

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES  
BY DEPUTY G.P. SOUTHERN OF ST. HELIER  
ANSWER TO BE TABLED ON TUESDAY 20th OCTOBER 2009**

**Question**

Given that in her response to my written question of 6th October 2009, the Minister stated that “she had no evidence of professionals working in excess of 100 hours per week due to staff shortages”, will the Minister inform members what data she has of working hours amongst Health and Social professionals and, if none, will she undertake to conduct an investigation of actual working hours by her staff and report the findings to members within 6 weeks?

Will the Minister state why the EU working time directive (EUWTD) is not currently under consideration by the Sustainable Hospital Project for those other than trainee doctors and state whether she will now place reconsideration of the EUWTD on her agenda?

**Answer**

Data is held on all Health and Social Services staff in relation to their contracted hours and the overtime that they may have worked for a given period. It is from this source that it is technically possible to ascertain the length of the working week for given individuals. It should, however, be noted that this would be a complicated task that would require significant resources to undertake.

The rotas for Trainee Doctors are compliant with the European Working Time Directive (EWTD) as this group of staff is employed on a rotational programme that is managed by the Wessex Deanery. It is a requirement for participation in this rotation that all relevant rotas are compliant with the EWTD.

All other staff, including non-trainee Doctors, Nurses and those Professions Allied to Medicine, are employed by the States Employment Board. Working hours for these staff are compliant with Jersey Employment Law. There is currently no legal requirement in Jersey to comply with the EWTD for these staff groups.

The Sustainable Hospital Project has explored issues in relation to the potential implementation of EWTD compliant rotas for medical staff, other than trainee doctors. It identified that such a move would require the recruitment of a significant number of additional doctors and this would incur very significant resource implications. Furthermore the recruitment of additional doctors would potentially dilute the content of their jobs to such an extent as to make them less attractive to good calibre recruits and would also reduce the training opportunities that they would otherwise be exposed to.