

STATES OF JERSEY



SERVICE USERS OF HOME CARE (S.R.1/2017): RESPONSE OF THE MINISTER FOR HEALTH AND SOCIAL SERVICES

**Presented to the States on 7th April 2017
by the Minister for Health and Social Services**

STATES GREFFE

**SERVICE USERS OF HOME CARE (S.R.1/2017): RESPONSE OF THE
MINISTER FOR HEALTH AND SOCIAL SERVICES**

Ministerial Response to: S.R.1/2017

Ministerial Response required by: 10th April 2017

Review title: Service Users of Home Care

Scrutiny Panel: Health and Social Services

INTRODUCTION

I thank the Panel for its report on Service Users of Home Care which particularly looks at the relationship between my Department and Family Nursing and Home Care (FNHC). I'm pleased to accept the single recommendation within the report – the 2017 contract between my Department and FNHC has now been agreed and it is clear about the costings and funding for each element of the service provided by FNHC.

In terms of your findings, I have a number of comments that focus on the fact that they do not appear to be fully supported by the evidence presented in the report.

FINDINGS

	Findings	Comments
1	The Health and Social Services Department and FNHC appear to have operated for years without full knowledge of the costs attributable to home care. As a result, it has been difficult to disentangle the funding utilised for home care services from the remainder of the commissioned services. The subsidy and how it is broken down has been a sticking point in negotiations.	It is correct that the Health and Social Services Department and FNHC have operated for years without full knowledge of the costs attributable to home care. The evidence presented indicates that my Department has been requesting clarity regarding the apportionment of costs for some time; this is evidenced in the note of 28th November 2014, and in the letter to FNHC requesting clarity regarding funding sources and individual service lines in October 2015 – both of which are presented in the Appendix of the report. I cannot see any evidence in the report that the breakdown of the subsidy has been the ' <i>sticking point in negotiations</i> '. Indeed, the main sticking point was FNHC's reluctance to accept the changes in funding for home care in 2016, which were first signalled in 2014 and then again in 2015.
2	Negotiations for the removal of the subsidy between Health and Social Services and FNHC were slow, with long gaps evident in the process. Both Health and Social Services	I agree that negotiations have been protracted. However, the statement that ' <i>HSS failed to clearly communicate its change in position to FNHC and then</i>

	Findings	Comments
	<p>and FNHC bear responsibility for this. Health and Social Services failed to clearly communicate its change in position to FNHC and then attempted to make changes in a short timeframe. On the part of FNHC there was a seeming reluctance to accept and engage with the changes. This failure to agree led to FNHC's announcement in September 2016 with regards to their staff terms and conditions.</p>	<p><i>attempted to make changes in a short timeframe'</i> does not accord with the evidence in the report. Indeed, I believe that the evidence demonstrates that my Department has been mindful of the need to ensure the change is accepted and well managed:</p> <p>The chronology on pages 18 and 20 shows that the intention to change and reduce the funding for Home Care was signalled in 2014. In a meeting in early 2015, FNHC requested that my Department did not withdraw the funding until after their strategy was published in March 2015. We agreed to this and, as the evidence shows, we did not 'suddenly withdraw' the funding after receiving FNHC's letter in November 2015.</p> <p>The report notes that the position was 'reiterated' by the Minister in April 2016 (i.e. that this was not the first time the withdrawal of funding had been stated), and the detail was agreed in July 2016 following confirmation of funding reduction in April.</p> <p>On page 6 of the report it is stated that '<i>HSS told the Panel that it began discussing the removal of funding in 2014, however, FNHC told the Panel that discussions began much later. The Panel has not been able to discern which is correct</i>'. However, the first document referred to on page 17 (evidence) is notes of a meeting from July 2014 in which funding was discussed. I am therefore unsure why the Panel was unable to confirm that the funding was discussed in 2014.</p>
3	<p>Letters inviting FNHC clients to be assessed for the Long-Term Care Scheme were sent out in September, only 4 months prior to the planned removal of the subsidy. As of August 2016, there were no clear instructions for the new flexible care component. This was not a realistic timeframe in which to complete the work required. It is appropriate therefore to extend the funding until this is resolved.</p>	<p>I agree that letters were sent to FNHC clients in September. However, the finding infers that this is the first time FNHC clients were eligible to be assessed under the Long-Term Care Benefit or had been invited to be assessed under the Long-Term Care Benefit. This is an incorrect inference; like all Islanders, FNHC clients were eligible to be assessed from 2014, when the Long-Term Care Benefit was introduced. In fact the letter invited FNHC clients to have an updated care needs assessment, which may or may not have resulted in them becoming eligible for the long-term care scheme.</p>

	Findings	Comments
		<p>Page 9 of the report notes that FNHC did not inform its staff until September, when it was aware of the funding reduction in April. Whilst the reluctance to accept change is noted in the report, this delay in communicating to staff is omitted from the report's findings.</p> <p>I am also pleased to note that all of the FNHC clients who requested an assessment were assessed; we secured additional staff in order to cope with the increase in demand for assessments.</p>

RECOMMENDATIONS

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
1	It is unsatisfactory that there is no information as to how the subsidy is allocated to services. The Minister for Health and Social Services should confirm how the block grant for the core commissioned services is broken down by the end of the first quarter in 2017.	HSS	Accept	<p>As noted at the Scrutiny Panel hearing on 10th November 2016, my Department's intention was to fully fund District Nursing, Children's Services and Rapid Response and Reablement from 2017. This is a Service Level Agreement, not a Grant. Service specifications, including metrics, have been agreed for each element of the service.</p> <p>My Department has now signed the 2017 contract and, in agreement with FNHC, has shared the contract, including financial schedule, with the Panel on the basis that the document is commercially in confidence.</p>	31st March 2017

CONCLUSION

I welcome the Panel's report and agree with the one recommendation, which has been implemented.

My Department continues to work closely with Family Nursing and Home Care as a key partner in the health and social care system. This will help to ensure that Islanders receive services that continue to be safe, sustainable and affordable into the future, and that FNHC is supported to transform and change its service delivery to meet changing needs and evidence-based practice.