

STATES OF JERSEY



HEALTH AND SOCIAL CARE SYSTEM: A NEW GOVERNANCE MODEL (P.60/2017) – AMENDMENT

**Lodged au Greffe on 31st October 2017
by the Health and Social Security Scrutiny Panel**

STATES GREFFE

HEALTH AND SOCIAL CARE SYSTEM: A NEW GOVERNANCE MODEL
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After the words “for a 3-year trial period” insert the words, “commencing no earlier than April 2018”.

HEALTH AND SOCIAL SECURITY SCRUTINY PANEL

REPORT

The Health and Social Security Scrutiny Panel has carried out a review of [P.60/2017](#) 'Health and Social Care System: a new governance model' and will be presenting its report to the Assembly prior to the debate on Tuesday 14th November 2017. The Panel's key findings and recommendations will be put forward in this report.

From the documentation reviewed and evidence gathered during the course of its review, the Panel acknowledges there is wide support in principle for improving the present governance arrangements for health and social care in the Island. As a result, the Panel also supports the principle of establishing a new governance model in the form of a system partnership board. However, the Panel has concerns relating to various aspects of the operation/implementation of the proposed model, which are also reflected in some of the submissions made to the Panel and in the report of the Panel's adviser.

The Panel considers that the Minister should provide greater assurance to the Assembly in the coming months during which he and departmental officers propose to develop the planned model. This amendment therefore proposes that the Board should not be formally established before April 2018, in order to give opportunities to the Minister to report on progress to the Panel and the Assembly, to allow Members to ask questions of the Minister, and to allow time for any further debate if considered necessary.

The following aspects of the proposed model have concerned the Panel –

1. How the voice of children would be heard in the proposed model;
2. How the Public/Patient Group, the Voluntary and Community Sector Forum and the Clinical and Professional Forum are to be established;
3. How representatives from each of the forums and the group are to be selected to sit on the proposed Board;
4. Whether 21 members would make the proposed Board unwieldy and less effective;
5. Whether it is necessary for the Health and Social Services Department to have 9 representatives on the proposed Board;
6. How members of the Voluntary and Community Sector Forum and the Public/Patient Group would be trained and resourced to participate effectively at Board level and in their respective forum or group.

The Panel does not believe its amendment would create any significant difficulty for the Minister, as he has already indicated he would be spending the early part of next year working with stakeholders to establish the proposed model. The following extract is taken from the Public Hearing with the Minister for Health and Social Services on Thursday 19th October 2017, and indicates a proposed timescale for the development of the model –

Chief Executive Officer

The Appointments Commissioner is aware that this proposition is being lodged and that there may be a requirement for them to engage with this process, and obviously they have companies that they work with to source people. I would expect that in the first couple of months of next year, assuming that this gets signed off in November, December/January time we would go through that

process. I would hope by February/March time we would have the chair and the non-executives available to us. Clearly in that same 3-month period we can start to up the profile around working with the individual forums so they can start to think seriously about how they will find their representatives, so that by the time we get into late spring we can start bringing people together.

Financial and manpower implications

There are no additional financial or manpower implications for the States arising from this proposed amendment.