

**WRITTEN QUESTION TO THE MINISTER FOR SOCIAL SECURITY
BY DEPUTY G.P. SOUTHERN OF ST. HELIER
ANSWER TO BE TABLED ON TUESDAY 21st FEBRUARY 2012**

Question

Further to the statistical information relating to the Health Insurance scheme set out in the Minister's Report & Financial Statements 2010 (R.122/2011) –

- i) will the Minister explain why there has been a 25% rise in the number of prescriptions issued over the period 2006 to 2010 given that there was only a 10% rise in the number of persons in the Health Insurance scheme during that same period;
- ii) was the 19% increase in the number of prescriptions between 2007 and 2008 due to the removal of prescription charges in 2008 and what has the cost of prescriptions been over the period 2008 -2010? Will the Minister now work with other Ministers to re-introduce a better focussed, means-tested, prescription scheme in the coming year?
- iii) does the Minister accept that the drop in the number of GP consultations from 393,000 to 344,000 from 2006 to 2010 reflects the fact that for many the cost of GP visits is now so high that many families are putting their health at risk by avoiding their doctor and, if not, how does he explain this trend and what measures does he plan to address the issue?

Answer

- (i) and (ii)

The general trend in modern prescribing practice shows a year on year increase in the number of items prescribed by General Practitioners .This trend is widespread and is not confined to Jersey. The table shows annual increases of 6%, 7% and 4% in the number of items prescribed during the years 2007, 2009 and 2010, compared to the previous year.

Year	2006	2007	2008	2009	2010
Number of prescriptions	1,251,616	1,324,335	1,489,319	1,590,227	1,651,355
Increase compared to previous year		6%	12%	7%	4%

There are two changes specific to Jersey which led to an additional increase in the number of items prescribed during 2008.

Towards the end of 2007, a large number of items were added to the Health Insurance Fund list of approved items to allow access to more specialised medicines for patients who previously could only obtain their medication from the hospital. A course of treatment can now be initiated by a consultant and then continued by the patient's General Practitioner under a shared care agreement. This has led to an increase in the number of items

prescribed and a transfer of cost from the Health and Social Services Department budget to the Health Insurance Fund.

In 2008, the prescription charge levied on patients was removed. In light of the trend mentioned above to prescribe an increasing number of items, a zero prescription charge ensures that those with chronic conditions are able to make full use of all appropriate medication. As has been experienced in other jurisdictions, the zero prescription charges have led to an overall increase in the number of prescription items.

The cost of pharmaceutical benefit is published each year within the Departmental Report and Accounts.

Year	Total cost of Pharmaceutical Benefit
2008	£15.379 M
2009	£16.485 M
2010	£16.703 M

The total cost is influenced by the number of items dispensed and the drug costs associated with those items. The high level of generic prescribing (i.e. prescribing without specifying a particular branded product) by General Practitioners in Jersey has helped to limit the inflation often associated with drug costs. As can be seen from this table, despite the increase in the number of items dispensed, the total cost has risen by less than 9% between 2008 and 2010.

My officers are already working with officers from the Health and Social Services Department on a project to draw up plans covering the way in which pharmacy services are provided in Jersey in the future and how they should be funded.

I am not prepared to consider reintroducing prescription charges without adequate protection for individuals with chronic health conditions.

(iii) The Deputy is right to draw attention to the anomalous General Practitioner visit figures reported on page 74 of the 2010 report and accounts. These are due to a transcription error in a final draft which led to some historic numbers being stated incorrectly in the published version.

I will circulate an addendum with the correct figures. I can reassure Members that the statistical information is provided as an appendix to the Report and Accounts and it does not form any part of the full audited Fund accounts, which are not affected.

The correct figures are as follows:

Year	Number of General Practitioner Visits
2006	346,465
2007	345,645
2008	346,782
2009	366,757
2010	344,054

They show small fluctuations from year to year with the highest value recorded in 2009 - almost definitely as a result of swine flu during that year. Visit numbers will always vary depending on a range of factors including the severity of the winter weather and the timing of outbreaks of common infections. Given these natural, seasonal variations, it is impossible to draw any firm conclusions from a difference of less than 1% between 2006 and 2010. In particular, there is no evidence to suggest that families are avoiding necessary visits to their General Practitioner.