancreatic cancer. At a wider level, a new health and social care research and development strategy for Northern Ireland is nearing its public consultation stage.

At this point, I will clarify something that I said to Mr McKinney the Member for South Belfast. At the moment, all NICE-approved drugs for pancreatic cancer are available in Northern Ireland, but we anticipated a NICE decision in October of this year on the particular drug he mentioned. That has not happened, so we expect the final guidance on the drug to be published in January 2015. I will write to him and provide full information about that because it is quite a complex situation. I can tell you that the NICE-approved drugs that are there already are available and are not one of the 40 where there has been considerable debate and which come under the IFR process.

I want to clarify the situation, because he raised a very valid point. I will write to him on that important issue.

My Department funds the core staff and facilities of the Northern Ireland Cancer Trials Centre and the Northern Ireland Cancer Network through the regional Health and Social Care research and development fund. That support enables trusts to benefit from research funds provided by cancer charities or industry, for example, but does not specify the types of cancer on which research can be conducted. So, although the predominant cancers studied in Belfast are breast, prostate and colon, which reflects the expertise and experience of Northern Ireland researchers, clinical studies involve many types of cancer.

Many Members raised the issue of the paltry amount of money, in the overall scheme of things, that is dedicated to pancreatic cancer, compared with breast cancer, say, which is not

to decry the wonderful efforts being made in that field. It is unfortunate that we are not giving a condition, which, in 20 years' time, will, unfortunately, be very high up the fatalities league table, the attention that it deserves.

The fundamental discovery research led by academics is funded from a wide variety of sources and is relevant to all cancers and their prevention. In February 2014, the previous Health Minister launched the Northern Ireland fundraising group of the Pancreatic Cancer Research Fund (PCRF). To date, the Pancreatic Cancer Research Fund has supported 27 research projects in the UK, with grants totalling £4 million. All of that was raised through fundraising and donations. Its mission is to defeat pancreatic cancer by funding and promoting innovative, world-class research into the disease — research that will lead to the development of more effective detection, diagnosis and treatment.

A report published recently by the National Cancer Research Institute, which analysed the research funding by UK Health Departments and charities over the 10-year period, 2002-2011, showed that research funding for pancreatic cancer increased significantly over the period from £1.5 million to £5.1 million. However, many Members have said that they do not believe that that is enough.

Several new pancreatic cancer trials are being set up, including funding support from Cancer Research UK. They involve potentially beneficial new drugs to be used alone or in combination with radiotherapy.

It is unfortunate that Oliver McMullan is not here, as I would have paid tribute to him for his very honest and personal account of his journey with cancer. He indicated the importance of support for patients and families. In Northern Ireland, pancreatic cancer patients and their families can access support in several ways, regardless of whether they find themselves in the early stages of the disease or at the latter end of their life. That support applies from diagnosis through treatment and aftercare. The Northern Ireland Cancer Network provides a booklet of cancer services for patients, carers, families and friends that details local charities with support groups and services. As I mentioned, the PHA is developing a cancer awareness campaign that aims to alert the population to key signs and symptoms of cancer. It will also encourage people with symptoms suggestive of cancer to seek medical advice promptly. Further campaigns run by organisations such as Pancreatic Cancer UK are often UK-wide and targeted at specific

cancer audiences. The population of Northern Ireland is also able to benefit from those.

I welcome the awareness month and hope that the resulting publicity will lead to more people seeking advice at an earlier stage of the disease. Whilst acknowledging the particular difficulties associated with identifying the early symptoms of pancreatic cancer, which are non-specific and common to a range of illnesses, I look to researchers and clinicians to advise on how best to improve pancreatic cancer referral guidelines in ways that are practical and evidence-based. I fully support the efforts of GPs and other health professionals to boost early diagnosis rates, reduce misdiagnoses and ensure that pancreatic cancer survival rates are improved across Northern Ireland. Frankly, if we are somewhere in the league table just below Bulgaria, a lot certainly needs to be done.

Illnesses such as pancreatic cancer wreak a devastating toll on patients and their families, but, through investing in research and raising public awareness, I hope that progress will be made to improve diagnosis and treatment for this horrendous disease. I congratulate the Member for West Tyrone Tom Buchanan on raising this very serious and important issue. I hope that the publicity attached to the debate will encourage people who have the symptoms to go to their GP and that we can encourage greater investment and research into this terrible condition.

#### 6.45 pm

**Ms P Bradley:** I thank my colleague Tom Buchanan for bringing the motion forward today. I also thank him for asking me to countersign the motion. I welcome the opportunity to speak on this important issue. I commend Mr McMullan for what he had to say today. He, like some others in the Chamber, knows what it is like to receive a cancer diagnosis and knows how that affects not only the patient but the family of those who receive a diagnosis. We all know that it is a very traumatic time for the individual and the family.

