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Deputy Rob Ward Chair, HSS Panel BY EMAIL

20 October 2023

Dear Chair,

#### Re: HSSP Review of the Government Plan 2024-2027

Thank you for your letter dated 13 October 2023 which contained initial questions about the Government Plan 2024 – 2027 ahead of the Public Hearing to be held on 16 November 2023. Please see below responses to the Panel's queries. Please note that totals have been rounded.

## **Departmental Budgets and VFM Savings**

1) The estimated net revenue expenditure for Health and Community Services (HCS) for 2024 is roughly £39m more than it was in 2023. Please can you explain the significant increase? (p34 GP)

The additional money is to fund the deficit and ongoing operational costs for 2024. There is a deficit of funding in 2023 of £26m, and £16m in 2024, after delivery of efficiency savings of £3m and £12m in 2023 and 2024 respectively.

Revenue budget for 2024 is set at £2865m, which is an increase of £37.5m from the 2023 opening budget of £249m.

Of the increase of £37.5m:

- £15m Recurrent impact of 2023 pay awards.
- £3.5m Additional Maintaining Health & Community Care Standards funding.
- £2.4m Non-Pay inflation.
- £1.8m Net receipt of budget from Service Transfer.
- £21m Deficit funding (£16m deficit funding plus £5m Growth).
- (£3.5m) Value for Money Efficiencies.
- (£2.5m) Net movement due to non-recurrent funding 2023 Government Plan.
- a) In 2024, you have estimated staff costs to total £204,546, which is £24 million more than what was estimated for 2023. Given the significant number of current vacancies within certain Health Departments, how has this estimated cost been arrived at? (Please provide a breakdown by Departments)

At the time of producing the Government Plan figures for 2024, detailed budget setting for 2024 for HCS is yet to be completed. The 2024 figures include the recurrent impact of 2023 pay awards (which were not reflected in the 2023 Government Plan figure). These total £15m.



The net movement of circa £9m is made up of a share of deficit funding of £21m allocated in the 2024 Government Plan, offset by Financial Recovery Plan efficiencies.

As part of the 2024 budget setting process, these matters are to be addressed, in line with the budget setting timetable, which is due to conclude in December and circulated January 2024. This process will finalise the detailed allocation of budgets for 2024.

2) The Panel notes that, in addition to £10m savings the Department is due to deliver in 2024 through the Financial Recovery Programme, HCS is expected to deliver £3.6m of Value for Money savings next year. Please can you advise the Panel how you intend to achieve these additional savings?

The Financial Recovery Programme (FRP) takes into account all of the 2024 savings initiatives, including the Value For Money (VFM) savings of £3.5m, within its 7 workstreams, namely:

- Clinical Productivity.
- Workforce.
- Non-Pay and Procurement.
- Medicines Management.
- Income.
- Care Group/Directorate Schemes.
- IT and Digital Health.

## **Revenue Growth Allocations**

3) The annex to the Government Plan states that this funding will be used to maintain existing healthcare services that are facing further inflationary, activity and efficiency related cost pressures. It also provides examples of mental health placements, social care packages, high-cost drugs, off-island care, expansion beds and cancer services. Please can you provide a breakdown of how the £21 million will be allocated to healthcare services?

I-HCS-GP24-001: Ongoing Risks and Pressures in HCS

Revenue Expenditure Growth							
£'000		2024	2025	2026	2027		
Reference	Description	Estimate	Estimate	Estimate	Estimate		
I-HCS-GP24-001	Ongoing Risks and Pressures in HCS	21,000	14,500	14,500	14,500		
Total		21,000	14,500	14,500	14,500		

As part of the 2024 budget setting process, these matters are to be addressed, in line with the budget setting timetable, which is due to conclude in December and circulated January 2024. This process will finalise the detailed allocation of budgets for 2024.

This will include allocation of funding to 'unfunded services' that were identified during the Financial Recovery Plan.



