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12 Deputy G.P. Southern of the Minister for Health and Social Services regarding the affordability of wound dressings for those in receipt of a Long-Term Care award and in a residential care home: (OQ.61/2020)

What support, if any, is in place for people in receipt of long-term care awards, in a residential care home, who have insufficient disposable income to afford the correct wound dressing to maintain their treatment in the short or the long term?

The Deputy of St. Ouen (The Minister for Health and Social Services):

Residents of care homes, in receipt of long-term care, do retain a proportion of their income, usually pension income, for their personal needs. If that was to prove insufficient, they can request help through the income support scheme for health-related items, such as dressings. Payments are made as one-off special payments and do not need to be repaid. Either the resident, or the care home, can initiate a request for payment.

3.12.1 Deputy G.P. Southern:

I am aware that this issue has been addressed by the Minister and that there is some funding today to meet that need. Can he state how much is put aside to fund this service?

The Deputy of St. Ouen:

Yes, there is a pilot scheme, which is about to become operational to run until December of this year. Under this scheme, my Department is working with Family Nursing and Home Care to supply medical hosiery to patients with leg ulcers. These are very specialist stockings, so they are not suitable for all wounds, but those diagnosed with a particular condition will be provided with those hosiery items free of charge, whereas previously there was a charge. We have budgeted a maximum of £40,000 a year during this pilot scheme. This is a group of patients with a well-defined need, assessed by a nurse and it is believed this initiative will make a real difference to their condition.

3.12.2 Deputy G.P. Southern:

From the information I have just received, can the Minister clarify that there is limited use of this particular fund, the rest of the bandaging, apart from the specialist leg bandaging, will be paid for and that comes out of the something like £25 a week pocket money that he allocated. That has not been changed for at least 10 years, to my knowledge. Does he consider that the cost of dressings is a significant burden upon these particular patients?

The Deputy of St. Ouen:

I and my Department do recognise a need and it is known that some patients are not able to afford the quality of dressings that would be most beneficial for their condition. That does lead to reduced outcomes for those patients. It also means that the staff treating them in the community feel that they cannot do their job as they would like, simply because there is a financial barrier there. The Department does receive many requests for help with medical items. We try and assess business cases and where a business case can demonstrate that using public money for the most patients receives the most effect, we will try and implement that business case within the constraints of budget. It is an issue. We are gathering data, together with Family Nursing, on how people are dressing wounds. This will always lead to further consideration as to how we might improve outcomes for patients.

3.12.3 Deputy G.P. Southern:

Could the Minister clarify exactly whether he agrees with me that the £25 a week pocket money, which is what people end up spending on these dressings, is inadequate to meet that need?

The Deputy of St. Ouen:

It may depend on the individual need and the individual income. I would accept that £25 a week, if you have specialist medical needs and expensive items sometimes, £25 is not an adequate sum in some cases.