STATES OF JERSEY



PROPOSED BUDGET (GOVERNMENT PLAN) 2025-2028 (P.51/2024): TWENTY-SECOND AMENDMENT (P.51/2024 AMD.(22)) – COMMENTS

Presented to the States on 22nd November 2024 by the Council of Ministers

STATES GREFFE

COMMENTS

As set out on page 51 of the proposed Budget 2025-28, "Council of Ministers has sought to bring an improved balance between projects intended to grow the asset base and those aimed at ensuring that the Government's estate, digital systems, and wider public infrastructure are an appropriate condition to deliver their crucial purpose."

The proposed Capital programme for IT as detailed on page 61 of the proposed Budget 2025-28, has been developed and agreed with relevant officers across Departments and ensures that critical risks in the underlying Government's digital infrastructure are being addressed as a priority alongside critical frontline systems. The Digital Services Platform Project has been re-scoped (not de-scoped) to focus on core functionality needed to support other systems. The phasing of IT modernisation projects is critical in order to make best use of limited resources and to ensure the foundations of a house are laid first before starting to build the roof.

With this in mind, considerable capital investment has been proposed for major IT upgrades and replacements in 2025 and 2026 whilst work on frontline services for service users has also been included and prioritised, including the Digital Services Platform project. Moving expenditure in this fine-tuned programme of work from one project to another will not realise the benefits of those projects.

The Digital Care Strategy is a key programme focusing on completing the digitalisation of the hospital's electronic patient care record system (EPR) and other systems, providing a much needed foundational layer for a modern and fit for purpose health system for Jersey. Digitisation of paper processes is a must have in today's world to comply with international health and care standards and to be able to transparently report on our health and care services' activity, performance and their quality.

Providing a modern work environment with digital access is a key factor to attract a highly skilled workforce. And the timing is critical, any delay on the current programme will mean, we will be moving into a new hospital building with insufficient digital coverage.

The digital care strategy programme includes elements such as

- Pharmacy drug control systems
- E-referrals
- E-prescribing for oncology drugs
- Specialised EPR modules for various departments such as theatres, Intensive Care, and Maternity

Digital Care Strategy Benefits

As with other jurisdictions who are struggling with the cost of healthcare, Jersey is facing a changing demographic with an aging population with increased co-morbidities and a forecast increase in significant long-term conditions such as dementia. To ensure that the States are able to provide affordable healthcare for the population's changing needs, the digital care strategy programme has been designed to deliver a range of benefits, including:

• Improved patient outcomes, through integrated data, improved access and data driven optimisation of clinical pathways

- Improved workforce efficiency through removal of multiple areas of data entry and digital shift
- Increased use of data and analytics to drive decision making, including operational, tactical and strategic
- Improved clinical risk management, through enhanced visibility.

Impact of Reduced Funding

The digital care strategy programme has made good progress and delivered a range of systems, for example, the electronic prescribing and medication administration system (EPMA) which moved the hospital from paper drug charts to electronic prescribing throughout all inpatient and outpatient departments. This resulted in specific clinical safety improvements related to clinical decision support, medication interactions and allergies. A full list of projects delivered in 2023 and 2024 has been provided to Deputy Curtis in answer to his recent written question (WQ.394/2024)¹.

A range of projects is underway and has been planned for 2025 to continue this positive journey for our health services.

The amendment is in effect a reduction in funding for the digital care strategy programme resulting in a reduction of overall scope and as a consequence will reduce the benefits expected from the roll out of these new systems.

More explicitly, a reduction in funding of the Digital Care Strategy heads of expenditure would result in:

- Halting of Projects: Projects such as e-prescribing oncology would need to be halted, which would compromise clinical safety in an area of high cost.
- Incomplete Implementation of the Hospital EPR system: Some modules essential to the EPR system to realise all benefits through a digitised system would need to be discontinued, such as the patient access platform ('Patient Knows Best') functionality.
- Dual Running of Systems: Continued dual running of paper and digital systems, which is unsafe and inefficient and makes HCS non-compliant with international health standards, such as for oncology prescribing.
- Reduction of Benefits: Reduced digital functionalities will ultimately negatively impact on the realisation of benefits such as workforce productivity, patient outcomes, capacity, patient safety, patient experience and financial recovery.
- Missed opportunity to improve Patient Experience and Reduce Costs: An effective digital transfer and sharing of data with off-island tertiary healthcare organisations and clinicians would result in a reduction of cost and an improvement of patient experience.

Digital Services Platform

Based on the advice of the Government's Chief Information Officer, Ministers are content with the current phasing and allocation of funding for the Digital Services Platform and are assuring Members that the principles for the platform are being progressed and are incorporated into the wider government IT programme.

¹ <u>WQ-394-2024.pdf</u>

Conclusion

Ministers urge Members to reject this amendment due to the negative impact on our health and care services, particularly considering that digital health systems are a key component to drive and enable efficient, transparent and safe health and care services.

The current scheduling of IT capital projects reflects best use of resources and activities to ensure the reliability of frontline systems whilst enhancing operational efficiency and improving service user experience and supporting the continuation of the modernisation of digital health systems for ensuring patient safety.

While opposing the amendment, Ministers are assuring Members that the current phasing and allocation of funding for the Digital Services Platform is not reducing the scope of the project and that the principles for the platform are being progressed and also incorporated into the wider government IT programme.