

STATES OF JERSEY



PROPOSED GOVERNMENT PLAN 2024- 2027 (P.72/2023): COMMENTS

Presented to the States on 6th December 2023
by the Health and Social Security Scrutiny Panel

STATES GREFFE

COMMENTS

Background

The proposed [Government Plan 2024-2027](#) was lodged on 19th September 2023 for debate in the States Assembly on 11th December 2023.

Similar to last year, the Council of Ministers lodged several additional documents alongside the Government Plan as part of the ‘Government Programme’. The Government Programme consisted of the [Ministerial Plans](#), the Government Plan 2024-2027, and the [Annex](#) to the Government Plan. In contrast to last year’s documents, all the documents were published on the same day, which was welcomed as it allowed for more effective scrutiny.

The Panel’s approach to scrutinising the Government Plan 2024-2027

This year, it was agreed by the Scrutiny Liaison Committee that each Panel would focus on the aspects of the proposed Government Plan that were specific to its remit and that overarching themes would be led by the Corporate Services Panel. In this regard, the Corporate Services Panel made a number of overarching recommendations (see Appendix 1). The Health and Social Security Panel agreed [Terms of Reference](#) that were relevant to its remit and began the process of evidence gathering. The Panel requested full business cases for every proposed Revenue Expenditure Growth project and Capital Project that fell under the responsibility of the Minister for Health and Social Services and Minister for Social Security. A list of these new revenue programmes and capital projects can be found [here](#).

In addition to new revenue expenditure growth and capital projects that fall under the remit of the two Ministers, the Panel’s remit also includes four States Funds: The Health Insurance Fund, the Social Security Fund, the Social Security (Reserve) Fund and the Long-Term Care Fund. As such, the Panel’s Terms of Reference 1(e) included the task of determining the impact of the Government Plans proposals on each of these Funds.

Following the lodging of the Government Plan and its Annex and the receipt of full business cases, the Panel wrote to both Ministers requesting additional information on several areas that were of particular interest to the Panel or where further clarification was required. Much of this clarification sought to determine whether the proposed funding for the new projects and programmes is appropriate, likely to have a positive impact on islanders and island life, and is value for money. In addition, the Panel wished to establish whether there were any obvious gaps in funding - where additional revenue had not been requested in this year’s Government Plan for areas the Panel would have expected or hoped to have seen proposals for funding. The Ministers’ responses to the Panel’s queries can be read following the below links:

- [Letter from Minister for Social Security](#), 20th October 2023
- [Letter from Minister for Health and Social Services](#), 20th October 2023
- [Letter from Minister for Health and Social Services](#), 13th November 2023
- [Letter from Minister for Health and Social Services](#), 21st November 2023

In November, the Panel held Public Hearings with both Ministers to question them on specific areas of the Government Plan that fell under their remits. Transcripts from those Hearings can be found [here](#).

The Panel identified several key stakeholders that it wished to request written submissions from in relation to the funding proposals contained in the Government Plan that directly impacted them or the services they provided. A link to the submission that we received from the Primary Care Board on 19th October 2023 can be found [here](#).

Areas of Concern

The evidence that the Panel gathered throughout its review can be found on the links already provided earlier in the Comments paper. Rather than reiterate all of the Panel's findings here, the purpose of the paper is to highlight particular areas of interest or concerns that were identified during its review.

Vaccine Scheme and the use of the Health Insurance Fund

This year's Government Plan 2024-2027 proposes a transfer of £400,000 per year from the consolidated fund to fund a vaccination scheme. In respect of this scheme and the requested revenue expenditure growth, the Government Plan states that, post the pandemic environment, the next step is to remodel and develop the delivery system for COVID and influenza vaccination alongside routine childhood and adult immunisations programmes. It further advises that *"this investment is to focus on the ambition to maintain and improve uptake, enhance resilience by providing capacity and support to manage surges when there is increased demand or unforeseen emerging threats and reduce inequalities associated with accessibility to vaccination for all eligible Islanders."*

In a separate section of the Government Plan, the opportunity to review the organisation and delivery of a range of vaccination services is discussed and it is proposed that further funding is requested from the Health Insurance Fund (HIF) to support this work programme. It confirms that the Health Insurance Law will be amended to reflect this new funding and will be lodged to allow for debate immediately following the Government Plan debate.

