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Deputy Geoff Southern
Chair, HSS Panel
BY EMAIL

2 November 2022

Dear Chair

Re: Health and Social Security Panel: Review of Government Plan 2023-2026

Thank you for your letter dated 24 October 2022 on the additional revenue expenditure programmes and capital projects relating to Health and Social Services, as proposed in the Government Plan 2023-2026. Please see below responses to your queries.

Departmental Budgets and VFM Savings

- 1. The estimated net revenue expenditure for Health and Community Services (HCS) for 2023 is roughly £18m more than what was estimated for the same year in the Government Plan 2022-2025. Please can you explain the increase.**

The estimated net revenue expenditure for Health and Community Services (HCS) for 2023 is roughly £18m more than what was estimated for the same year in the Government Plan 2022-2025. Please can you explain the increase?

- Annual pay awards agreed in year
- Government Department transfers in respect of services transferring across departments
- Annual inflation
- Efficiency reductions
- New investment in services agreed annually

D25GP20005 - Health and Community Services Reconciliation of Net Revenue Expenditure	Proposed Budget 2023 (£000's)
2022 Base net revenue expenditure budget	229,624
Adjustments to base expenditure and commitments:	
- Inflation for staff costs	5,721
- Departmental transfers	(5,046)
- Inflation for non-staff costs Income Inflation 2.5% + Non-Pay Inflation of 4% Net Total	2,381
Adjusted base net revenue expenditure	232,680
Adjustments for new investments in services	16,234
Rebalancing programme - Value for Money / Efficiency Saving	(1,032)
Net revenue expenditure (near-cash)	247,882

2. Please can you provide a breakdown of the net revenue expenditure of £5.8m that sits under the Chief Nurse?

Description	Budget 2022 (£000's)	Comments
Accommodation	630,828	Net budget taking into account accommodation income and associated expenditure.
Community & Social Services Inspection	96,000	
Chaplaincy	127,585	An ecumenical and multi-faith resource offering spiritual and religious support to patients and visitors of all faiths or none.
Infection Control	489,549	A team of clinical nurse specialists who work across the health and care system to support good practice.
Nursing Support	1,685,019	This is a team that recruits, manages, and deploys temporary staffing for all pay groups except doctors and administration staff. In addition to this the team host and run e-roster for over 2000 staff
Nursing Workforce Development	407,923	
Training	2,446,664	Education department which delivers accredited programmes through the RQF, Nursing and Midwifery programmes at pre and post registration level – degree and Masters level and AHP programmes along with clinical skills
Total	5,883,568	

3. Is it estimated that in 2023 HCS will make £1m worth of savings. Please can you provide a breakdown for this figure.

The HCS efficiency target of £1M is an apportionment of the overall Government of Jersey target for 2023 of £2.86M. The original target efficiencies of £7.14M was reduced in 2023 based on the assumption for inflation at 6.7%, with 4% to be allocated to departments, with the remaining 2.7% used to offset against the rebalancing target in 2023 across the Government of Jersey.

Work continues across all HCS departments to establish the split of the £1M (0.4%) reduction of HCS' annual budget and will be applied following the States Assembly approval of the Government Plan, in December. All proposed efficiency targets are reviewed and agreed with HCS' Executive team prior to implementation to ensure there is no negative impact on the delivery of care and patient safety.

4. How much of HCS's net revenue expenditure (£247,000,000) goes towards supporting primary care services?

a. Please provide a breakdown of this funding:

Service	Budget 2022 (£)	Service description
Primary Care and Prevention	1,318,460	Support the care-coordination, primary care governance and operational oversight and partnership working with our Primary and Community Care providers.
Jersey Doctors on Call (JDOC)	311,620	Out-of-Hours services.
Shelter Trust Community Healthcare	50,000	General Practitioner led clinics for Shelter Trust's residents.
Subsidised Product Scheme	1,200,000	Dietary, Urinary, Continence and Stoma product subsidy for persons living in the community.
Primary Care Services Total	2,880,080	
Community Based Services	11,347,170	Includes: Jersey Hospice Care, MyVoice, Family Nursing & Home Care, Jersey Alzheimer's Society, Communicare, Eastern good Companion's Club, Brook Jersey, MIND Jersey, Headway Jersey, Age Concern Jersey, Listening Lounge and Silkworth Lodge Jersey.
Primary Care and Community Services Total	14,227,250	

Additional Revenue Expenditure

On-boarding Clearances I-HCS-GP23-0001

Health and Community Services - New Revenue Expenditure Growth						
Allocated or Held	£'000		2023	2024	2025	2026
in Reserves	Reference	Description	Estimate	Estimate	Estimate	Estimate
I-HCS-GP23-001	On-boarding Clearances		115	115	115	115

5. We note that the costs of DBS checks are no longer being met by Customer and Local services, hence the bid for additional funding within HCS. Are you able to advise why this decision was made?

