STATES OF JERSEY

PROPOSED BUDGET (GOVERNMENT PLAN) 2026-2029 (P.70/2025): SEVENTH AMENDMENT

EMERGENCY DEPARTMENT FEES

Lodged au Greffe on 20th November 2025
by Deputy B.B. de S.DV.M. Porée of St. Helier South
Earliest date for debate: 9th December 2025

STATES GREFFE

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1 PAGE 2, PARAGRAPH (b) (ii) –

After the words "accordingly to" for the word "approve", substitute the words "request the Minister for Health and Social Services to investigate and develop, for subsequent approval by the States Assembly if considered feasible,".

2 PAGE 3, PARAGRAPH (b) (xii) –

After the words "Appendix to the accompanying report", insert the words ", except that, on page 27, the final paragraph and the text on the subsequent page should be substituted as follows –

"Given the scale of the pressures faced in Health and Care Jersey, steps need to be taken to protect our frontline healthcare services. This includes investigation of two new fees during 2026 to help promote behavioural changes and reduce wasteful use of resources:

• Promoting appropriate use of the Emergency Department
It is estimated by HCJ that at present 14,000 patients a year use the hospital Emergency Department for day-to-day healthcare which would more appropriately be provided in the community by their GP. In these instances it is proposed to consider the introduction of a fee for these patients. On arrival in the hospital, people who would be more appropriately cared for in the community will be encouraged to seek the right healthcare from the right provider and be redirected to a pharmacist, their GP or Jersey Doctors on Call, as appropriate. If they still wish to receive day-to-day healthcare in the Emergency Department, they will be provided with this care at a fee.

• Did not attend fees
It is estimated that patients fail to attend 12,000 outpatient appointments a year, without notifying the department and hence preventing others from accessing care. It is proposed that a non-attendance fee be considered, to be paid by people who repeatably do not attend outpatients appointments. Such a fee could be introduced on a phased basis as Health and Care Jersey rolls out a new system that allows people to change their appointments online, as well as by phone. Specific groups of people would be exempt, including mental health patients, children and people attending substance misuse clinics.

Both fees will be considered during 2026 with the Department to present the relevant findings and proposals for approval by the Assembly. The Department would also develop an appeals process to safeguard patients and ensure no-one is unfairly charged. The fees are intended to shift behaviours, not generate income, and it is hoped that the need to levy the fees would reduce over time."".

DEPUTY B.B. DE S.V.M. PORÉE OF ST. HELIER SOUTH

Note: After this amendment, the proposition would read as follows –

THE STATES are asked to decide whether they are of opinion –

(a) In accordance with Article 16 of the Public Finances (Jersey) Law 2019 (the Law) to approve an amendment to the Government Plan 2025 – 2028 (entitled "Budget 2025 – 2028") to a reduction in the 2025 head of expenditure "Grants to States Funds" as included in Table 5(i) Revenue Heads of Expenditure of that Government Plan from £119,821,000 to £69,821,000.

(b) To receive the Government Plan 2026 – 2029 (entitled "Budget 2026-2029") specified in Article 9(1) of the Law and specifically –

i. to approve the estimate of total States income to be paid into the Consolidated Fund in 2026 as set out in Appendix 2 – Summary Table 1 to the Report, which is inclusive of the proposed taxation and impôts duties changes outlined in the Government Plan, in line with Article 9(2)(a) of the Law.

ii. to refer to their Act dated 24th June 2003 in which they approved that no new 'user pays' charges be introduced without any such charge receiving prior in principle approval by the States Assembly and accordingly to request the Minister for Health and Social Services to investigate and develop, for subsequent approval by the States Assembly if considered feasible, the introduction of two new charges, to be levied by Health and Care Jersey to promote appropriate use of the Emergency Department and for repeated non-attendance of outpatient appointments, detailed in the section entitled "Departmental Income Sources" as set out in the Appendix to the accompanying Report.

iii. to approve the proposed Changes to Approval for financing/borrowing for 2026, as shown in Appendix 2 – Summary Table 2 to the Report, which may be obtained by the Minister for Treasury and Resources, as and when required, in line with Article 9 (2)(c) of the Law, of up to those revised approval amounts.

iv. to approve the transfers from one States fund to another for 2026 of up to and including the amounts set in Appendix 2 – Summary Table 3 in line with Article 9(2)(b) of the Law.

v. to approve a transfer from the Consolidated Fund to the Stabilisation Fund in 2026 of up to £50 million, subject to a decision of the Minister for Treasury and Resources based on the availability of funds in the Consolidated Fund as at 31st December 2025 in excess of the estimates provided in this plan, or from budgeted underspends identified before 31st December 2026.

vi. to approve a transfer from the Consolidated Fund to the Agricultural Loans Fund in 2026 of up to £5 million, subject to a decision of the Minister for Treasury and Resources based on availability of funds

in the Consolidated Fund as at 31st December 2025 in excess of estimates provided in this plan, or from budgeted underspends identified before 31st December 2026;

vii. to approve each major project that is to be started or continued in 2026 and the total cost of each such project and any amendments to the proposed total cost of a major project under a previously approved Government Plan, in line with Article 9(2)(d), (e) and (f) of the Law and as set out in Appendix 2 – Summary Table 4 to the Report.