On 30th October 2023, the Minister for Social Security lodged the [Draft Health Insurance \(Amendment of Law – Contracts for Administration of Vaccines\) \(Jersey\) Regulations 202-](#). The Regulations seek to provide for new articles which reproduce the existing right to enter into contracts for medical services and create a new right to enter into contracts for vaccination services.

The Government Plan does not provide an estimated figure of how much the Council of Ministers are proposing to transfer from the HIF to finance the new vaccine scheme. The only information available in respect of the funding level is that estimates of the additional costs are included in the "other expenditure" forecasts of £6.2m in 2024, £6.3m in 2025, £6.4m in 2026, and £6.3m in 2027. In addition, the Government Plan does not provide any details of the new vaccine scheme or an indication of how the requested funding from the Health Insurance Fund would be spent. The Panel therefore sought to ascertain this information from the Minister for Social Security and the

Minister for Health and Social Services in the Public Hearings it held following the lodging of the Government Plan.

During both Hearings, it was confirmed that the vaccine scheme would cover 4 main vaccinations: flu, COVID, shingles and meningococcal. It is hoped that the scheme will bring adult vaccinations together into one co-ordinated programme.¹

It became evident to the Panel that the details of the new scheme were in development and a decision had not yet been made on what the scheme would entail and who would be responsible for its delivery. The Minister for Social Security advised:

*In terms of delivery, it has yet to be decided how vaccines are delivered and how we do that most cost effectively to get the best value for our money.*²

In light of this, the Panel was concerned how the level of funding had been determined given the uncertainty about the scheme it was financing. In respect of the £400,000 revenue expenditure growth bid, the Panel advised that £200,000 of the funding would fund a new shingles vaccine and the other half would principally be used to fund ad hoc vaccine awareness campaigns to inform the public and help mitigate the impact of particular health concerns.³ However, the reasons for the proposed funding from the HIF and the calculations used to determine the level of funding were more ambiguous.

When asked how much funding was being proposed to be transferred from the HIF for the purpose of this scheme and for a breakdown of how the funding would be spent, the Assistant Minister for Health and Social Services advised:

*We have not got to that level of detail beyond exploring the possibilities of extracting money from the HIF (Health Insurance Fund). We have not got to that level of detail in regard to the actual amount of funding.*⁴

However, when further pressed later on in the Hearing, and after highlighting that the Minister for Social Security had included an estimated cost of the vaccine scheme at £2m a year in [P.88/2023](#) (Draft Health Insurance Amendment of Law – Contracts for Administration of Vaccines)(Jersey) Regulations 202-), the Director of Public Health advised the Panel that assumptions had been used but that the estimated figures were not accurate⁵. Despite the Assistant Minister for Health and Social Services assuring the Panel it could have sight of these assumptions (which would explain how the estimated figure in P.88/2023 had been calculated) following the Hearing, we were later advised in a letter from the Minister for Health and Social Services:

*Given that delivery methods and commercial arrangements are not yet settled, it is not possible to set out in detail what funding will be required from the HIF over 2024, and the main assumptions upon which such funding will rest.*⁶

¹ [Transcript](#), Public Hearing, Minister for Social Security, 1st November 2023.

² [Transcript](#), Public Hearing, Minister for Social Security, 1st November 2023, p20

³ [Transcript](#), Public Hearing, Minister for Health and Social Services, 3rd November 2023,

⁴ [Transcript](#), Public Hearing, Minister for Health and Social Services, 3rd November 2023, p17

⁵ [Transcript](#), Public Hearing, Minister for Health and Social Services, 3rd November 2023

⁶ [Letter](#), Minister for Health and Social Services, 13th November 2023

In the correspondence, the Minister offered the Panel a private briefing to provide a greater level of detail about this project. However, we were disappointed to be later advised that Officers felt it more appropriate to provide this briefing once commercial arrangements had concluded. It is important to note that the Panel did receive a confidential business case executive summary of the vaccine scheme following the lodging of the Government Plan, however the information was limited, and the Panel was unable to discuss or question the Minister on the information in public. For this reason, the Panel echoes the Corporate Services' overarching recommendation that the Council of Ministers must consider how to improve transparency of the Revenue Growth Allocations by including more detail on the proposals in the Government Plan and by publishing the business cases within the public domain, in a transparent manner, albeit, in a redacted form to maintain confidentiality when required.

