

2024.10.01

3.9 Deputy L.K.F. Stephenson of St. Mary, St. Ouen and St. Peter of the Minister for Health and Social Services regarding the current waiting time for a laparoscopy (OQ.172/2024):

Will the Minister advise the current waiting time for a laparoscopy, the number of patients on that waiting list and how many of those are waiting for surgery to diagnose or treat endometriosis?

Deputy T.J.A. Binet of St. Saviour (The Minister for Health and Social Services):

Taking those questions in the order in which they were asked, I can inform the Deputy that the current median waiting time for a routine referral for laparoscopy is 29 weeks. At the end of August there were 376 people waiting for a laparoscopic procedure, and that is across general surgery and gynaecology. Of these patients, 12 were recorded as waiting for surgery to diagnose or treat endometriosis. The median waiting time for these patients is 23½ weeks and all of these are defined as routine referrals. Given that these waiting times are longer than we might like in an ideal world, it might also be helpful to mention that the median waiting time for an urgent referral is 3½ weeks.

3.9.1 Deputy L.K.F. Stephenson:

I appreciate the information from the Minister. Endometriosis affects one in 10 women of reproductive age and often has a significant impact on their daily lives and physical and mental health. The U.K. has made it a priority as part of its Women's Health Strategy. What is this Government doing to help those Islanders who are impacted by reducing those waiting lists and improving pathways?

[11:00]

Deputy T.J.A. Binet:

This is a very difficult one. There are a number of different ailments that require priority. It is safe to say that anybody that requires an endoscopy could be deemed to be a priority, so I cannot say that we are doing anything specific in this particular area other than to try and make the service more efficient. I would say again that for more urgent treatment it is 3½ weeks, and if it is more urgent than that, then it would be even swifter.

3.9.2 Deputy J. Renouf of St. Brelade:

Can the Minister therefore confirm that he does not expect those waiting lists to change substantially during the course of this remaining term of Government?

Deputy T.J.A. Binet:

Sorry, could the Deputy repeat the question?

Deputy J. Renouf:

Could the Minister confirm that he does not expect to see those waiting list delays change during the term of this Government?

Deputy T.J.A. Binet:

Well, I am certainly hoping they can be improved. I could not be specific as to the extent to which they might be improved, but we are certainly looking to improve them.

3.9.3 Deputy J. Renouf:

Could he therefore explain what measures he thinks are being taken now or are planned that will improve those waiting times?

Deputy T.J.A. Binet:

These can only be improved by just general improvements in the efficiency of the service and the staff available.

3.9.4 Deputy I. Gardiner of St. Helier North:

Would the Minister consider when he says “urgent”, 3½ weeks is fast enough when you live with incredible pain and it might be also symptoms for other diseases as well?

Deputy T.J.A. Binet:

I do recall saying in my first answer that in an ideal world it is not a perfect scenario. The Deputy used the term in “incredible pain”. I do not think anybody at the hospital would leave somebody in incredible pain for 3½ weeks. I did try and explain that if it is extremely urgent then it would be virtually immediate, that is the way the priorities tend to work.

3.9.5 Deputy I. Gardiner:

I am not sure if the Minister would be aware, with incredible pain there is no choice as to go to A. and E. (Accident and Emergency). Maybe because of this very, very strong pain people come into A. and E. and we have increased stress on A. and E. instead of addressing this as a more urgent normal procedure outside of A. and E.

Deputy T.J.A. Binet:

As I said in my earlier response, I think we can make that case for almost anybody suffering from any ailment. The truth of the matter is that the service is under quite a lot of pressure and we are doing what we can to improve the overall performance of the departments.

3.9.6 Deputy P.F.C. Ozouf of St. Saviour:

I noted that the Minister said the average wait was 29 weeks, it is 31 in the U.K. Members are aware now that we spend more *per capita* than most in the O.E.C.D. (Organisation for Economic Co-operation and Development) on healthcare. What is his target for a waiting list which would be acceptable given the resources that we are putting, and how is he going to make efficiencies or other changes to reach that target?

Deputy T.J.A. Binet:

I think I have to correct the Deputy, I am not certain that we do spend more *per capita* than the rest of the O.E.C.D. In fact, I think on a *per capita* basis we are slightly below the average. In terms of specifics for endoscopy, once again these are drilling down into individual areas and I do not have a specific plan for endoscopy any more than I do for the dozens of other areas, other than the fact that we are trying to make the whole organisation more efficient in a number of ways.

3.9.7 Deputy P.F.C. Ozouf:

I think it is a laparoscopy; I know what an endoscopy is because I have had one. Is he really saying, I understand the point that he makes that he ... I am not asking to have a debate about the issue of Government spending, all we know is we spend a lot on healthcare. Is he saying that he does not have what a good looks-like target is for laparoscopies?

Deputy T.J.A. Binet:

I am very happy to say I do not have a target for that particular procedure any more than I have a particular target for anything else other than to improve all elements of the service to the greatest extent possible.

3.9.8 Deputy L.K.F. Stephenson:

Would the Minister commit to reviewing the pathways that are in place for the diagnosis, treatment and maintenance of endometriosis and provide an update to Members in due course, including perhaps looking at the options that are available for working with community settings to help in this area?

Deputy T.J.A. Binet:

This may not be terribly popular but I am reluctant to commit myself to any particular thing by virtue of a question that is asked in the Assembly. I will make the point again that we are doing what we can, where we can, right across the piece. As I say, it becomes difficult for the staff involved if every time

somebody stands up and asks a question that I will make a commitment in that particular area. I will just continue to say that we will do our best in all areas.