WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES BY DEPUTY M.R. HIGGINS OF ST. HELIER ANSWER TO BE TABLED ON TUESDAY 14TH MARCH 2017

Question

Further to the answer provided on 17th January 2017 to written question 1(24), will the Minister provide an update on the current waiting times facing people who need to see a consultant, across all medical specialties, and will he also explain the reasons for any exceptional waiting periods?

Answer

Hospital specialties

All referrals to Consultants are graded by clinical need into 'urgent', 'soon' or 'routine' categories in order to give the appointments booking team an appropriate clinical guide for urgency of appointment required.

As a general guide, 'urgent' patients are given an appointment within 2 weeks, 'soon' patients are given an appointment within 8 weeks and 'routine' in chronological order after all graded 'urgent' and 'soon' are booked.

The same grading is given to a patient when adding them to the waiting list for a procedure/treatment.

The length of time a patient may wait does vary by specialty and varies each week within specialties. The variation is driven by:

Number of available consultants Number of referrals received Number of patients being added to the procedure list Bank Holidays Time of the year Number of pre-advised patient cancellations

The position in February 2017 is detailed below in the table. This shows the average number of weeks patients who were seen in February had waited for their appointment or treatment. This includes all three categories of clinical urgency.

Specialty	Average wait in weeks for first out-patient appointment
Breast Surgery	3
Ears Nose and Throat (ENT)	9
Cardiology	6
Dermatology	11
Diabetes medicine	13
Gastroenterology	14
General Medicine	7
General Surgery	6
Gynaecology	5
Infectious Diseases	10
Nephrology	9
Neurology	9

Ophthalmology	8
Oncology	1
Oral Surgery	9
Orthopaedics	14
Paediatrics	9
Pain	9
Respiratory	10
Rheumatology	3
Urology	9

CAMHS

Within CAMHS, referrals are made to the service rather than individual practitioners so most referrals are appropriate for assessment by any member of the multi-disciplinary team. Waiting times reported for assessment therefore are for the service as a whole rather than particular clinical disciplines.

The target timescale for initial assessments is:

Priority 1 (Urgent, high risk) 2 working days Priority 2 (Soon, moderate risk) 2 weeks Priority 3 (Routine, very low or no apparent risk) 4 weeks

The average wait for routine referrals as at the end of February 2017 was 27 days. 84% of initial assessments during the month of February were completed within agreed timescales.

Adult mental health

The adult mental health service receives referrals into the multi-disciplinary team rather than to individual consultants. This is in line with best practice and ensures the presenting problems and needs of the client are matched to the appropriate professional skills.

There is an on-call service which ensures that consultant input is available 24/7, 365 days a year.

The service receives three levels of referral:

Emergency Referral

The patient will be seen within 30 minutes by a mental health professional from the liaison mental health team who can contact the on-call consultant at all times.

Urgent Referrals

Urgent referrals will be seen within 24 to 72 hours depending on referral information.

Routine Referrals

A questionnaire opt-in form will be sent to the patient.

In February 2017, the average wait for routine referrals from the time the opt-in form was returned to the service to assessment was 13 days and the median wait was 11.5 days.