Following the Hearing with the Minister for Social Security, the Panel asked for a breakdown of the figure contained in the Government Plan listed as "other expenditure" under the summary of the Health Insurance Fund. It was advised that the £6.295m for 2024 is made up of the following:

	£k
• Vaccinations	2,000
• Jersey Quality Improvement Framework	1,817
• Administration (Management Charge)	1,817
• Primary Care Governance Team recharge	479
• Provisions for Bad Debt	152

As part of the evidence gathering stage of its review, the Panel asked the Primary Care Board about its views regarding the use of the HIF to fund the new vaccine scheme. It became evident in its response to the Panel that Health and Community Services (HCS) were considering two possibilities; that a new vaccine scheme would be delivered centrally by HCS, similar to the Covid vaccines, or that additional vaccines would be delivered through primary care (general practices and pharmacies). The Primary Care Board advised that it was of the opinion that vaccinations should be carried out by general practices and pharmacies (see [Submission](#) for reasons provided). It also confirmed that it would consider it 'inappropriate for the HIF to finance HCS to carry out the service'.⁷

Contrary to this view, both the Assistant Minister for Health and Social Services and the Director for Strategic Policy, Planning and Performance supported the use of the Health Insurance Fund to finance the vaccine scheme. At Public Hearings in November, they advised:

Director, Strategic Policy, Planning and Performance:

*Your point was about the use of the Health Insurance Fund. Vaccination is absolutely a service that should be delivered in the community, to the community and, therefore, it fits well with the other things that it is used for. Who delivers the service is, to my mind, neither here nor there. The point of the fund was to assist people with their primary care needs, of which vaccination is one.*⁸

⁷ [Written Submission](#), Primary Care Board, 19th October 2023

⁸ [Transcript](#), Public Hearing, Minister for Social Security, 1st November 2023, p22

Assistant Minister for Health and Social Services:

What I was saying was that vaccinations, per se, falls squarely within the Primary Care function. To that end, there should not be any obstacles getting money from the H.I.F. (Health Insurance Fund) to fund Primary Care, which obviously all vaccinations are part of that.⁹

In the absence of any details regarding the vaccine scheme, the exact amount of funds being requested from the HIF, and the breakdown of how the funds would be spent, the Panel is unable to provide an informed view of this request. However, it would seem inappropriate to support the proposal to transfer funds from the HIF and subsequent law change without this level of information. Furthermore, the Panel is disappointed that it was unable to receive a private briefing on this matter prior to producing its Comments on this year's Government Plan. The Panel will, however, commit to keeping abreast of the proposed vaccine scheme and reviewing the details when they have been finalised to ensure it will have a positive impact on Islanders, as well as providing value for money.

Recommendation 1: The Minister for Health and Social Services should endeavour to provide States Members with details regarding the vaccine scheme and the intentions of the requested funding from the Health Insurance Fund ahead of the debate of the Government Plan 2024-2027.

The Social Security Fund and the Social Security (Reserve Fund)

This year's Government Plan proposes to reduce the value of the States Grant by £20 million each year from the formula value in 2024 and 2025. The States Grant would then be reinstated in full in 2026 and increased in 2027 by £40 million "*when Government finances are forecast to be in a stronger position*"¹⁰. It is further proposed, however, that the reduced States Grant in 2024 and 2025 would be supplemented by injections worth £40 million over 2024 and 2025 from the Social Security (Reserve) Fund. In 2027, the additional £40 million of Grant funding would be repaid back into the Social Security Reserve Fund.

