

→ *His Beatitude* *2/10*

**WESTERN** AREA BOARD HEADQUARTERS  
HEALTH AND SOCIAL SERVICES BOARD



*- 2 OCT 1998*  
*Dallo*

DEPT. OF HEALTH  
AND SOCIAL SERVICES  
*11380/9* 28 SEP 1998  
RECEIVED  
THRD: DIRECTOR'S OFFICE

SEP 22 1998

*175/0419/061*

28 SEP 1998 TJF/cm

24 September 1998

Mr P Simpson  
Chief Executive  
HSSE  
Dundonald House  
Upper Newtownards Road  
BELFAST  
BT4 3SF

*N Mc Grath*  
*We need to process this quickly* *js 28/9*  
Mr Simpson. I assume that you will take this into  
the consideration already being given to the Sperrin  
Lakeland document. We will need to form an early  
view of the need to bid for resources from DfP  
both in year + in the PE period of the CSR.

*Paul*

Dear Mr Simpson

**REPORT ON COSTS ASSOCIATED WITH THE OMAGH BOMB**

*28/9/98*

You will be aware that on a visit following the Omagh bomb, the Secretary of State, when being briefed on the background to the incident, requested Mr Mills, Chief Executive of the Sperrin Lakeland Health and Social Care Trust, to prepare a report on the aftermath of the bomb, particularly its impact for the injured, the bereaved and the wider community.

Mr Mills contacted the Board and a working group was established to develop the attached response 'Road to Recovery'. There has been extensive involvement of Health and Social Services agencies and voluntary/community bodies in the development of the paper. The work of the group has now been completed and, consistent with the wishes of the Secretary of State, the report has been sent to Dr Mowlam and been copied to Mr Gowdy.

In order to formally seek agreement to the funding of the costs associated with the incident, I, as General Manager of the relevant Board, am submitting the document in order to agree how these matters can be taken forward.

You will note that we have built the analysis around the direct costs incurred in the immediate and short-term, medium-term and long-term timeframes. The tables detail not only the costs incurred by the Trust but by other Providers outside Sperrin Lakeland and you advice on how these will be addressed would be important.

The impact of the incident on the Family Practitioner services will be reflected, not only with increased attendances at surgery, but also in terms of increased prescribing. Costs in this area have had to be projections as the effect of the bomb on the community continues to emerge literally on a daily basis.

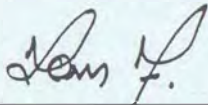
15 Gransha Park, Clooney Road, Londonderry, N. Ireland BT47 6TG.  
Telephone: L'Derry (01504) 860086 (14 Lines)  
Fax. No. (01504) 860311



One final issue which may need to be drawn to the Minister's attention relates to the effect on our Waiting List Initiative as inevitably we have had to direct significant resources to the immediate aftermath of the bomb.

I trust you find the report 'Road to Recovery', a basis on which we can open discussion but should you wish any clarification, do not hesitate to contact me.

Yours sincerely



---

T J FRAWLEY  
GENERAL MANAGER

cc Mr H Mills, Chief Executive  
Executive Directors, WHSSB  
Mr C Gowdy, Permanent Secretary



# Report on costs associated with the Omagh bomb



**WESTERN**

Health and Social Services Board

September 1998



## CONTENTS

SECTION		PAGES
1	Introduction	1 - 2
2	Executive Summary	3 - 5
3	Summary of Costs	6 - 7
4	Direct Costs to Sperrin Lakeland Trust	8 - 12
5	Costs Incurred by Providers other than Sperrin Lakeland Trust	13 - 14
6	Impact on Local Family Practitioner Services	15 - 16

## INTRODUCTION



## INTRODUCTION

Sperrin Lakeland Health and Social Services Trust and the Western Health & Social Services Board have prepared a paper on the Health and Social Care Services response to the bomb in Omagh on Saturday 15th August 1998. That paper describes the resources required in the short to medium term.

The purpose of this paper is to analyse the identified costs by financial year and provide an estimate of the financial implications in the longer term in relation to supporting victims of the bomb.