The cost of DBS checks has always been recharged to departments by Customer and Local Services. The change of DBS supplier was approved by the Government of Jersey's Executive Leadership Team, as the new supplier provides additional pre-employment checks, such as employee references and credit checks (role dependant).

Placements and Off-Island Medical Care I-HCS-GP23-002

Health and Community Services - New Revenue Expenditure Growth						
Allocated or Held	£'000		2023	2024	2025	2026
in Reserves	Reference	Description	Estimate	Estimate	Estimate	Estimate
I-HCS-GP23-002	Placements and Off-Island Medical Care		5,000	5,000	5,000	5,000

6. We are advised that the demand for specialist mental health and adult care placement services in the UK continue to rise. Can you please provide us with a breakdown of numbers for 2021 and 2022, to date.

The original request for funding of £6.68m was in respect of four areas of care however, following COM, a decision was taken to reduce to £5m and the remaining 2023 pressure was then apportioned across the business cases as shown in the table below which provides an analysis of funding by area.

COM Approved				
Business Case	2023 Original £000s	2023 Amended £000s	Variance	Comments
Tertiary Care	3,000	2,234	766	
MH ON & Off Island Placements	805	600	205	
Social Domiciliary Care	2,800	2,086	714	
Returns from Off Island	80	80	-	
Placements and Off-Island Medical Care business case	6,685	5,000	1,685	Reduction of £1,685

- Tertiary Care - £2.23m Hospital funding for the physical health care requirements for specialist services and medical conditions not available on Island
- MH ON & Off Island Placements £0.6m Mental Health placements both on & off island.
- Social Domiciliary Care £2.1m for the increases in on-island care
- Returns from Off Island - £0.08m for an individual with learning disability and complex needs returning to Island from a long-term UK placement

Mental Health and Adult Care Placements

Total Number of Off Island Placements	2021	2022
Mental Health	24	26

In 2021, there were a total of 24 people who were placed in UK mental health placements. Some of these were for the duration of the year, others for only periods of it. In 2022 to date, there have been 26 people placed in UK placements – this is expected to rise slightly by the end of the year.

Off-island mental health placements are made when specialist provision is required that is not available in Jersey – generally, this tends to be either secure / forensic hospital placements, highly specialised placements (such as eating disorders or personality disorder services) or for the provision of ECT.

Increase in placement costs / expenditure are not solely linked to an increase in number of actual placements. Increased costs more frequently tend to relate to a high level of complexity and requirement for enhanced nursing care - especially in people with a significant eating disorder and associated physical health risks, or those who present as a significant risk of harm to themselves or others during the initial stages of the admission – and related increased lengths of stay.

7. Can you advise of the reasons for an increase in unit costs for placements on-island and why the increase was not foreseen?

Staffing pressures I-HCS-GP23-005

Health and Community Services - New Revenue Expenditure Growth						
Allocated or Held	£'000		2023	2024	2025	2026
in Reserves	Reference	Description	Estimate	Estimate	Estimate	Estimate
I-HCS-GP23-005	Staffing Pressure		2,007	2,131	2,171	2,221

There are a number of factors that have resulted in increased costs for placements on-Island, they include:

- Care providers increasing their costs in year (particularly as a result of staffing pressures, and delivery costs associated with COVID-19 and Brexit)
- Increased in complexity of some community-based placements
- Increased costs as a result of lack of access to residential packages (due to increased demand) resulting in prolonged nursing or domiciliary care packages being required.
- Whilst some of these increases were potentially predictable, some others – such as the increasing pressure and challenges across the care system, and the resultant increase in demand and complexity – were not.

8. The Panel understands that it has been estimated that in 2022 37,548 shifts will be covered by temporary staff. Please can you confirm how many temporary staff are currently employed by Health and Community Services and the areas in which they are employed.

HCS have different categories of temporary staff that are being deployed. Agency Nurses and Locum Allied Health Professionals are based on headcount. Registered Nurses and Health Care Assistants on the bank are available as required to cover shifts.