The Government Plan advises that reducing the value of the grant by £20 million over the next two years "*will allow vital public services to be funded...at a time when overall government finances remain constrained.*"¹¹ Similar to all other elements of public funding, the States Grant is an allocation from the consolidated fund and, in line with the Public Finances Law, the overall allocations from the consolidated fund each year must not exceed the income into that fund. In [written correspondence](#) from the Minister for Social Security, the Panel was advised that the Council of Ministers agreed that it would be appropriate to reduce the Grant to the Social Security Fund on a temporary basis to allow delivery of the full GP24 programme.

Previously, the States Assembly agreed that no States Grant would be paid into the Social Security Fund for 2020 to 2023 to offset the impact of Covid-19 on the Public Finances. During the [debate of P.110/2022](#) (Draft Social Security (Amendment of Law no.17) (Jersey) Regulation, however, the Minister for Social Security affirmed that the Grant would be returned to its full value in 2024 as it was "*an important source of*

⁹ [Transcript](#), Public Hearing, Minister for Health and Social Services, 3rd November 2023, p14

¹⁰ Government Plan 2024-2027

¹¹ Government Plan 2024-2027

funding to the fund to ensure its long-term financial sustainability.” In a Hearing with the Minister in November, the Panel queried why this year’s Government Plan proposes to reduce the Grant by £40 million over the next two years, despite her commitment to the States Assembly in February this year. The Minister advised:

*I think essentially because money is very, very tight in the next couple of years. The Social Security Fund can bear the reduction next year and the year after. We will have the money paid in 2027 so it is simply, as you say, a deferral. Since the debate last year we have had the actuarial reports. The Social Security Fund and the Social Security Reserve Fund are in very, very good health.*¹²

An Actuarial Review ([R.96/2023](#)) published in May 2023 confirmed that the combined value of the Social Security Fund and Social Security Reserve Fund at 31st December was £2.33bn, and was estimated to be over £2.1 billion at the end of 2023. It further stated that the Fund “*remains in good health and are expected to be able to pay benefits out for several decades under a range of scenarios considered.*”

The Panel feels that it is important to highlight that the States Grant to the Social Security Fund has not been paid at its full value since 2015, resulting in a £346m reduction in the amount that has been paid into the Social Security Fund from the Consolidated Fund (see table 1 below).

Grant year	Grant (£m) calculated per formula	Grant (£m) actually paid
2016	69.62	65.30
2017	74.16	65.30
2018	76.61	65.30
2019	78.59	65.30
2020	83.02	0.00
2021	84.03	0.00
2022	71.42	0.00
2023	69.82	0.00

Table 1

Whilst the fund is projected to remain stable over the short term it will decrease gradually in the medium to longer term reaching £0.2bn in 2081 (in 2021 earning terms and under the 325 net annual in-migration scenario). In light of the fact that the States Grant has not been paid in full for 8 years, there is a concern that the decision to reduce the level of funding will continue if Government Finances do not improve. When the Panel asked whether the Minister for Social Security was confident that the Government would be in a position to be able to pay back £40 million into the Social Security Reserve Fund she advised:

I am assured that the forecasts are such that the money will be there in 2027, so it is simply a deferral. We will go back to normal.

On 18th October, Deputy Philip Bailhache lodged an [amendment](#) to the Government Plan which, if approved would mean that £40m is borrowed from the Strategic Reserve

¹² [Transcript](#), Public Hearing, Minister for Social Security, 1st November 2023, p22

to fund the ‘vital services’ referred to on p90 of the Plan rather than deferring £40million of the Social Security Grant from the Consolidated Fund. The Report accompanying the Amendment states:

*This amendment is brought to defend an important principle. The principle is that the monies in the Social Security Fund and the Social Security (Reserve) Fund belong to the Island’s pensioners and prospective pensioners, or to the people of Jersey.*¹³

The Panel is concerned regarding the long-term impact on the Social Security fund if the States Grant is not paid back in full in 2027 and if the Fund continues to be used to finance government services. There is a lack of a detailed breakdown of which “vital services” the deferred funding will support, which makes it difficult to understand both the intentions of the Council of Ministers with its proposal or the implications of this amendment. Nonetheless, the Panel sees the value of Deputy Bailhache’s amendment and the principle in which it intends to defend. We would therefore ask States Members to consider all of the information available to help make an informed decision on this matter.