## 4) Please can you provide a breakdown of the proposed funding of £899,000 for 2024?

I-SPP-GP24-005 Major Incident Health and Wellbeing Recovery Programme

Revenue Expenditure Growth						
£'000		2024	2025	2026	2027	
Reference	Description	Estimate	Estimate	Estimate	Estimate	
I-SPP-GP24-005	Major Incident Health and Wellbeing Recovery Programme	899	713	401	401	

The proposed funding covers the health and wellbeing support packages that have been developed to provide support for those most affected by major incidents (public and responders). The packages include psychological therapies and health checks (c.£200k), a new Major Incident Support Team (MIST) which will sit within HCS (c.£430k), and long-term health and wellbeing monitoring (c.£270k).

### 5) Please can you provide a breakdown of the proposed funding of £2.3m for 2024?

I-SPP-GP24-004 Maintaining the Public Health Protection Function

Revenue Expenditure Growth						
£'000		2024	2025	2026	2027	
Reference	Description	Estimate	Estimate	Estimate	Estimate	
I-SPP-GP24-004	Maintaining the Public Health and Health Protection Function	2,273	2,273	2,273	2,273	

The £2.3m funding will ensure the continuation of the public health work programme detailed in the five-year Public Health Strategy 2023-2027. Including but not limited to, undertaking a Joint Strategic Needs Assessment (JSNA), delivering a health improvement programme, leading health in all policies, working with health colleagues to develop strategies, improve pathways and commission secondary prevention services, and implementing findings from the 2023 Health Protection Review.

### **Capital Projects**

### Health Services Improvement Programme

### 6) Please can you provide a breakdown of the proposed funding of £5m for 2024?

Due to commercial sensitivities, project budgets are to be omitted, however the spend profile of the £5m covers:

- Inpatient ward improvements Maternity and Bartlett ward.
- Fire compliance:
  - Fire door replacements.
  - Compartmentation improvements (fire stopping).
  - Damper replacements.
- Electrical compliance:
  - lighting upgrades.
  - Localised wiring infrastructure.



- Medical equipment infrastructure.
- Mechanical compliance:
  - Medium temperature host water network.
  - Pneumatic tube system upgrades.
  - Drainage repairs.
  - Ventilation replacements & upgrades.
- Building:
  - Roof repairs (water ingress).
  - Reinforced Autoclaved Aerated Concrete (RAAC).
  - Ad hoc emergency repairs.
  - Planned small works.
- Water Compliance:
  - Water tanks and piped network (legionella).
- Professional fees & feasibility work.

## 7) Can you please explain why the estimated amount for this capital project reduces significantly in 2025 (£5m in 2024 compared to £2.6m in 2025)

This figure was initially reduced to £2.6m because of the new facilities being ready for 2026. However, due to the new timeline for the New Healthcare Facilities Programme, HCS had requested that the 2.6m was reinstated to £5.0m for 2025, 2026 with a review of reduced funding for 2027 or at the point New Healthcare Facilities are 12 months away from completion.

## Learning Disabilities - Specialist Accommodation

## 8) Please can you provide a breakdown of the estimated expenditure for 2024?

Feasibility works are planned to be concluded in early 2024 to ensure that the service delivers bespoke accommodation for complex behaviours that present as challenging. This will also consider individuals off-island as a stepped approach when returning to their home island before moving into a community setting.

### 9) What are the target dates for the delivery of this project?

There is an urgent need for specialist accommodation to ease pressures on the service. Therefore, revised feasibility and strategic planning will be undertaken in first quarter of 2024 to determine the options.

## Digital Care Strategy

## 10) Please provide a breakdown of the funding requested for this project in 2024 (£5.3m)?

The Digital Care Strategy project has required circa £5m per annum since 2022 to allocate across a designed and sequenced portfolio of HCS Digital Health projects. To attribute funding to specific projects, a robust assessment process has been implemented to align and validate the investment per project based on capacity, affordability, clinical and



operational urgency, value for money, risk, and deliverability in a target timeframe. This process is managed, and decisions are made, through the Digital Health Portfolio Board.

