

21.11.23

9 Deputy G.P. Southern of the Minister for Health and Social Services regarding healthcare funding options (OQ.231/2021):

What options, if any, does the Minister have, either under consideration or in development, to sustainably meet the potential sources of increasing costs for healthcare funding outlined in the proposed Government Plan 2022-2025 and beyond?

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

As set out the Government Plan 2022-2025, subject to its approval by the Assembly, I will be undertaking a wider health economic review during 2022 to inform funding options for increased healthcare costs and for any potential new health access schemes to be brought forward in 2023 for inclusion in the Government Plan 2024-2027. This is in line with the Assembly's decision in the care model debate last year requiring Ministers to bring forward for approval proposals for a sustainable funding model for health and social care to be operational by the end of 2025. The initial stages of this review have just started and it is planned for the review to run through the whole of next year. It is too soon to speculate on the potential outputs of that review and, as such, I am not in a position to comment on possible sustainable funding options today. However, as the Minister for Social Security has just explained in question 5, and as has been publicly stated, I can reiterate that the future role of the Health Insurance Fund will be included within my review.

4.9.1 Deputy G.P. Southern:

While the H.I.F. might be included, by that time it will be seriously depleted. Is the reality not that this decision by the Minister for Social Security pre-empts some of the options that the Minister will have in front of him in his review?

The Deputy of St. Ouen:

No, that is not the reality and it is not a decision by the Minister for Social Security, it is a decision by this Assembly.

4.9.2 Senator S.Y. Mézec:

The Minister will recall in the previous term of office, the previous Government had proposed one method to sustainably source the funding for healthcare in the future through the form of a health tax, which was rejected by this Assembly at least in part because it was a regressive tax that would have exempted the super-rich from paying their fair share. Would the Minister like to rule out pursuing any funding model in future which is regressive and exempts the super-rich from paying their fair share leaving the burden of the cost on the shoulders of those on lower incomes.

The Deputy of St. Ouen:

Every proposal brought forward for future healthcare funding must be fair or I do not believe it will gain support. That is a matter of conjecture. All the details, planning and proposals will be considered next year.

4.9.3 Senator S.Y. Mézec:

Just to confirm then, fairness is a guiding principle that the Minister is pursuing in this. Therefore, he will personally not bring forward proposals if, like the last round of proposals in the previous term of office, they exempt the super-rich from paying their fair share.

The Deputy of St. Ouen:

It is unnecessary to answer that hypothetical question. What is being done is over the course of next year, a very wide consideration will be given to all possible means of funding healthcare and will eventually be brought to this Assembly in the Government Plan to be agreed by this Assembly or otherwise.

4.9.4 Deputy R.J. Ward:

Does the Minister accept that lack of access, that lack of G.P. and primary healthcare, due to prohibitive costs, is a threat to the long-term health of many Islanders in Jersey and subsequently increases the long-term costs of healthcare on the Island?

The Deputy of St. Ouen:

Yes. It is the case that there are very real questions of access. People need to be able to feel that they can get the right care they need at the right time without having undue concerns about affordability. That is one of the aspects that will be considered in next year's review.

4.9.5 Deputy R.J. Ward:

Therefore, does the Minister believe that keeping the subsidy on G.P. visits at £20 for the last 10 years is effectively a mistake, an error that has been made, that is going to cost us long-term?

The Deputy of St. Ouen:

That is looking back into the past. The subsidy has remained for a period of time, but in addition, during that time, G.P.s have been funded in other ways by the Health Insurance Fund.

4.9.6 Senator T.A. Vallois:

I am going to ask a similar question to the Minister for Health and Social Services that I asked of the Minister for Social Security in terms of working with each other to bring forward what has been spent in 2021 as per what was agreed in the Jersey Care Model in terms of the implementation plan, what has been spent in 2021 and also, therefore, whether we are on track for the funds that are going to be spent in 2022 through the Government Plan?

The Deputy of St. Ouen:

Officers working with the Minister for Social Security are working with my officers to agree the funding that has been spent on the Jersey Care Model tranche 1. Once agreed, an amount of up to the figure agreed by this Assembly will be transferred across for 2021. The same exercise will take place in 2022, following approval, if approval comes forward, of the present Government Plan.

4.9.7 Senator T.A. Vallois:

I appreciate the officers have been doing the work behind the scenes. How does the Minister report that in terms of tangible benefits to the public so they can see the outcomes of that money being spent through that first part of the implementation phase?

The Deputy of St. Ouen:

We have issued an update on the Jersey Care Model. Tranche 1 was always intended to be a time of planning and putting necessary teams in place to establish new ways of commissioning and to concentrate particularly on intermediate care. Members might recall, under the previous P.82 proposals, which had some similarities; it is about the transformation of healthcare. It was always said that not enough resources had been devoted, not enough had been done under P.82, because there were not sufficient people assigned to it and there was not enough planning around it. This

has been corrected with the Jersey Care Model, has been done in tranche 1 and we are ready. In terms of public engagement, the engagement of the voluntary third sector groups, that will be very significantly ramped up next year.

4.9.8 Deputy G.P. Southern:

As part of his extensive review of the cost of delivering health, will the Minister examine the possibility of making all Jersey residents eligible for a significant subsidy on their primary care costs?

The Deputy of St. Ouen:

Very many options will be considered in this review - I do not see why that will not be - to be laid before Ministers, and ultimately this Assembly, for a choice as to how healthcare in Jersey should be funded in the future. Members should have no doubt, notwithstanding the present taxpayer investment and the present contributions we make into the Health Insurance Fund and the work of the Jersey Care Model, which might reduce costs, but it will still mean that costs will increase over the longer term. It is just that they will not increase as much as they might have without the Jersey Care Model. We have to provide for that increase. This review will be examining all the options that could be put in place. I would not like to see a repeat of the debate we had in the last States, as Senator Mézec has mentioned, that did not gain the overall support of this Assembly and Islanders.