Jersey Pension Saver Scheme

This year’s Government Plan requests £500,000 to fund the ‘Jersey Pension Saver Scheme’ project. The Annex advises that plans for a new retirement saving scheme for working Islanders who do not have an occupational pension are being developed and that the main details of the scheme will be debated by the States Assembly in Q4 2023. Whilst it was envisaged that the details would be lodged and debated prior to the debate of the Government Plan, this did not transpire. When we queried the reasons for its delay, the Minister for Social Security advised:

*I think just because it’s a very complex subject and it has taken longer than we have liked. Well, not we would have liked. I think I have set a fairly ambitious target and it is a complex thing for the pension scheme.*¹⁴

The Minister also advised that whilst her and her team have a good idea about how they would like the pension scheme to operate, work still needs to be undertaken on how the model will be serviced (how the IT system will work). Furthermore, she acknowledged that conversations with businesses and service providers still needed to take place and a consultation with members of the public undertaken. In correspondence with Departmental Officers, it was confirmed that the Minister’s intention is to take the details of the scheme back to the Council of Ministers in Mid-January for approval and, subject to the outcome, to lodge the proposals in February for debate the week commencing 18th March. The current plan is then to have a second debate at the end of 2024 on the complete policy and legislation.

In respect of the £500,000 that is being requested, the Government Plan explains that it will be used to “ensure the continued development including regulation, legislation, procurement, and the approach and readiness to implement.”

¹³ [Proposed Government Plan 2024-2027 \(P.72/2023\): Amendment, Social Security Grant Funding, 18th October 2023](#)

¹⁴ [Transcript](#), Public Hearing, Minister for Social Security, 1st November 2023, p22

The Panel is disappointed that it was not possible to debate the proposals of the scheme ahead of the Government Plan. The consequence of this being that it is unable to fully support the approval of half a million pounds requested for this project in the absence of any details of what the scheme will entail. However, the Panel will ensure continued engagement with the Minister on this matter and will review the proposals of the Pension Saver Scheme when finalised.

Maintaining the Public Health and Health Protection Function

The Government Plan requests £2.273m of revenue expenditure growth for 'Maintaining the Public Health and Health Protection Function'. It is advised that the funds will pay for the salary costs associated with the existing public health staff, enabling the development of joint strategic needs assessments (JSNA), public health law, delivery of some health improvement services and public health campaigns. The Panel requested a breakdown of the funding for this project which was provided in a [response](#) from the Minister for Health and Social Services in November.

Previous to now, temporary funding for some of the posts within Public Health was made available via the Jersey Care Model (JCM), Building a Safer Society (BASS), and Covid-19 pandemic funding. The Panel was advised that, in order to ensure the continuity of the essential aspects of public health services and the activity developed since 2020, a request for ongoing core funding was necessary.

The Panel recognises the importance of public health in developing policy and strategy, commissioning and delivery public health services, and responding to immediate risks to health. It also recognises that the public health function has grown considerably since 2020 and, therefore, understands the recruitment of additional staff. However, the Panel was concerned regarding the lack of detail about the increase in staffing levels over the last three years.

Last year's Government Plan affirmed that 36 Full time Equivalent (FTEs) would be employed under Public Health in 2023-2026, compared to the proposed 61 FTEs described in this year's Government Plan for 2024-2027. However, as there is no underlying growth in Public Health FTE proposed for 2024, the Panel wished to understand the substantial increase between this year's staffing figures and next years and the teams in which these posts are situated. In a letter from the Minister for Health and Social Services on 21st November we were advised that there are currently 51.5 FTE posts (including 4 vacancies) which are funded through core Public Health funds, departmental transfers from HCS and JCM, BASS, and Covid-19 pandemic funding. It was further advised that the proposed 2024 FTE of 61, as described in the Annex of the Government Plan, is comprised of:

- 32 FTE for the core public health team¹⁵;
- 11 FTE for reducing preventable diseases;
- 5 FTE for the Child Harm Team¹⁶;
- 3.5 FTE for the Health Protection Team¹⁷; and

¹⁵ Of which 11 roles are currently funded through Covid-19 monies in 2023

¹⁶ Historically these FTE arose from transfers from the HCS to Public Health in prior years

¹⁷ Historically these FTE arose from transfers from the HCS to Public Health in prior years

- 9.5 FTE to support existing major incident recovery posts¹⁸

The Panel was informed that figures contained in the Government Plan 2023-2026 were subject to the information and assumptions for the year ahead that was available at the time and, as needs changes throughout the year, FTE figures were also subject to change.