Currently HCS' Digital Health demand requests total 76 items, of which 11 are currently active as Digital Care Strategy projects in 2023. They are split across the following categories (the remaining demand requests are recorded and tracked via the formal prioritisation pipeline process):

- Digital Hospital EPR 7.
- Mental health care and social health care 1.
- Business Improvements 3.

In the Digital Care Strategy 2023, the £5m was used to progress the items above, of which 5 Projects will have delivered in scope outcomes and formally begin to close by the end of 2023.

- Electronic Patient Records Phase 1 & 2.
- Faecal immunochemical test Order Comms phase 1 & 2.
- Vendor Neutral Archive.
- GP Order Comms.
- Scantrack.

Seven projects will continue delivery into 2024 with a focus on the below initiatives:

- Digital Hospital:
  - Electronic Patient Records Phase 2 & 3.
  - Faecal immunochemical test Order Comms Phase 3.
  - Genitourinary medicine clinic (sexual health) Electronic Patient Records.
  - Ophthalmology Electronic Patient Records.
  - Electronic Prescribing and Medicines Administration.
- Mental Health and Social care:
  - Mental Health Electronic Care Record.
- Business Improvements:
  - Cervical Cancer Screening.

As previously advised, HCS' 2024 budget setting is yet to be completed. Once complete, it will validate project commitment for 2024.

End of Q3 actuals analysis is under validation to determine end of year commitment across portfolio of work. This will enable the forecast budget planning, per project into 2024 to deliver against remaining project outcomes.

## Jersey Care Model - Digital Systems

## 11) Please provide a breakdown of the £1m that has been requested for 2024 for this project?

The Jersey Care Model Digital System follows the same principle as question 10 of this paper.



Currently, HCS demand requests are totalling 76 items, 6 are currently active (1 on hold) in the *Jersey Care Model* projects in 2023. They are split across the following categories (the remaining requests are tracked and managed via the formal prioritisation pipeline process).

The following initiatives have progressed through 2023 and are scheduled to deliver into 2024.

- Applications Management
  - Audiology System Replacement.
  - Viewpoint Obstetric Upgrade.
- Primary / Community & Integrated Health Care Records
  - Jersey Health Care Index.
  - Referrals Service.
  - Primary Care (EMIS) System Review.
- 12) In last year's GP it was estimated that £400,000 of funding would be requested in 2024. Why is the estimated expenditure for this project significantly greater in this year's Government Plan for 2024?

Due to projects delay in 2022, the Digital Health programme has reviewed demand, priorities, capacity, and capability. It was realised that the budget needed to be re-profiled from 2022, 2023, 2024 and 2025 with some years being too heavily funded. Any underspend from previous years were approved as per the Government Plan process and spread at a Government of Jersey wide affordable level. This applies to both Digital Care Strategy and Jersey Care Model Digital System. We can confirm the overall amount of the project over the year has not increased and remains within the original Business case cash limit.

#### Other

### Placements and Off-Island Medical Care

13) Last year the Panel expressed concerns regarding the amount of funding allocated to this project and asked the Minister to review the funding ahead of this year's Government Plan to determine whether the amount was sufficient and to ensure patient care was not negatively impacted as a result of the reduction in funding from the original growth bid. Please provide an update.

This has been picked up as part of the Financial Recovery Plan work identifying 'unfunded services', requiring additional funding. This element, also known as the 'structural deficit' in the Financial Recovery Programme, for which funding is being provided over financial year 2024 and 2025, and allocations are to be made as part of the budget setting process, which we have referred to in response to previous questions.

I trust the above addresses the majority of the Panel's question ahead of the Public Hearing.

Yours sincerely,



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