

22.04.25

**1 Deputy G.P. Southern of St. Helier of the Minister for Health and Social Services regarding the Community Alarm System (OQ.68/2022)**

Will the Minister provide the rationale behind the decision to reduce the subsidy for the Community Alarm System that is being made available to the majority of users of such preventative devices?

**Deputy R.J. Renouf of St. Ouen (The Minister for Health and Social Services):**

The new telecare system has been commissioned to replace the existing system, which is now out of contract, no longer in production, and becoming increasingly difficult to source spare parts for. In addition, the existing system has very limited functionality, providing only a call-bell provision. The new telecare offer has much greater functionality and can be expanded to include many products if needed or wanted by the recipient. It also uses the latest technologies and is not dependent on landline capability alone. Telecare is one of the services that enables Islanders to remain at home, if that is their choice, and with greater functionality the new service will be able to support more people. Where individuals have been assessed and require the system as part of their care package, this remains the same. It is fully funded and there is no cost for the telecare offer. But where people privately hired the old system as a matter of choice they currently pay and it was recognised that an increase in costs at the changeover could be difficult for some. With this in mind, and as H.C.S. (Health and Community Services) had to change the system, we decided to subsidise the change with a gradual reduction in subsidy over 2 years; the first year being fully subsidised, giving individuals the opportunity to prepare for the change or make other arrangements if they choose.

**3.1.1 Deputy G.P. Southern:**

What is missing from that statement is any idea of the real cost. Does the Minister agree that the real cost of this service to those who volunteer to help the department out by providing a facility to have the care in the home is an extra £150 a year? Could the Minister state whether he thinks that is reasonable to pay for a service which is part of the Care Model, which enables people to have proper care in their homes?

**The Deputy of St. Ouen:**

As I have said, for those for whom this is an essential part of their care package that service is provided free of charge but there are many such call alarms commercially available. When the Government entered into this contract it chose also to make its service available to other customers who may wish to make use of it, and that has happened for many years. But of course there are increasing costs here to move from an analogue to a digital system. With new technology often comes greater cost and which we all experience with our own mobile contracts. So the subsidy itself, the first year remains at its present rate of £10.50, the fixed monthly charge, including G.S.T. (goods and services tax). That is going to rise in a year's time to £14 and by 1st July 2025 it will be £21. That is over the next 3 years a rise, for those who are asked to pay, of £11 a month. But as I have said, it is a marketplace, there are other services available for those who might wish to avail of them.

**3.1.2 Deputy R.J. Ward of St. Helier:**

Given the significant spend on I.T. (information technology) development and digital development by Jersey's Government, is it really necessary to pass on these, which are relatively small costs for the Government but significant for individuals? Would it not be best to just take on this charge?

**The Deputy of St. Ouen:**

I suppose we could take on this charge. There are many things I would like to do and just provide free at the point of use but of course there is always a cost to these things. If Health was to provide this service free of charge then something else in the Health budget would have to give. It is always a case of balance and I do stress that those who are deemed to need this service as part of their care package get it absolutely free. Others can join the package but there are multiple packages for them to choose from on the market, they will be paying for others. If they are not at a point of needing it as part of a care package I think it is right that they should make this contribution.

**3.1.3 Deputy R.J. Ward:**

Given that the Care Model relies heavily on preventative, which is quite right, is this not exactly the type of thing we should be paying for to prevent problems over the longer term? What other areas of digital investment will mean other things being lost from our health services if that is the model behind this?

**The Deputy of St. Ouen:**

This does provide a good preventative measure. This is a subsidy that has been introduced by H.C.S., it is not one that has been reduced because we had not previously offered any subsidy to private users of this who chose to take advantage of it. It is just a recognition that over the next 3 years we will gradually ease in and give users assistance with that charge. I am not aware, in response to the latter part of the question, of any other services affected.

**3.1.4 Senator S.Y. Mézec:**

Is this an example of the sort of extension of user pays services which we might anticipate to see more of under the Jersey Care Model?

**The Deputy of St. Ouen:**

It is precisely not any sort of extension. There is no policy change here. Those who need the service receive it free. Those who choose to use it are asked to make a charge. They are now getting a far better enhanced product and the charge is being subsidised for the first 3 years.

**3.1.5 Senator S.Y. Mézec:**

This was something that those who have benefited from it in the past will now pay more for. Does the Minister accept that that will inevitably mean fewer people will use this kind of service and will instead risk becoming a greater burden on other parts of the health system, which will need to be funded in some other way? On that basis, does he not consider this move to be completely short-sighted?

**The Deputy of St. Ouen:**

No, I do not accept that at all. The existing method of providing a service is continuing. There is no policy change here and in fact this product, this service, could well be attractive to many more people. Service users can add all sorts of services to monitor their health and well-being. It will be attractive to families as well who do not live with their loved ones. Devices that can be added include full sensors, motion sensors, pill dispensers, devices report on activities for daily living; for example, a smart plug on a kettle could send an alert to a family member using an app which comes

with the device if the kettle has not been used for a period of time. Very significant enhancements, which point the way towards improved preventative services in the future.

**3.1.6 Deputy G.P. Southern:**

These particular vulnerable people are asked to subscribe to a system which will support them to retain their independence for longer, better monitor their health and well-being, as well as help to reduce the amount of support that they need at home. This is totally in line with the overall policy of the Care Model and yet come 2025 this group of people will be paying twice the amount for this service than they otherwise would be to match the Jersey Care Model. Does the Minister really think that this is fair and not a burden on these particular people who are helping him deliver a service to people's homes, which is in line with the policy?

**The Deputy of St. Ouen:**

As I have said during this time of questioning and will repeat, that those who require this service as part of their care package will continue to receive it free of charge. Those who choose to purchase this service, because they make a choice among all other devices and services available, will be asked to pay the appropriate charge because, as we know, digital technology does incur charges. But the benefits it brings will be of use. But where there is an absolute need that is met entirely by H.C.S.