Temporary Staff Type	Number of
Agency Nurses	75
Locum Allied Health Care Professionals	39
Registered Nurses (Bank only)	42
Health Care Assistants (Bank Only)	308
Total	464

Deployed across (as required):

Acute Assessment Unit	Interventional Radiology	Renal
Ass. Reproductive Unit	Learning Disability Service	Robin Ward
Bartlett Ward	Maternity	Rozel Ward
Beauport Ward	Older Adults Community Mental Health	Speech and Language Therapy
Beech Ward	Oncology	Samarès Ward
Corbiere Ward	Orchard House	Sandybrook
Crisis Team	Pathology	Special Care Baby Unit
Diabetes Team	Pharmacy	Sorel Ward
Dietetics Team	Physiotherapy	Surgical Floor

Emergency Department	Plemont Ward	Talking Therapies
Home, Treatment & Liaison	Radiology	Theatres
Intensive Care Unit	Rapid Response	

9. Funding has been requested for this project for every year of the Government Plan. When do you foresee a solution to resourcing challenges being found?

HCS and the Government of Jersey have various programmes of work currently ongoing to address the contributing factors of the staff resourcing challenges. The initiatives are:

- Response to the Hugo Mascie-Taylor report
- Skills and workforce strategies
- Wellbeing events
- Counselling services for HCS staff
- A programme of culture, engagement, and wellbeing improvements

Whilst HCS can react to issues within the Department’s remit, there are underlying Island-wide issues contributing to HCS’ staffing issues such as the cost of living and availability of suitable housing.

10. In what ways do you intend to expand wellbeing support?

The main wellbeing support that will be provided to HCS staff through this business case, is the continued provision of low intensity psychological support services for the staff of HCS; of which there are approximately 2,600. Two Counsellors were seconded to HCS from the Mental Health Team and, due to their success and ongoing requirement, this provision is needed on a permanent basis.

Indirect wellbeing support will be provided through the creation of a Business Support Officer (BSO) post, who will support the Director of Culture, Engagement and Wellbeing in the development and delivery of a programme of culture, engagement and wellbeing events and initiatives for HCS. The BSO will help to support the continuation of the following initiatives which have commenced in 2022:

- ‘Wellbeing Week’ for HCS staff which saw staff attend a variety of wellbeing focussed events and sessions.
- Quarterly ‘Ask the Exec’ sessions have also begun which see Executives asked questions from HCS staff in the Halliwell Theatre, enabling staff to raise any concerns they may have directly.
- Monthly ‘Breakfasts with the DG (Director General) for staff nominated by their line manager
- Establishment of a Social Committee for coordinating events, quizzes, book clubs and sport teams.
- Standalone HCS ‘Our Stars’ event to recognise and celebrate the dedication and success of HCS staff

Planned wellbeing initiatives for 2023 include:

- Schwartz rounds, which will provide a group reflective practise forum giving staff from all disciplines an opportunity to reflect on the emotional and social aspects of working in healthcare.

11. The business case identifies the need for 4 additional FTEs to support the accommodation service. If funding is approved in the Government Plan, do you intend to begin the recruitment process for these posts immediately?

Yes, recruitment will commence when funding is approved.

Mental Health Development and Gender Pathway

Health and Community Services - New Revenue Expenditure Growth							
Allocated or Held		£'000	2023	2024	2025	2026	
in Reserves	Reference	Description	Estimate	Estimate	Estimate	Estimate	
I-HCS-GP23-007		Mental Health Development and Gender Pathway	685	1,127	1,127	1,127	

12. We note that some of the funding requested will be used to make temporary roles that commenced in 2022, permanent. Please can you provide further details regarding the temporary roles which you are intending to make permanent.

Please note that the temporary roles, which commenced in 2022, for which recurrent funding is being requested, were submitted within the 'Essential Recruitment' business case, not the 'Mental Health Development and Gender Pathway' business case – which is requesting new roles for the Adult Mental Health Team.

The below table shows the temporary posts commenced in 2022, which are being requested within the 'Essential Recruitment' business case:

Post	FTE	Grade
Director of Mental Health and Adults Social Care	1	SPOT
Consultant Pharmacist	1	CS13
Medicines Optimisation Technician	1	CS08
Staff Grade Psychiatrist	2	SGR
Total	5	

Essential Recruitment I-HCS-GP23-008

Health and Community Services - New Revenue Expenditure Growth							
Allocated or Held		£'000	2023	2024	2025	2026	
in Reserves	Reference	Description	Estimate	Estimate	Estimate	Estimate	
I-HCS-GP23-008		Essential Recruitment	1,063	1,058	1,061	1,058	

13. In a letter to the Panel, dated 10th August 2022, you advised that HCS were working to identify options for funding a bereavement midwife post. In the previous Panel's review of Maternity Services, it was recognised that a specialist bereavement midwife was necessary to ensure that families were receiving the best support possible during and after such difficult times. Please can you advise why a bid growth was not put forward in the Government Plan for this post?

