

One point of clarification between your letter and the Government Plan 2023-26 (page 59) is that in your letter, dated 27 October 2022, you refer to funding towards Placements and Off-Island Medical care as £500k per annum and in the Government Plan this amount is £5million per annum.

With respect to this proposed funding cost, the Off-Island Medical care refers to funding to support both specialist mental health and adult social care placements as well as the fact Jersey commissions NHS Hospitals and UK tertiary centres, to provide clinical excellence in areas of speciality such as Radiotherapy, Cardiology, Neurosurgery and Ophthalmology. It then refers to approximately 1,800 referrals made across 30 speciality services each year, for these latter services. As the 1,800 referrals appears to exclude mental health cases, then the £5m provides for an average cost per referral of £2,778 across the 1,800 cases. At this level of average cost, given the wide variety of treatments and the related variability of costs incurred, the unknown forecast element of the funding relating to those connected to mental health services and adult social care, could well mean the level of funding would be a challenge not to be exceeded given the cost of off island care and increase in number of cases.

Turning to the proposed funding towards Mental Health Development and Gender Pathway, we note that in the Government Plan 2023-26, page 61, there is also reference to work that has already commenced on a significant redesign of mental health services in 2022 within current resource, supported by a non-recurrent Government allocation of £500,000. This additional funding is stated as intending to make temporary roles that commenced in 2022 permanent. The report does not clarify to what extent this one off funding then becomes effectively embedded and so no longer becomes new funding within the future plan. We have assumed therefore, that the £1,127,000 allocation from 2024 includes the cost of the roles funded by the £500k and so the additional spend available is £627k and so in line with the £685k allocation for 2023.

With respect to the proposed additional funding of £685k in 2023 and our assumed £627k per annum thereafter, we agree with further funding being allocated and provided given the increased and consistent level of demand that we have also seen in the Island. The interaction with charities, such as ours, in work on early intervention we believe is critical to try to have a meaningful impact on the demand on health services. During and since the pandemic we have seen an increased level of demand and we have consequently expanded our scope of services, which has seen us invest our reserves and make specific funding requests from community funders. In most cases this specific funding is now running out and so there is a structural gap in continuing to provide these services and the income levels. Charities generally have also been challenged by the pandemic and current cost of living crisis and inflation levels. We advocate for an increased level of commissioned work and that funding is available to allow extended services, such as those we have provided during and since the covid-19 pandemic with peer support and family and carers that we provide, to

be funded and become permanent a part of commissioned work from the department. We do not believe the proposed funding for 2023-26 includes any extension of this commissioned work and we believe that funding should also be allocated to such areas, to continue to enable a model of delivery of mental health services between government and charities where that is practicable.

The increased spend to take on roles and deal with extended demand is clearly welcomed and also where this helps stabilise department staffing and a consequential increased value of services to members of the public.

One further point is around the extent to which the money allocated is based on both local and global research in terms of evaluation /effectiveness.