The Annex to the Government Plan contains a service analysis for the Cabinet Office which includes a near-cash expenditure figure of £7.374m in 2024 for the public health function. The Panel notes that this figure has increased significantly from the 2023 figure of £3.576m included in the Government Plan 2023-2026. Following a request for a breakdown, the Panel was advised that the figure comprises of:

- 1) £3,768,000 existing as previously funded:
 - £1,026,000 core public health budget
 - £1,380,000 reducing preventable diseases budget.
 - £1,056,000 for childhood immunisations (previously in HCS)
 - £306,000 for health promotion (previously in HCS)
- 2) £2,273,000 as expenditure growth (request under the ‘Maintaining the Public Health and Health Protection Function’) covers functions previously funded by the JCM, BASS and Covid budgets, which have enabled the development of public health delivery programmes and a Health Protection Function.
- 3) £899,000 as expenditure growth is to support the major incidents recovery programme. The programme is administered by Public Health, but the funding will be used cross-government, to establish a Major Incident Support Team (MIST) and to deliver psychological support, health checks and long-term health and wellbeing monitoring in response to the ongoing health and wellbeing needs of Islanders impacted by major incidents.
- 4) £434,000 (£400,000 for the ‘Vaccine Scheme’ project and £34,000 service transfer) for elements of vaccination costs such as IT.

In respect of this revenue expenditure growth, the Government Plan provides very limited information about the request for a substantial amount of funding. Whilst the Panel acquired a greater understanding of the proposals through its requests for further information, there are gaps in the details provided. It is still unclear, for instance, as to exactly how many existing FTEs the requested money would fund, despite the Panel requesting these specific figures.

Recommendation 2: Ahead of the debate of the Government Plan 2024-2027, the Minister for Health and Social Services must provide details of how many existing public health staff the requested monies under the revenue expenditure growth “maintaining the public health and health protection funding” will fund.

Recommendation 3: The Minister for Health and Social Services should ensure that, going forward, all the relevant and vital information is provided to the Panel at the very

¹⁸ 5 FTE are for the Major Incident Support Team (MIST) and 4.5 FTE for supporting and delivering long-term monitoring, health checks, and psychological support to Islanders. While the roles are expected to sit within other public bodies, Public Health will administer the funding going forward.

beginning of its review to allow for a more thorough and accurate examination of the Government Plan proposals.

Growth Bids not Included in the Government Plan 24-27

Breast Cancer Screening

The Panel is aware from the Minister for Treasury and Resources' response to a written question ([WQ.371/2023](#)) that a number of growth bids for projects were proposed but the decision was taken to not include them in the Government Plan. One of those that was put forward by the Minister for Health and Social Services but was not successful was "Breast Cancer Screening". Given the recent publication of Jersey's first Cancer Strategy, the Panel was disappointed that this growth bid was rejected by the Council of Ministers. In its Public Hearing with the Minister, the Panel sought to understand the reasons behind this decision. We were told:

I think with everything there is a prioritisation exercise that is needed and what we have done through our bids for our programme this year is we have tried to secure the investment that we possibly could to focus on some of the priorities that we have identified. That does not mean to say that we will not be stepping up efforts to make the case for improving screening overall, and this will be a key element of our health strategy going forward.¹⁹

In regard to the impact of this decision on breast cancer services, the Panel was assured that screening for breast cancer would still continue. However, without additional funding HCS can only deliver the same service as it does currently and are unable to improve and expand the prevention and detection of breast cancer through an enhanced breast screening offer.

The Minister did express her disappointment that funding wasn't secured for this particular area in the Government Plan but committed to undertake work in 2024 to ensure that funding is provided next year. The Panel shares the Minister's disappointment that extra funding was not requested this year for this extremely important service. It will monitor this matter throughout next year to make sure that acquiring funding for improved screening remains a priority.