HCS are supportive of part-funding a specialist Bereavement Midwife post and are looking at ways to do this within existing resource, given the very low number of deaths. In addition to which, we will be training all midwives in this area, which will be a responsibility of the Specialist Bereavement Midwife to do - to ensure every member of staff has a level of knowledge and understanding of the needs of families post a bereavement.

Capital Projects

Learning Difficulties – Specialist Accommodation

14. Please can you provide a breakdown of the estimated expenditure for 2023.

The spend profile for this project, Aviemore Relocation to Rosewood House, is currently not agreed as the project is at the planning stage. This, in part, is due to the current unknown availability to access the St Saviour campus (Rosewood House) due to ongoing project works - by others. The anticipated total project cost is in the region of £6.5M with a proposed start on site being 30/3/2023, with handover programmed for 22/5/2024. This is reflected in the reprioritisation of budget across 2022 – 2025. This information is current being worked on and will be confirmed before year end.

15. The previous Government Plan estimated a total expenditure of just over £4m for this capital project for 2023. Why is the estimated figure in this year’s Government Plan significantly reduced (£1.7m)?

a. If due to a delay of works, please explain the reasons for the delay and the new timeframe for completion of the works?

This is linked to the above-mentioned project and response. The Aviemore Relocation to Rosewood House project has been seriously impacted by the delay in the delivery of the Clinique Pinel / Rosewood House project, currently on site, by others. The proposed project cannot start on site until works at Rosewood House are completed. This is reflected in the reprioritizing of budget across 2022 – 2025. Proposed delivery period 30/03/2023 to 22/04/2024.

Orchard House

16. Please provide a breakdown of how the £449,000 requested funding for Orchard House will be spent.

Area of Expenditure	Cost
Cashflow in 2023 (Payment of retentions)	£149,000
Estimated outturn cost	£300,000
Total	£449,000

17. How much of the total funding for this project (£8.6m) has been spent to date?

As of the 26 of October 2022, £6,069,725.97 of the allocated budget has been spent.

Health Services Improvements Programme

18. Please provide a breakdown of the proposed funding of £5m for 2023.

Due to the nature of the hospital environment, the proposed schedule of works has to be fluid and able to react to clinical demand, accessibility and change. The below listed projects have been identified as areas requiring part of the £5M funding but, they have yet to be confirmed and are subject to change. As with every year, the demand outweighs budget and deliverables. The below listed projects have been collated on a Red Amber Green (RAG) risk basis.

Maternity	Community Sites
Inpatient Ward Improvements (Rayner, Bartlett, Sorel, Beauport) 2/4 TBC	Dental Chiller Replacement
Non-Clinical area upgrades	LED Lighting upgrades
Fire Compliance / Fire Damper / Door / Alarm upgrades	DDA Audit Actions
Water Management / Compliance (tanks, taps, basins)	External (Building fabric) H&S
A-Septic Suite Ventilation upgrades (inflation labs)	Minor Works Packages
Cold Room replacements (hospital kitchen freezers)	Professional Fees
Ad-Hoc Emergencies	

In-Patient/Support Services Refurbishments

19. Last year it was advised that the funding allocated to this capital project in 2021 and 2022 had been transferred to 2022 and 2023. Is this the case?

This is correct. Due to the pandemic, the proposed Assisted Reproduction Unit (ARU) relocation project was postponed, and funds transferred. With the former Les Quennevais School now identified as a future health facility, the ARU suite will now relocate to Overdale. Funding will be reprioritised to suit other In-Patient needs.

20. How much to date has been spent on this capital project?

Reprioritised need has seen £500,000 of funding allocated to the fit-out of Clinique Pinel / Rosewood House projects.

21. It was also advised last year that a clinical model/strategy was required before any additional funding could be requested for this project. Has that model/strategy been completed? (p82 of S.R.19/2021)

No additional funding has been requested, to date, for this bid and therefore no clinical model / strategy developed.

Digital Care Strategy

22. Please provide a breakdown of the funding requested for this project in 2023 (£5.3m).

a. Please specify how much of this funding, if any, goes towards supporting/enhancing primary care digital systems

The Digital Care Strategy plans to spend the £5.3M across the following projects in 2023:

- PAS & Acute EPR Release 1 (remaining)
- PAS & Acute EPR Release 2
- PAS & Acute EPR Release 3
- EPMA (remaining)
- Cancer Screening FIT Programme (remaining)
- GP Order Comms (remaining)
- Teleradiology (remaining)
- VNA Phase 2
- Care Partner Replacement
- Ophthalmology EPR
- E-Consent for surgical procedures
- Cervical cancer screening
- Scantrack replacement
- Planning is underway, with workshops over the next two weeks to allocate the budget across the projects, but the majority will be spent on Release 1, 2 and 3 of the PAS & Acute EPR.

