

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES
BY DEPUTY G.P. SOUTHERN OF ST. HELIER
ANSWER TO BE TABLED ON TUESDAY 16th JUNE 2020**

Question

Will the Minister advise –

- (a) whether it is his assessment that the current contracts that were negotiated with G.P.s during the Covid-19 pandemic will ensure sufficient improvement in the access to primary care by financially, clinically, or socially vulnerable groups in the Island;
- (b) what further measures, if any, he has under consideration to provide additional improvements; and
- (c) when he proposes to enter into renegotiation with G.P.s regarding the content of future contracts?

Answer

- (a) whether it is his assessment that the current contracts that were negotiated with G.P.s during the Covid-19 pandemic will ensure sufficient improvement in the access to primary care by financially, clinically, or socially vulnerable groups in the Island;

In terms of access, this has been a difficult time for all, with many of the usual channels of access being changed or people being hesitant to use them. General Practice has been very pro-active in ensuring continuity of care for those with long-term conditions and those in higher-risk categories (clinically vulnerable), with a strong drive from early on in the pandemic to ensure that people were safe, had care plans in place and appropriate medication supplied.

Routes of access were also modified, with a rapid deployment of teleconsultation capability to enable access was kept open for those that needed care. Those that could not be managed via teleconsultation were still cared for face to face. This has provided GP access for the socially vulnerable and people shielding from COVID.

In terms of reducing the financial barriers to access, a number of changes have been implemented. All GP consultations are set at a flat fee of £20 (reduced from ~£40 pre-covid). All covid and end of life-related consultations are free. Consultations for under 5s are also free universally, and fees for under 10s reduced to a flat rate of £10. Repeat consultations for the same issues, and face to face follow-ups after teleconsultations, are now free.

Whilst the health and care system is still a long way from operating normally, a number of measures have been put in place to help maintain access to primary care given the priority attached to the long-term health and care of Islanders.

The principles behind this change are in line with the new Jersey Care Model announced in October last year – an integrated health system that works better together for Islanders. This is a significant step forward in ensuring a resilient health service that is prepared and able to save lives.

- (b) what further measures, if any, he has under consideration to provide additional improvements;

An integrated health system that works better for Islanders is our main objective. The steps we have taken over the past few months under difficult and pressured circumstances have moved us closer to that goal. We now need to sustain that momentum and work with our primary care partners to design integrated services as we move into this next phase.

The past few months has shown us that the ambitions we had in the Care Model can be realised through taking a different, united approach to service delivery. The GP contract has enabled this to happen. Officers are working with GPs in developing those new ways of working, many of which are still embryonic, but growing stronger. These will all be taken into consideration when we look at how we negotiate with the GPs. To improve access, we must build in flexibility, encourage collaboration and promote service innovation as has been apparent over the last few months.

Access for all to primary care is key to the ongoing health of all Islanders and remains a high priority as we progress.

- (c) when he proposes to enter into renegotiation with G.P.s regarding the content of future contracts?

The renegotiation process started in May and is actively being worked on by officers.