Recommendation 4: The Minister for Health and Social Services must ensure that funding is identified in 2024 to improve and enhance the breast cancer screening service.

Free Medical Dressings

In its [Comments](#) on the Government Plan 2023-2026, the Panel recommended that the Minister for Health and Social Services and the Minister for Social Security worked collaboratively in 2023 to identify funding for the provision of free medical dressings for all patients. The recommendation was made following a failure to request funding from the 2023 Government Plan, despite the previous Minister for Health and Social Services' commitment earlier that year. Following questioning from the Panel, the Minister for Health and Social Services and the Minister for Social Security advised that

¹⁹ Public Hearing, Minister for Health and Social Services, 3rd November 2023

the necessary steps would be taken to ensure funding was made available in the future for the provision of free medical dressings:

The Minister for Social Security:

It is something we are aware of and that it will need consideration and possibly a growth bid or a funding bid to get more money²⁰

The Minister for Health and Social Services:

One of the things that I have said is that I will bring this forward with the Minister for Social Security because it is again this anomaly about where the money comes from. This is part of the sustainable health funding model that we want to address.²¹

The Panel was again disappointed to learn that, whilst the Minister for Health and Social Services had put forward a bid for funding for this provision, the Council of Ministers decided not to commission a business case for funding for medical dressings. We queried this decision with the Minister and was advised:

Again, it fits in the pattern of discussions around prioritisation and I am really alive to the fact there are a number of patients in the community who are experiencing difficulties and hardships in relation to this. This is going to be a conversation that I have with the Minister for Social Security again about what we can do to provide a solution to this. We have not been able to identify that for the context of putting it in this year's Government Plan but I can assure Islanders that there is really something that is very important to me to try and resolve in the same way that the breast screening and the prevention services is.

On 20th November 2023, Deputy R.S. Kovacs lodged an [Amendment](#) to the Government Plan which, if adopted, would allocate funding of £1m per year from the Health Insurance Fund to Family, Nursing and Home Care for the medical service and supply of medical hosiery and wound dressings for their patients. Deputy Kovac lodged an amendment to her Amendment on 30th November. The proposal intends to support the original document but includes controls over the suggested funds allocated and plans for subsequent years. The Panel will be supporting the revised Amendment and the proposed funding for the provision of these vital items and would encourage States Members to do the same.

Conclusion

The Panel supports the overarching recommendations made by the Corporate Services Panel and their objectives to improve transparency, accessibility and accountability. Notwithstanding some of the constraints this Panel has faced regarding availability and accessibility of information, the Panel has examined the material available and identified a number of key issues which it has addressed throughout this paper.

Overall, the Panel has been frustrated with the lack of details available on a number of the projects contained within the Government Plan. Not only does this not allow for effective Scrutiny, which would enable the Panel to draw informed conclusions, but it

²⁰ [Transcript](#), Public Hearing with the Minister for Social Security, 10th November 2022, p19

²¹ [Transcript](#), Public Hearing with the Minister for Health and Social Services, 7th November 2022, p20

also leaves States Members in a position where they are being asked to approve funding in the absence of essential information.

The Panel found there to be inadequate information regarding the proposed vaccine scheme and the intended use of requested funds contained in the Government Plan. In the absence of information about the scheme and a breakdown of how the proposed funding from the Health Insurance Fund would be spent, it would be inappropriate to support the transfer and the subsequent law change. The Panel recommends that the Minister for Health and Social Services endeavours to provide States Members with details regarding the vaccine scheme and the intentions of the requested funding from the Health Insurance Fund ahead of the debate of the Government Plan 2024-2027.

The Panel also found that the Government Plan contains insufficient information regarding the funding requested for maintaining the public health and health protection function. Whilst the Panel's requests for further information helped improve its understanding of how the funding would be utilised, gaps remain in the details provided. The Panel recommends that in advance of the debate of the Government Plan, the Minister for Health and Social Services provides States Members with details regarding the number of existing public health staff that are to be funded under this growth request. The Minister should also ensure that, for future Government Plan reviews, all relevant and vital information is provided to the Panel at the very beginning of its review to ensure for a more thorough and accurate examination of proposals.