23. Can you please explain why the funding proposed for this project in this year's Government Plan is significantly more than what was estimated for 2023 in last year's Government Plan (£5.3m compared to £800,000)

The total for the entire Jersey Care model Digital system project funding has not changed in total since its introduction. This programme was also affected by Covid in 2021.

The budget for each of the years has been re-profiled in order to deliver all four projects (Health Demographic Services, Referral Services, Jersey Care Record and Telecare/teleguidance) in line with demand.

It is worth noting that Referral Services and Jersey Care record have been re-profile in line with the Online Service Hub platform currently being led by Modernisation and Digital as part of the Service Digitisation programme.

Original Profile:

2022 (£000's)	2023 (£000's)	2024 (£000's)	2025 (£000's)
1,938	500	400	-

Current Profile:

2022 (£000's)	2023 (£000's)	2024 (£000's)	2025 (£000's)
1,388	1,050	400	-

Jersey Care Model – Digital Systems

24. Please provide a breakdown of the £1,050,000 that has been requested for 2023 for this project.

a. Please specify how much of this funding, if any, goes towards supporting/enhancing primary care digital systems

The programme is planning to spend the £1.05M across all the below projects. The budget still needs to be apportioned for each workstream ready for January 2023 and the work will be done at the same time as Digital Care Strategy due to interrelation (reference Question 22).

2023:

- Telecare and Teleguidance (remaining)
- Health Demographics Service (remaining)
- Jersey Care Record
- Virtual Consultations
- Primary and Community EPR

Funding allocations to the Primary and Community EPR project is to be confirmed, but this project will focus on assessing the requirement for systems to improve services within primary and community care, including integration across service providers.

Other

Jersey Care Model (already approved expenditure)

25. How much of the £13 million that was approved to be transferred from the Health Insurance Fund (HIF) for the purposes of the JCM and digital for 2022 was spent?

The Quarter 3 2022 JCM & Digital Projects Progress report will provide a full and detailed explanation of the spend to the end of September and the forecast spend to the end of the year. The request to approve and transfer to the value up to the 2022 spend on these projects, in accordance with proposition p.102-2021 will take place at the end of the year. The Law allows for transfers of up to £13 million out of the HIF into the Consolidated Fund in 2022, plus the transfer of any remaining balance of the 2021 total approved sum of £11.3 million. The unspent funds for 2021 was £4.9m, therefore a total of up to £17.9m for 2022.

As of 30 September 2022, actual and forecast spend for 2022 were as follows:

Programme	2022 January to September	2022 Full Year		
	Actual £000	Budget up to £000	Forecast £000	Variance £000
Jersey Care Model	4,498	9,800	6,730	3,070
Digital Care Strategy	2,709	6,230	4,488	1,742
JCM Digital Systems	200	1,940	1,106	834
Total	7,407	17,970	12,324	5,646

- 26. This year's Government Plan is proposing to transfer £12,450,000 from the HIF to the consolidated fund for the purposes of the Jersey Care Model and related digital strategies. It was previously estimated that £12,160,000 would be transferred for 2023 for the same purposes. Please provide an explanation for the difference in estimations.**

The below information is based on existing approvals by the States Assembly. The figures are pending, following the conclusion of my review into the Jersey Care Model. The below figure has not been adjusted for the unspent funds from 2022. I will provide further details in the review of the JCM that I have undertaken.

Programme	Expenditure Type	2021-2024 Government Plan: 2023 £000	2023-2026 Government Plan: 2023 £000
Jersey Care Model (HCS)	Revenue	6,100	6,100

Programme	Expenditure Type	2021-2024 Government Plan: 2023	2023-2026 Government Plan: 2023
Digital Care Strategy (M&D)	Capital	5,600	5,305

Programme	Expenditure Type	2021-2024 Government Plan: 2023	2023-2026 Government Plan: 2023
JCM Digital Systems (M&D)	Capital	500	1,050

- 27. When do you intend to publish the results for your review of the Jersey Care Model and is it possible that you will be proposing amendments to the Government Plan in light of your review?**

I now expect to publish my review circa week commencing 21 November, if not sooner. This date will still allow time for any necessary amendments to the Government Plan to be lodged, either by myself or States Members.

I trust that the above responses are of use to the Panel in their review of the Government Plan and please do not hesitate to contact me if you require anything further.

Yours sincerely

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