

STATES OF JERSEY



AFFORDABLE ACCESS TO PRIMARY CARE SCHEME (P.125/2019): AMENDMENT

**Lodged au Greffe on 24th January 2020
by the Minister for Health and Social Services**

STATES GREFFE

AFFORDABLE ACCESS TO PRIMARY CARE SCHEME (P.125/2019):
AMENDMENT

1 PAGE 2, OPENING PARAGRAPH –

Delete the words “on, and removes potential barriers to,” and insert after “primary care” the words “by reducing financial barriers”.

2 PAGE 2, PARAGRAPH (b) –

- (1) At the beginning of paragraph (b), insert the words “for the groups identified in (a),”.
- (2) After the words “reducing the patient co-payment”, delete the words “for G.P. consultations”.
- (3) Replace the wording that begins “for patients” through to the end of paragraph (b), with the words “, supporting the development of multidisciplinary services provided in General Practice, which might include expanded roles for pharmacists, nurses, physiotherapists, mental health workers and community support workers; and”.

MINISTER FOR HEALTH AND SOCIAL SERVICES

Note: After this amendment, the proposition would read as follows –

THE STATES are asked to decide whether they are of opinion –

to request the Minister for Health and Social Services, in consultation with the Council of Ministers, as appropriate, to devise a scheme which improves access to primary care by reducing financial barriers for patients who are financially, clinically or socially vulnerable, by –

- (a) identifying and prioritising which vulnerable groups are most in need of affordable access to primary care;
- (b) for the groups identified in (a), reducing the patient co-payment from its current level, supporting the development of multidisciplinary services provided in General Practice, which might include expanded roles for pharmacists, nurses, physiotherapists, mental health workers and community support workers; and
- (c) identifying the appropriate sources for the funding of such improved services;

and to bring a proposition for debate by the Assembly in the third quarter of 2020, in order that such a scheme can be implemented from 1st January 2021.

REPORT

[P.125/2019](#) acknowledges the extensive plans for improving health care delivery described by the Jersey Care Model, but voices concerns that it offers a high-level vision and that in the past ambitions have drifted. Therefore, by making this amendment, the Minister seeks to offer assurance that he will bring forward a scheme to improve financial support for the financially vulnerable, helping them to access General Practice services, and will develop treatment pathways to improve access for the clinically vulnerable.

These amendments to P.125/2019 have been proposed to focus activity on financial vulnerability and to offer flexibility to the timescales for the roll out of multi-disciplinary teams, while maintaining commitment to such teams within the development of primary care.

Multi-disciplinary teams include, as listed in the proposition, pharmacists, nurses, physiotherapists, mental health workers and community support workers. However extensive commitments in respect of access in 2021 cannot be made at this stage until the work of the Health Planners, who are offering support in the development of the Jersey Care Model, has been completed.

The amendment preserves the commitment to bring forward improvements which are funded and that these improvements will be implemented in 2021.

In 2020, the Council of Ministers has stated it will address barriers to primary care for financially vulnerable people. Two schemes are under development, as stated on Page 47 of the Government Plan, which has been adopted by the Assembly. These are –

- the development of a model to support people with diabetes and their access to primary care;
- the development of a model to support access to primary care for financially-vulnerable individuals.

In addition, further work will be undertaken to identify groups who are most in need of additional support, considering financial, clinical and social factors.

Improvements will be rolled out at the earliest opportunity, with new support mechanisms operational in 2021.

Financial and manpower implications

There are no direct additional costs associated with this amendment.