

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES
BY DEPUTY G.P. SOUTHERN OF ST. HELIER
ANSWER TO BE TABLED ON MONDAY 26TH SEPTEMBER 2016**

Question

Will the Minister provide Members with the details of plans to raise approximately £600,000 through user-pays charges over the three years covered by the MTFP Addition?

Answer

A detailed analysis and reconciliation of estimated income from user pays charges over 2016 to 2019 was provided to the Health and Social Services Scrutiny Panel in July 2016 and is reproduced below. User pays charges in the MTFP Addition over 2017-2019 largely relate to increasing private patient income, reflecting the proposed establishment of a trading operation, reviews of existing charges and better utilisation of capacity in the laundry service.

The MTFP Addition sets out the following User Pays targets for HSS:

	2017	2018	2019
	£'000	£'000	£'000
2015/2016 User pays	685	685	685
More equitable application of subsidies and means testing, targetting those most in need and miximising income where appropriate	225	425	625
	910	1,110	1,310

More detail on those proposals, including current plans for delivery, are given below.

Current programme

The Safely Removing Costs (SRC) programme focuses on delivering savings through improving efficiencies and productivity, with an overall focus on patient and client safety. Schemes are therefore proposed, investigated, revised and / or rejected on an ongoing basis as detailed work is done. This process is iterative – HSS is committed to delivering the level of reduction in cash limits set out in the MTFP Addition, and continues to work hard to identify the best ways to deliver this.

The summary proposals set out in the MTFP Addition reflected the position at a point in time but these can now be updated to reflect current plans. A key change between the previous and current position is the re-phasing of projects into later years. HSS is still committed to delivering the 2016 cash limit and is identifying non-recurrent means for delivering targets this year while projects are finalised.

Currently, the user pays elements of the savings proposals are as follows. Further detail is set out below the table. Work on these proposals is ongoing and charges will only be amended or introduced where appropriate to do so:

		2016	2017	2018	2019
		£'000	£'000	£'000	£'000
	1 Review travel subsidy policy to introduce more equitable approach	75	150		
	2 Raise Private Patient charges to market rates by establishing a Trading Operation		102	104	108
	3 Review and update hospital policies including those where subsidies / primary care are provided:				
3a	Community dental review		128		
3b	Increase ITU / HDU income target	25			
3c	Charge for homebirthing pool	1			
	4 Review laundry services		150		
	5 Reduce subsidies / introduce more means testing / other efficiency savings				
5a	Private patient prescriptions admin charge		25		
5b	Other review of existing charges (eg scans)	10	50	50	-
5c	Non-recurrent savings in 2016	574	- 574		
5d	Other efficiency savings - to be identified		194	46	92
	By year	685	225	200	200
	Cumulative	685	910	1,110	1,310

- Travel subsidy – review of current policies to introduce more equitable approach which will also improve experience for those with multiple journeys. Expected achievable saving has been revised and (mostly) deferred to 2017 and remains under review.
- Introduce trading operation to allow HSS to raise private patient charges to market rates (rather than the current States policy of cost recovery). No income expected in 2016 as States decision is required to approve the setup of a trading operation. More detailed work on the proposals has suggested future additional income could be £500,000 with £314,000 deliverable by 2019.
- review the community dentistry provision. Review being undertaken by the cross-departmental Dental Action Group – this is ongoing.
 - Increase private patient income target to reflect likely level of activity going forward. This project has been completed.
 - charge for use of birthing pool for homebirth. This project has been agreed.
- Consider options for utilising capacity in the laundry to generate revenue – review ongoing. Pilot work being undertaken in 2016 – will be further assessed and proposals, if viable, brought forward in 2017.
- Wider project on patient prescriptions is ongoing – part of this may see the introduction of an administration charge for private patient prescriptions
 - Review of existing charges for scans and other services. This is due to commence in 2016 and it is expected could deliver additional phased income in 2017 and 2018.
 - Delivery of non-recurrent savings in 2016 to meet existing targets
 - Difference between MTFP Addition user pays targets and current planned levels of user pays charges. HSS continues to seek recurrent additional efficiency schemes to deliver the overall reduction in cash limits.