viii. to approve the proposed amount to be appropriated from the Consolidated Fund for 2026, for each head of expenditure, being gross expenditure less estimated income (if any), in line with Articles 9(2)(g), 10(1) and 10(2) of the Law, and set out in Appendix 2 – Summary Tables 5(i) and (ii) of the Report.

ix. to approve the estimated income, being estimated gross income less expenditure, that each States trading operation will pay into its trading fund in 2026 in line with Article 9(2)(h) of the Law and set out in Appendix 2 – Summary Table 6 to the Report.

x. to approve the proposed amount to be appropriated from each States trading operation's trading fund for 2026 for each head of expenditure in line with Article 9(2)(i) of the Law and set out in Appendix 2 – Summary Table 7 to the Report.

xi. to approve the estimated income and expenditure proposals for the Climate Emergency Fund for 2026 as set out in Appendix 2 – Summary Table 8 to the Report.

xii. to approve, in accordance with Article 9(1) of the Law, the Government Plan 2026-2029, as set in the Appendix to the accompanying Report, except that, on page 27 of the Appendix, the final paragraph and the text on the subsequent page should be substituted as follows –

"Given the scale of the pressures faced in Health and Care Jersey, steps need to be taken to protect our frontline healthcare services. This includes investigation of two new fees during 2026 to help promote behavioural changes and reduce wasteful use of resources:

• Promoting appropriate use of the Emergency Department
It is estimated by HCJ that at present 14,000 patients a year use the hospital Emergency Department for day-to-day healthcare which would more appropriately be provided in the community by their GP. In these instances, it is proposed to consider the introduction of a fee for these patients. On arrival in the hospital, people who would be more appropriately cared for in the community will be encouraged to seek the right healthcare from the right provider and be redirected to a pharmacist, their GP or Jersey Doctors on Call, as

appropriate. If they still wish to receive day-to-day healthcare in the Emergency Department, they will be provided with this care at a fee.

• Did not attend fees

It is estimated that patients fail to attend 12,000 outpatient appointments a year, without notifying the department and hence preventing others from accessing care. It is proposed that a non-attendance fee be considered, to be paid by people who repeatably do not attend outpatients appointments. Such a fee could be introduced on a phased basis as Health and Care Jersey rolls out a new system that allows people to change their appointments online, as well as by phone. Specific groups of people would be exempt, including mental health patients, children and people attending substance misuse clinics.

Both fees will be considered during 2026 with the Department to present the relevant findings and proposals for approval by the Assembly. The Department would also develop an appeals process to safeguard patients and ensure no-one is unfairly charged. The fees are intended to shift behaviours, not generate income, and it is hoped that the need to levy the fees would reduce over time.".

REPORT

Summary

This is a simple amendment which, if adopted, will add in an extra step in the process of introducing new 'user pays' charges for some health services, by requiring final approval by the States Assembly once the Minister has produced the full details for how the charging regime will work and assured members that the department is capable of applying them in an equitable way.

Rationale

As it stands, the Budget asks members to grant permission to the Health Minister to introduce a regime for charges for non-attendance at outpatient appointments and inappropriate use of the Emergency Department.

However, these new charges are not currently ready to be implemented at the start of 2026. It is proposed that they will begin during the year after other work has been done, including the introduction of a new system allowing people to change their appointments online. It is also proposed that an appeals process will be created to safeguard patients and ensure no-one is unfairly charged.

Jersey's health service faces significant challenges which sometimes causes patients to have difficult experiences engaging with the service, particularly with communication and problems arising from record keeping. This gives rise to concerns on whether the infrastructure to introduce a charging regime can be done in an equitable and effective way.

Whilst unjustified non-attendance at appointments ought to be discouraged, we will want to be certain that the department has resolved issues with the communication of appointments, to mitigate possible resentment or disputes arising.

It would be highly unjust for patients to find themselves being charged for missing appointments that they either did not know were happening, or after they had experienced the inconvenience of making themselves available for appointments that the department had cancelled and not informed them. It would also risk a level of engagement with the proposed appeals process that could end up costing the department more to facilitate this than they will have gained from those charges.

This amendment allows the Minister to do the work he plans to do, but adds an extra safeguard by requiring final approval from the States Assembly before officially enacting the charging regimes, after demonstrating to members that the infrastructure is in place to ensure the scheme works properly.

Essentially, it prevents a blank cheque being given to the Minister to introduce a charging regime that members have not had an adequate opportunity to scrutinise it.

Financial and staffing implications

There are no direct financial and staffing implications arising from this amendment. The Minister will be able to conduct the work he is already planning to undertake, but will

just need to refer back to the Assembly before implementing the conclusions of this work.

Children's Rights Impact Assessment

I consider that this proposition (amendment) has no direct or indirect impact on children and that the duty to have due regard to the UN Convention on the Rights of the Child does not arise. Accordingly, a Children's Rights Impact Assessment is not required under the Children (Convention Rights) (Jersey) Law 2022.