

2.14 Deputy A.E. Jeune of St. Brelade of the Assistant Minister for Health and Social Services regarding the return to practice of the previously excluded Consultant Gynaecologist:

Given that the previously excluded - and I am saying previously excluded - consultant gynaecologist was welcomed back to the hospital at the beginning of February, would the Minister please inform Members how many clinics the consultant has held at the hospital this month and, if none, explain why? Would she further explain why the exclusion was only lifted after publication of the Verita Report when its findings had been disclosed to some hospital executives earlier?

Deputy E.J. Noel (Assistant Minister for Health and Social Services):

Any doctor returning after a significant period of absence requires an assessment and reskilling programme. This is best practice and plans are currently being put in place with advice from the National Clinical Assessment Service (N.C.A.S.) to ensure that appropriate arrangements are in place in this particular case. The consultant gynaecologist in question is yet to resume formal clinical duties. The department is working with him and N.C.A.S. to agree a process of safe return to work. The only department officer to see the final report one working day prior to publication was the acting Chief Executive Officer, although 2 other officers saw an early draft in London in confidence for fact-checking.

2.14.1 Deputy A.E. Jeune:

I hear the answer that we have had from the Assistant Minister and earlier in this session today he made reference to the difference between exclusion and suspension is that with exclusion you can carry on things like C.P.D. If that is the case, then why are we now having to undertake further training under N.C.A.S. - I think the Assistant Minister said - and are we, in fact, still paying for the... I do not know what we would call the current situation of the consultant now, but presumably, if he is not back at work, the taxpayer is still having to pay for him and for a locum and we know that the Verita inquiry has identified pressures on the gynaecological day services. Can we please have some idea about when the welcomed back consultant is going to return? Or is it perhaps that the consultant is deciding he does not wish to return?

Deputy E.J. Noel:

The Deputy has expressed an opinion about how the consultant's return to work should be managed. While she is entitled to her opinion, the department will be taking the advice of N.C.A.S. as patient safety is our primary concern. N.C.A.S. has already advised that the practitioner should undertake a formal reskilling programme which covers all aspects of practice within his job description and his contract as a consultant. The level of reskilling required will be dependent upon the type of role that the consultant will be intending to undertake. That discussion is currently underway between the employer and the employee and is a matter for the consultant himself to consider and not here in the House.

2.14.2 The Deputy of St. Martin:

Will the Assistant Minister not accept that if someone is excluded or suspended from work under a neutral act then it is beholden on the department to ensure that that consultant's skills are not lost? Who is responsible in his department for failing to ensure that the gynaecologist's skills were kept in order so when he was able to return to work he was able to do so immediately?

Deputy E.J. Noel:

The consultant concerned under exclusion did have an opportunity to maintain his skill base and I am sure that he took that opportunity. However, we are dealing with patient safety here and best practice must be followed.

2.14.3 Deputy A.E. Jeune:

Would the Assistant Minister agree that given that the acting Chief Executive of the Health Department publicly stated they had welcomed back the consultant gynaecologist he was misleading the House perhaps and the public?

Deputy E.J. Noel:

No.