To get a late diagnosis, especially of pancreatic cancer, is extremely bad. It has been evidenced that often patients who receive a diagnosis of pancreatic cancer are already very far advanced in the disease, and, often, palliative care is their only option. That is devastating for the patient and their family. The sad fact is that pancreatic cancer has not had any improvement in long-term health outcomes over five years, and, as has been said here, it still only receives 1% of research funding.

Doctors also tell us that, in regard to any cancer, early detection is key to beating the disease. We have seen how early detection has improved survival rates for breast and prostate cancer. Unfortunately, the way that pancreatic symptoms present means that it is often missed, while other avenues and causes of the symptoms are investigated. Doctors tell us that the location of the pancreas in the body, the general nature of the symptoms and the lack of diagnostic tools for them to use all play an important part in late diagnosis. We must work hard together to ensure that we reduce these reasons and that people become more educated about the symptoms of this form of cancer.

A late diagnosis means that often potential treatment protocols are no longer a viable option for many sufferers. Only 10% of patients receive curative surgery. That means that 90% of patients do not. Statistics are often very easy to glance over, so let me be a little bit more explicit: if all 108 Members of the Assembly were diagnosed with pancreatic cancer today, only 10 would be diagnosed in time for curative surgery to be an option. That shows the hard reality and the stark facts of this deadly disease and how it affects so many people in Northern Ireland and the United Kingdom.

I do not intend to go over all that everyone has said, but I want to make a few points. Some of the statistics that have been voiced here today are very stark. As Mr McGimpsey said, the debate is very sobering when we look at how many people die in our Province from this deadly disease. The interesting fact that the Chair brought up was that 48% of diagnoses were made through emergency admissions. Surely that is not how we should diagnose anyone with cancer. What was even more stark was what Mrs Cameron said, which was that there was only a 9% survival rate from that. There needs to be much more public awareness, much more awareness from our GPs, and those toolkits need to be in place to assist our GPs in making diagnoses.

I remember the many debates that we have had in the Chamber. We have had debates on cervical cancer and the HPV vaccine. We have seen a real increase in the uptake of that by our young women of school age, and I would like to see young men get that also. We have had debates here on ovarian cancer, and the Minister brought up Una: what a difference she has made and what a difference those debates made to the lives of people who were suffering from the various cancers. We have also seen great work in the Public Health Agency when it

comes to breast cancer and prostate cancer and how that has made such a difference in people's lives. That goes to prove that, when we work together in the Assembly, we can work together for the better to make differences in people's lives. Mrs Dobson brought up the point that it is all well and good us being here and debating an issue but there has to be follow-through on it. We all believe that it is something that is worth fighting for. Therefore, we want to see follow-through. As members of the Health Committee, which most of us here are, we will be intent on saying that.

I spoke to Mr Buchanan during the debate and asked him exactly how many people in Northern Ireland die from this dreadful disease. He said that, in 2012, there were 244 and 243 the following year. That led me to think about the fact that we have passed Halloween and are heading towards Christmas, and we are doing the countdown — at least I am. I thought about all those empty chairs around the table at Christmas, if we are looking at in and around 240 people dying every year in our wee country. All those families this year will be grieving for their loved ones. Mrs Cochrane said earlier that, when we talk about Pancreatic Cancer Awareness Month, we are not just talking about diagnostics and treatment but thinking about all those people who have lost their life because of the disease.

I want to make it clear that I believe that we can reduce the number through good work, through work in the Department, through work with GPs and through work with the public. Let us make this Pancreatic Cancer Awareness Month worthwhile, and let us get a grip on this cancer in the Northern Ireland Assembly.

*Question put and agreed to.*

*Resolved:*

*That this Assembly notes that November is Pancreatic Cancer Awareness Month and that the disease is the cause of approximately 6% of all cancer deaths across Northern Ireland; regrets that only approximately 10% of pancreatic cancer patients undergo curative surgery as most patients are not diagnosed until the cancer is too far advanced for such treatment; acknowledges that 40% of patients visit their GP three or more times before being referred to hospital and that many patients begin treatment for other illnesses before they are diagnosed correctly; and calls on the Minister of Health, Social Services and Public Safety to work with service providers and relevant professional bodies to introduce new, improved and robust pancreatic cancer referral*

*guidelines and to promote training and support for GPs and other health professionals to boost early diagnosis rates, reduce misdiagnosis and to ensure that pancreatic cancer survival rates are improved across Northern Ireland.*

*Adjourned at 6.52 pm.*





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