## EXECUTIVE SUMMARY



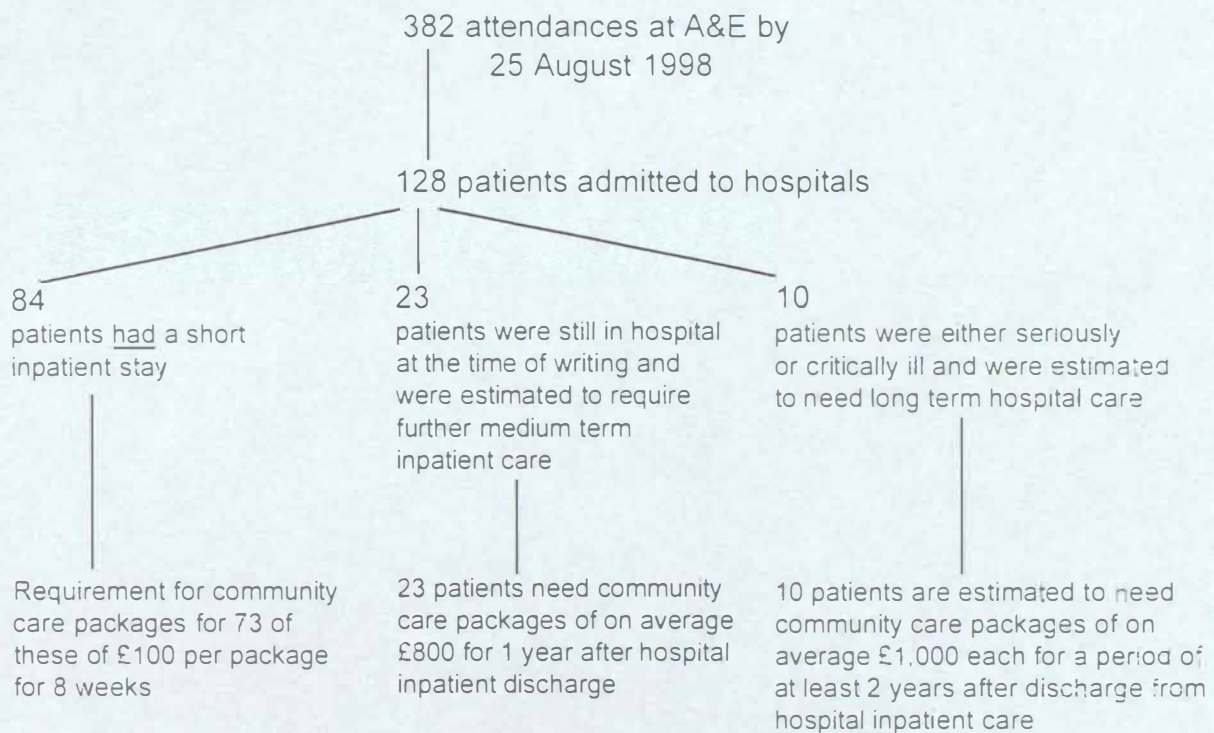
## EXECUTIVE SUMMARY

A bomb in Market Street Omagh on Saturday, 15 August 1998 led to the deaths of 29 people and 2 unborn children. 25 families have been bereaved, 3 in Buncrana, 2 in Spain and 20 locally.

Over 380 people were affected. Of that number about 60 have been significantly injured and at the time of writing 6 remain critically ill. Many other people in the wider community have also been affected.

The financial impact of the Omagh bomb incident on the acute hospital and community health and social care services has been estimated in the immediate/short (within 2 weeks), medium (within 6 months) and long term (greater than 6 months).

### 1 Acute and Community Health Care





## **2 Psychological & Social Care Support To The Community**

The psychological and social care needs of the community will be dealt with in a structured framework as detailed in research.

Prioritisation will be as follows:

- 1 The bereaved and physically injured
- 2 Witnesses - both rescuers and non-rescuers
- 3 Professional personnel
- 4 Dispersed victims
- 5 General community

There is evidence that 10%-30% of those directly affected by the bomb will require further treatment for conditions such as Post Traumatic Stress Disorder for up to 2 years after the incident.

## **3 Family Practitioner Services**

General Medical Practitioners in the Omagh area will find an increase in activity over the next year. There will also be a change in drug prescribing patterns over the year following the atrocity.

Further background information on the build up of costs is available through Sperrin Lakeland Trust and WHSSB.

