

2024.04.30

3.17 Deputy J. Renouf of the Minister for Health and Social Services regarding the Jersey Rheumatology Report by the Royal College of Physicians (OQ.82/2024)

Further to the publication of the Royal College of Physicians' Jersey Rheumatology Report, will the Minister provide an update on the investigation into the care provided by the Rheumatology Department to former patients?

Deputy T. Binet (The Minister for Health and Social Services):

The investigation into past care and treatment provided by the Rheumatology Department is ongoing. H.C.S. have now completed the review of all patients who were on biologic drugs, disease-modifying antirheumatic drugs, or who were otherwise under the care of the doctors referred to in the Royal College of Physicians' report during the period concerned. We are now reviewing the case notes of patients seen by the 2 doctors in the period from January 2019 and who have subsequently died. To be clear, this would include many patients whose cause of death had nothing whatsoever to do with their rheumatology care. This final review involves a clinical audit to be followed by a mortality learning review for any case where concerns are raised. A further update will be provided once this final review is complete. All patients who were cared for under the Rheumatology Department in the period concerned, or were seen as outpatients under the care of either clinician whose practice was referred to in the Royal College of Physicians' invited review, have been offered a review appointment and have now been seen. Work continues to determine levels of harm that may potentially have been caused to patients. We still have a duty to write to any patient who has suffered significant harm as a result of the treatment by H.C.S. staff. This is part of the duty of candour. We will, of course, be writing to any such patients very shortly. Mindful that some patients may wish to seek legal redress, H.C.S. is working with lawyers to consider the most appropriate approach to medico-legal matters related to rheumatology. Our intention is to develop an approach that is patient friendly, not overly protracted, and which represents a patient's right to seek independent legal recourse.

3.17.1 Deputy J. Renouf:

Can the Minister provide a little more detail about the process that is currently underway to assess whether patients were harmed as a result of treatment in the Rheumatology Department, and in particular, are any outside organisations, such as the G.M.C. (General Medical Council) or the B.M.A. (British Medical Association) involved in assessing patients.

Deputy T. Binet:

These are technical points that would probably be more usefully dealt with in Written Questions. The G.M.C. and the B.M.A. I am sure have been involved in this process, but points of detail of that sort would be better submitted, I think, as a written question.

3.17.2 Deputy H.L. Jeune:

What information does the Minister hold on the scale of harm suffered by patients and what action is he taking to address the seriousness of what is being discovered by the review process?

Deputy T. Binet:

I personally am not taking any action. There is a process underway and we will be having a look at the results of that when that process is completed. I hope that in the course of my first response that I detailed what that process was.

3.17.3 Deputy J. Renouf:

When we talk about the nature of the harms caused to the patients who have received care and treatment in the rheumatology service over the last 25 years, is he aware of any instances where patients may have died from that treatment?

Deputy T. Binet:

These investigations are on-going and I think, in any event, it would not be appropriate for me to make comments on that sort of question in the Assembly.