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**5.5. Deputy J.A. Hilton of St. Helier of the Minister for Health and Social Services regarding the reduction of waiting times for patients who need an M.R.I. scan:**

What steps, if any, will the Minister take to reduce the waiting times for patients who need an M.R.I. (magnetic resonance imaging) scan and what measures are currently in place should the M.R.I. scanner break down?

**Senator A.K.F. Green (The Minister for Health and Social Services):**

I can assure Deputy Hilton that the M.R.I. scanner is being managed as effectively as possible in order to maximise appointments. I do however acknowledge that there is a wait for routine M.R.I. scans. Our scanner operates 12½ hours a day Monday to Friday, for 9 hours on Saturday. Occasionally we operate on a Sunday. There were 7,647 M.R.I. examinations undertaken in 2015, an average of 25 per working day. All patients are telephoned to minimise non-attendance and a short notice list is held to offer any cancelled appointments to patients willing to be called at short notice. There is funding in place for a replacement scanner this year. The installation is complicated because it requires 3 different moves from different services and staff in order to accommodate the new scanner into a severely restricted space.

**5.5.1 Deputy J.A. Hilton:**

I am not sure the Minister answered the question because the second part of my question is: what measures are currently in place should the M.R.I. scanner break down?

**Senator A.K.F. Green:**

Sorry, I cannot hear the question.

**Deputy J.A. Hilton:**

Sorry, I do not believe the Minister answered the second part of my question which was: what measures are currently in place should the M.R.I. scanner break down?

**Senator A.K.F. Green:**

I think the Deputy was asking me - because neither gadget seems to be working - what would happen if the machine broke down? First of all I would like to ensure that we have many things in place to help prevent breakdown and to minimise breakdown in the event that it happens, such as a comprehensive service contract, access 7 days a week for advice, we stock some of our own spare parts and we have 2 hospital engineers trained by Philips to provide first-line assistance. But in the event of all failing and we are without an M.R.I. then I am afraid we have to resort to the more conventional methods of diagnosing, C.T. (computerised tomography) scanning, X-ray and other methods of diagnostic tools that are available to us. Fortunately we have never had a very long breakdown.

**5.5.2 Deputy M. Tadier:**

Can the Minister inform us whether there is a fee charged to the patient every time there is an M.R.I. scan and if so, what is that fee roughly?

**Senator A.K.F. Green:**

I believe there is a fee. I am sorry I do not have that amount with me but I can send it to the Assembly.

**5.5.3 Deputy M. Tadier:**

Just to clarify: that fee that would be charged which we could estimate at how much that would raise per annum if we knew it, is that ring-fenced at all or is the upkeep of the M.R.I. scanner purely done from central reserves at the hospital?

**Senator A.K.F. Green:**

I think the Deputy asked me if the figures were ring-fenced. They are not ring-fenced for the M.R.I., they are part of the revenue that comes into Health, just as other charges are revenue that comes into Health. Obviously it is identified as income from M.R.I. and income into the Radiography Department.

**5.5.4 Deputy J.A. Martin:**

Did the Minister say in his answer that if the M.R.I. scanner broke down the hospital would have to revert back to more conventional but less, I would say, conclusive diagnosis? Does the Minister not consider if the M.R.I. scanner is not working here they must send people off the Island? Is there a budget for this?

**Senator A.K.F. Green:**

I live in the real world. If technology occasionally lets you down then you have to make what other tools you have work for you. I did say we would have to use more conventional methods. We have excellent C.T. scans available. We have excellent ultrasound. We have other diagnostic tools and we would have to use those.

**5.5.5 Deputy J.A. Martin:**

Is the Minister saying there is now nobody ever sent off-Island for an M.R.I. scan if our scanner is broken down?

**Senator A.K.F. Green:**

No, I am not saying that. But I am just saying what would have to happen if there was a clinically urgent case that needed to be dealt with but it would be clinical judgment. In some cases that person might need to go away immediately. In other cases doctors will use other diagnostic tools.

**5.5.6 Deputy M.R. Higgins of St. Helier:**

Will the Minister tell Members in terms of the waiting list, how long it is and what the waiting list is for private patients and the waiting list for members of the public?

**Senator A.K.F. Green:**

The current waiting times depend on the clinical urgency of the examination. Scans deemed urgent are taken as quickly as possible, in some cases within hours, usually though within 2 weeks. Other scans can wait for up to 17 weeks, and I do not have the information available about the waits for private service, but I will make sure that they are sent out to Members.

**5.5.7 Deputy J.A. Hilton:**

I think this is a thoroughly unsatisfactory state of affairs. I really do. I would like to know how much time is left before the current M.R.I. scanner is considered past its sell-by date and does the Minister agree with me that with a population which has increased by over 10,000 since 2002, accompanied by an ageing demographic, the days when the Island could just rely on one scanner to provide an efficient service are surely numbered?

**Senator A.K.F. Green:**

We have plans to replace the scanner this year, as I said in my answer. But it is not very easy when you are working in an old building on a complex site. It is not like we have spare empty spaces that we can just crane an M.R.I. scanner into. We have the budget for it, we have plans to do it. It entails 3 different departmental moves, not just moving the furniture but massive pieces of equipment that have to be decommissioned, moved and recommissioned to create the space. Technically we should be able to cope with one M.R.I. I think that leaves us a little bit vulnerable, which is why the new hospital will have 2.

**5.5.8 Deputy J.A. Hilton:**

Can I just have one more supplementary? Can the Minister confirm: he said he has the budget to buy a new scanner this year. Will the Minister confirm that we will have a new M.R.I. scanner in situ this year?

**Senator A.K.F. Green:**

I believe we will, unless we hit some terrible snag when we are undertaking the work. We are out to tender and plan to go ahead with it.