The Panel was disappointed to learn that a growth bid by the Minister for Health and Social Services for 'breast cancer screening' was rejected by the Council of Ministers. The Panel found that without additional funding, the current preventative and detection services for breast cancer cannot be improved. The Panel recommends that the Minister for Health and Social Services identifies funding in 2024 to improve and enhance the current breast cancer screening service.

In relation to the recommendations made within this report, the Panel requests a formal response in writing from the Minister acknowledging the recommendations and to confirm their acceptance, or otherwise. If not accepted, the Panel requests a full explanation be provided in the written response.

Appendix 1 – Overarching Review Recommendations

RECOMMENDATION 1 (OVERARCHING): The Council of Ministers must ensure that in all future Government Plans, all tables include the figures of the preceding year to improve budget comparison, transparency and accountability. Consideration should be given to how narrative for ongoing expenditure and business- as-usual workstreams can be demonstrated within the Government Plan to provide further clarity.

RECOMMENDATION 2 (OVERARCHING): The Council of Ministers should in the Delivery Plans for 2024 and all future Delivery Plans, include narrative of the workstreams of departments, including detail of ongoing expenditure and business-as-usual, so that the Government can transparently demonstrate how taxpayers' money is spent for delivering services and projects.

RECOMMENDATION 3 (OVERARCHING): The Council of Ministers must publish a mid-year progress report in future years prior to the lodging of the Government Plan by the deadline of 31st August each year. The report must include progress updates on all projects and programmes, detail on how the funding has been allocated to date, whether the delivery is on track and to be delivered by the identified timescale and within the budget allocated.

RECOMMENDATION 4 (OVERARCHING): The Council of Ministers must publish within the public domain the annual progress reports provided to Scrutiny Panels by Ministers by the deadline of 31st December of each year to improve transparency and accountability of the Government Plan process for the delivery of projects within the approved funding allocations.

RECOMMENDATION 5 (OVERARCHING): The Council of Ministers must consider how the accessibility of future Government Plans can be further enhanced for members of the public. Consideration should be given to the terminology used (including for the title) and how to improve the comprehension of it and its purpose.

RECOMMENDATION 6 (OVERARCHING): The Council of Ministers must engage with Jersey's Youth Parliament in their capacity as a link between Jersey's young people and Government on the Government Plan process and the purpose of the Government Plan. This should be done as soon as possible after the lodging of future Government Plans so that young people's views can be heard and used to inform any amendment process to the Government Plan.

RECOMMENDATION 7 (OVERARCHING): The Council of Minister must ensure that the child-friendly version of the Government Plan is published alongside the Government Plan and Ministerial Plans for future Government Plans and that appropriate measures are taken to communicate and promote it to children and young people.

RECOMMENDATION 9 (OVERARCHING): The Council of Ministers must for future Government Plans consider how Children's Rights Impact Assessments can be completed on the proposals for which CRIAs should be completed due to their impact on children and young people. This will strengthen the commitment of the Council of Ministers and States Assembly by ensuring that the best interests of children and young people remain integral to the Government decision making process.

RECOMMENDATION 21 (OVERARCHING): All future Government Plans must distinguish the specific areas and projects to which Value for Money savings are attached, include reporting on all Value for Money savings which were made during the duration of the Government Plan and identify and provide full details of the monitoring

process that has been undertaken on the Value for Money Programme during the duration of the previous Government Plan.

RECOMMENDATION 22 (OVERARCHING): The Council of Ministers must consider how to improve transparency of the Revenue Growth Allocations by including more detail on the proposals in the Government Plan and by publishing the business cases within the public domain, in a transparent manner, albeit, in a redacted form to maintain confidentiality when required.

RECOMMENDATION 23 (OVERARCHING): The Council of Ministers must provide to Scrutiny a list of the Revenue Growth bids that were presented to the Treasury and Exchequer, however, were not successful for either business case commissioning and/or inclusion within the Government Plan. This information should be provided to Scrutiny each year at the time of lodging of the Government Plan.