## SUMMARY OF COSTS



**SUMMARY OF COSTS**

**1 Direct costs to Sperrin Lakeland Trust**

	Total £'000	1998/99 £'000	1999/00 £'000	2000/01 £'000	2001/02 £'000
Immediate/Short Term	522	522			
Medium Term	645	645			
Long Term	3,959		1,879	1,040	1,040
Other Costs	330	165	165		
<b>TOTAL</b>	<b>5,456</b>	<b>1,332</b>	<b>2,044</b>	<b>1,040</b>	<b>1,040</b>

**2 Cost incurred by providers other than Sperrin Lakeland Trust**

	Total £'000	1998/99 £'000	1999/00 £'000	2000/01 £'000	2001/02 £'000
Short Term	559	559			
Medium Term	233	233			
Long Term	264		88	88	88
<b>TOTAL</b>	<b>1,056</b>	<b>792</b>	<b>88</b>	<b>88</b>	<b>88</b>

**3 Effects on Family Practitioner Services**

Increased attendances at medical practices and changed drug prescribing profile are likely as a result of this incident. However, costs resulting from these changes are not included in this document.

**4 Summary of Overall Costs**

	Total £'000	1998/99 £'000	1999/00 £'000	2000/01 £'000	2001/02 £'000
Sperrin Lakeland	5,456	1,332	2,044	1,040	1,040
Other Providers	1,056	792	88	88	88
<b>TOTAL</b>	<b>6,512</b>	<b>2,124</b>	<b>2,132</b>	<b>1,128</b>	<b>1,128</b>

**DIRECT COSTS TO SPERRIN LAKELAND TRUST**



**DIRECT COSTS TO SPERRIN LAKELAND TRUST**

**Immediate and Short Term Expenses**

1	Salaries and Wages during the "Emergency Period"	£000 116
	Goods and Services during the "Emergency Period"	40
	Equipment	75
	Total Anticipated Cost	<hr/> 231
2	<b>Trauma Team</b> Within days of the bomb the Trust established a multidisciplinary community Trauma Team, which includes social workers, a nurse, a psychologist, a cognitive behaviour therapist and an occupational therapist and includes appropriate support mechanisms.	
	Total Anticipated Cost	291
	TOTAL	<hr/> 522 =====

**Loss of Scheduled Work**

In the immediate period after the bomb, Sperrin Lakeland Trust cancelled the following hospital elective work:

Outpatients	193
Day Cases	28
Inpatients	26

Research states that staff performance can drop to 80% or less in the following weeks and months.

It is difficult to predict at this stage what impact a loss of productivity will have on the Trust's capacity to deliver on its original service and waiting list targets.



Medium Term Costs

1	<u>Hospital and Community Health Care</u>	£000
	• 150 occupied bed days at an average cost of £1,200/week	26
	• 248 patients who received A&E treatment will require outpatient and community health services (at a marginal rate)	25
	• 73 of the patients who were short term inpatients will require community health care packages of £100 per week for 8 weeks	58
	Total Anticipated Cost	<u>109</u>
2	<u>Social and Psychological Care</u>	
	• Resources to address community psychological needs	48
	• Secondary Mental Health Services	68
	• Children's Services	51
	• Voluntary Sector Support	200
	• Staff support from Occupational Health	47
	• Training at various levels for health and social care staff, and personnel from other agencies and bodies	22
	Total Anticipated Cost	<u>436</u>

Rehabilitation Facility

The refurbished facility would act as an essential focus for the Professions Allied to Medicine. It would represent the quickest and most cost effective means of increasing capacity and optimising delivery of high quality rehabilitative services to ensure effective early rehabilitation and best outcomes.

Total Anticipated Cost 100

TOTAL 645  
=====



Long Term Costs

		£000
1	<u>Hospital and Community Health Care</u>	
	<ul style="list-style-type: none"> <li>• 23 patients are still in hospital and on discharge will require community health care packages at an average weekly cost of £800 for 1 year.</li> </ul>	
	Total Anticipated Cost (1999/00)	957
	<ul style="list-style-type: none"> <li>• 10 patients are still seriously or critically ill at the time of writing. It is estimated that on average they will have an estimated inpatient stay of 1 year at an average cost of £1,500 per week.</li> </ul>	
	Total Anticipated Cost (1999/00)	780
	<ul style="list-style-type: none"> <li>• These 10 patients will require community care packages on discharge from hospital, estimated to cost £1,000 per patient for 2 years after discharge.</li> </ul>	
	Total Anticipated Annual Cost (2000/01)	1,040
	Total Anticipated Annual Cost (2001/02)	1,040
2	<u>Social and Psychological Care</u>	
	Continuing from Medium Term, this year effect:	
	<ul style="list-style-type: none"> <li>• Community Psychological Needs</li> <li>• Secondary Mental Health Services</li> <li>• Children's Services</li> </ul>	48 68 26
	Total Anticipated Cost (1999/00)	142
<b>TOTAL</b>		<b>3,959</b>

**SUMMARY OF ANNUAL COSTS**

	£000
1999/00	1,879
2000/01	1,040
2001/02	1,040
<b>TOTAL COST</b>	<b>3,959</b>

Other Costs

Evaluation and Review £000

It is vital that a comprehensive record of events from Saturday, 15 August is compiled. This should follow the incident from the immediate aftermath, to the medium and long term effects. This document should deal with all aspects of incidents including health, social care, voluntary agencies and other agencies involved in the care and recovery of patients and the community.

