5 Senator S.C. Ferguson of the Minister for Health and Social Services regarding further civil servants to develop Jersey Care Model (OQ.95/2021):

Will the Minister outline the case for the creation of 17 new civil servant posts intended to develop the Jersey Care Model at a cost of approximately £1 million a year to the taxpayer, particularly in light of the fact that the number of civil servants working in health now exceeds the number of G.P.s (general practitioners) in the Island?

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

The Jersey Care Model proposition, P.114/2020, provided an overview of the resource and functional requirements for the delivery and implementation of this 5-year change programme. The key finding in the review was that the delivery requires a rigorous portfolio management approach, including functions such as organisational change, quality improvements, communication and engagement, commissioning in partnership support and must be supported by dedicated resources to ensure the successful delivery of this complex change programme. The programme management costs have been included in the Jersey Care Model funding model and these costs have been agreed by the States Assembly in the Government Plan. H.C.S. (Health and Community Services) undertook a review of existing resources and options for establishing the required resources. The first option was to engage a large consultancy firm. The second option was to establish a dedicated 5-year programme team within the department but that option was considered more beneficial for a huge number of reasons, including the provision of employment opportunities for Islanders. A key to the success of the programme is the establishment of good working relationships with a wide range of stakeholders, including primary care and private and charitable care providers. Establishing this dedicated team on Island will ensure we build up trust and good relationships for the long term.

3.5.1 Senator S.C. Ferguson:

Does the Minister understand that the public feels that the policy his department is following, as demonstrated by the increasing numbers of civil servants, is a move to reconstruct the National Health Service in Jersey with its consequent inefficiencies?

The Deputy of St. Ouen:

We do not have a National Health Service, we have an excellent service which involves charitable providers, private care providers, an independent primary care sector and none of that is threatened by the Jersey Care Model. Indeed, our partnership working with all of those providers will be enhanced. The criticism of previous proposals that started in 2012 under P.82 was that its progress was too slow, that there was not enough work being carried out on it. This scheme that is being established will ensure that we have a rigorous approach to designing and implementing change to enhance the healthcare of Islanders.

3.5.2 Deputy G.P. Southern:

What consideration is the Minister giving to the possibility of expanding the delivery of primary care to, for example, children who are not necessarily in low-income families and those with chronic long-term illnesses? Is he examining, producing primary help either free or at low cost?

The Deputy of St. Ouen:

The supplementation of the costs for primary healthcare are largely a matter to do with the Minister for Social Security, as the Deputy will know. I do not have a budget for that area. But of course we

are always striving to improve healthcare with the partners we work with and that will include healthcare for children and those with long-term conditions. This is ongoing work that is continuous.

3.5.3 Deputy G.P. Southern:

Ongoing work with an outcome to be delivered to this House by when?

The Deputy of St. Ouen:

Work is ongoing with providers, for example, in the field of diabetes care, who have been working well and made very substantial changes with those working in the public service but also in the charitable organisations. That work does not come to the States for debate because it is part of the health remit. Improvements to healthcare just are continuous.

3.5.4 Senator S.C. Ferguson:

Does the Minister not realise that the Jersey Care Model is merely moving some of the costs of health to the private citizen and pretends to reduce the health budget costs and it takes no account of the fact that we are not the United Kingdom?

The Deputy of St. Ouen:

I disagree that the Jersey Care Model is moving at imposing costs on private citizens. That is not referenced at all in the proposition. It was not recognised by a Scrutiny Panel. It is not what this Assembly voted for. This is not an imposition of any sort of other healthcare service, other than the one that Jersey needs and has been supported by this Assembly, including its members serving on a Scrutiny Panel and it is supported as well in the Government Plan as a way to improve Islanders' physical and mental health and their well-being and we are getting on with that work.