Total Anticipated Cost 140

Increased Sickness Rate

Total Anticipated cost of covering one third of increased sickness rate. 190

TOTAL -----  
330  
=====



COSTS INCURRED BY PROVIDERS  
OTHER THAN SPERRIN LAKELAND TRUST

**COSTS INCURRED BY PROVIDERS OTHER THAN  
SPERRIN LAKELAND**

	Short £000	Medium £000	Long (pa) £000	Total £000
Ulster Community & Hospitals HSS Trust	67	116		183
Royal HSS Trust	161			161
NI Ambulance Service HSS Trust	150			150
Greenpark HSS Trust		107		107
Altnagelvin HSS Trust	87			87
NI Blood Transfusion Service	45			45
Armagh & Dungannon HSS Trust	18	10	10	38
Belfast City Hospital HSS Trust	31			31
Foyle HSS Trust			78	78
<b>TOTAL</b>	<b>559</b>	<b>233</b>	<b>88</b>	<b>880</b>

- RVH has also made a bid for lost income due to cancelled elective surgery

	No of Cancelled Operations	Cost £000
Cardiac	17	110
Neuro	10	30
Plastics	8	16
<b>TOTAL</b>		<b>156</b>

- BCH have identified costs incurred when they took over the RVH take-in rota.

	<b>£000</b>
Total Anticipated Cost	15

**Details of Other Elective Surgery Cancelled:**

- **Altnagelvin HSS Trust**  
Orthopaedics 10                      General Surgery 6
- **Ulster Community & Hospitals HSS Trust**  
1 Major Complex
- **Armagh and Dungannon HSS Trust**  
General Surgery 12



IMPACT ON LOCAL  
FAMILY PRACTITIONER SERVICES



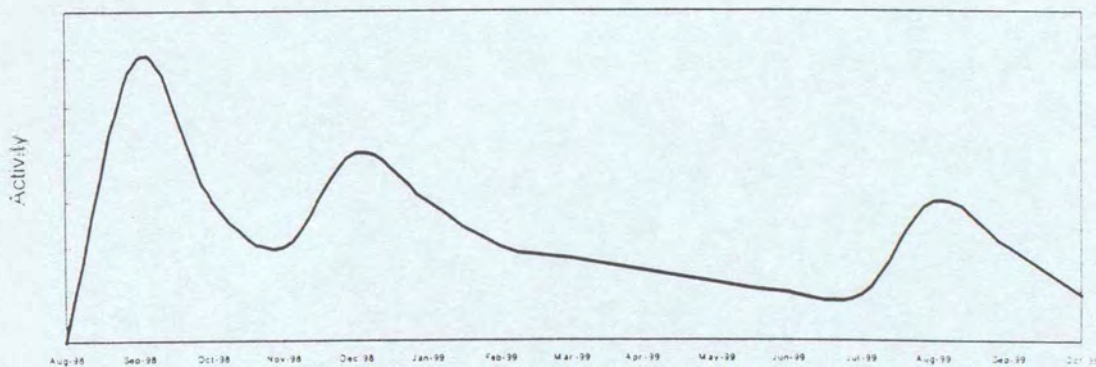
### IMPACT ON LOCAL FAMILY PRACTITIONER SERVICES

Local General Medical Practitioners in Omagh and its surrounding areas have to date experienced increased attendances at their surgeries and in home visits since 15 August.

This has been quantified in the first two weeks as 2,000 extra attendances. Evidence suggests that there will be a gradual decrease and the number of people attending will approach the baseline. It should be noted that evidence also shows that there will be a rise in attendances again four to six months after the event ( which coincides with the Christmas period ) and again on the 1st anniversary of the event.

The graph below is a representation of the way activity is expected to vary over the next 12 months.

Illustration of anticipated impact of Omagh bomb on FPS Activity



It should be noted that the drug prescribing profile for practices within the Omagh area may vary significantly for specific drug types over the next 12 months also.

No costs are included in this document in relation to any of the above.