# 4.11 The Deputy of St. Martin of the Minister for Health and Social Services regarding the suspension of a surgeon since February 2009:

Will the Minister inform Members whether a surgeon who has been suspended since February 2009, and if so advise what has been done to ensure that he does not become de-skilled, outline what efforts, if any, have been made to hasten his return to work, and give details of the expenditure by Health and Social Services of this case to date?

# Deputy A.E. Pryke of Trinity (The Minister for Health and Social Services):

My Department tries to avoid exclusion wherever possible and it considers alternatives to exclusion where it does not compromise an investigation or patient safety. There has been one member of staff excluded from work since February 2009; this was a result of a police investigation. The exclusion was lifted on 27th May 2010. When an individual is excluded this is regularly reviewed in line with our policy to ensure that it is no longer than absolutely necessary. Where appropriate a training programme is developed in consultation with the individual clinician and a national clinical assessment service to assess any skill gaps, which may have occurred. The cost of exclusion to date has been £156,363 together with £293,716 staff replacement costs entailing a total direct cost of £450,079.

# 4.11.1 The Deputy of St. Martin:

Yes, if I could, Sir. In an answer given to Deputy Maçon a few weeks ago about the position about the doctor being de-skilled and the Minister was able to confirm that the doctor had not been de-skilled, can I ask the Minister how his skills were maintained when the doctor or the terms of his suspension was that he was not allowed at the hospital the whole of this 18 months while he was suspended? In other words, how were his skills maintained if he was not allowed to enter the hospital?

#### The Deputy of Trinity:

The difference between an exclusion and a suspension, the exclusion is more that the surgeon should be kept up or clinician should be kept up with C.P.D. (Continuing Professional Development), which is your appraisal system and that continues and will continue.

# 4.11.2 Senator S.C. Ferguson:

Has the Minister considered that the suspension was being handled by the same management handling the long running case of the other surgeon, and what action is she taking?

#### **The Deputy of Trinity:**

It is a set procedure, which is done within the management and also there is a review panel, which occurs every month and that review panel goes to the States Employment Board too. It is a set procedure and it was followed as such.

# 4.11.3 Senator S.C. Ferguson:

But we have already had the Verita report and the Solace report, which criticised their handling of the previous suspension. So, does the Minister not think it is time to look at the individuals concerned?

## The Deputy of Trinity:

This is a set procedure set down and the Solace report did go through those 4 recommendations and all of which I have put in place or they are all addressing.

There is one important one; the length of time is a Memorandum of Understanding between the States of Jersey Police, Health and Safety Inspectorate, the Employment Board and Health and Social Services Department. This was a recommendation set down with Solace and we have to go through that procedure if it became a police investigation first. I am pleased to say that the Memorandum of Understanding ... that the officers within all the different departments are working together and hopefully the Memorandum of Understanding will be in place within the next few weeks.

#### 4.11.4 Deputy P.V.F. Le Claire:

A few weeks ago I asked all Ministers what their departments' work chart flows were in respect of whom they employed and pretty much to a man most Ministers refused to answer me. Will the Minister for Health please, to help Members understand the situation that her Department is facing, circulate to us a list of the consultants in posts within the hospital, those that are suspended and those whose posts remain vacant, so we can understand the pressures that she and her Department are facing?

# The Deputy of Trinity:

As I have said, there are no consultants suspended or excluded, as I am aware that there are not any vacant posts but I could be wrong in that. As regarding with the flow charts, as we discussed in this House a matter of, I think, 2 or 3 weeks ago about a management improvement plan, which I will be bringing back to the States as a report towards the end of this year.

[11:15]

# The Deputy Bailiff:

I tell the Members, I have 5 Members wishing to ask questions and there is not very much time, can Members keep their questions crisp? Deputy Le Hérissier.

#### 4.11.5 Deputy R.G. Le Hérissier:

The Minister has mentioned the protocol, could the Minister tell us after her own review of the situation, why N.H.S. suspensions have been dealt with and are dealt with much more rapidly than those that have recently occurred in Jersey?

## The Deputy of Trinity:

I think one of the most important things that was identified in the Solace report is the Memorandum of Understanding and that is an important one and one that we are, as I said before, within those various departments of Health and Safety, the police, our Department, States Employment Board; it is important that we set it up and put it in place because it will make a difference if and when any exclusions or suspensions happen in the future.

# 4.11.6 Deputy A.E. Jeune:

Would the Minister please advise us whether she is satisfied with the performance of her managers?

## The Deputy of Trinity:

A big wide question, of course I am. The hospital and Health and Social Services are very wide and diverse. I stood here and said that many times and we employ over 2,500-plus full-time equivalents and there are many areas, not only kind of addressing within Jersey but also the fact of commissioning at various hospitals in the U.K. It is

wide and diverse and there is a good management system in place, and this management system and officers are going to be strengthened by the new Chief Executive Officer who will come up with a new management structure within the next few weeks and it will be part of the management improvement plan, which I mentioned a little while ago, which a report will come back to this House.

## **Deputy D.J. De Sousa:**

Sorry, Sir, my question has been asked, thank you.

## The Deputy Bailiff:

Deputy Jeune, you wanted to ask a supplementary.

# 4.11.7 Deputy A.E. Jeune:

Just to clarify, would the Minister agree that management systems and managers are different?

## The Deputy of Trinity:

Yes, but as I said, the hospital is wide and diverse and it is not in the hospital, it is Social Services or different aspects within Social Services, Community Care, Elderly Care, et cetera, and it is wide and it needs to be well managed. I am very pleased that the Chief Executive, a new Chief Executive is in place and will reorganise the management structure accordingly.

#### 4.11.8 The Connétable of St. Lawrence:

I would like to take the Minister back to her response to the Deputy of St. Martin, which I regret I was not clear on. I would like to know whether the consultant was in fact allowed access to the hospital during his time of exclusion, and if not how did he maintain his skills? Because I am not sure whether I misunderstood or whether the Minister did not respond to the initial question. So, was he allowed access to the hospital, and if not how did he maintain his skills?

#### The Deputy of Trinity:

Within every profession let alone doctors, nurses and others, it always is one's responsibility to keep up-to-date with continuous professional developments and that is important for any area. As regards to coming into the hospital if I am to be absolutely sure I would need to check on that.

# The Connétable of St. Lawrence:

I am sorry I do not think that I have had an answer to my question.

#### The Deputy Bailiff:

On your question as to whether or not the surgeon was excluded, the Minister said she would have to check on it.

#### The Connétable of St. Lawrence:

Thank you, Sir, so she will come back to the House with the response at some time?

# The Deputy Bailiff:

Minister, will you come back to the House?

# The Deputy of Trinity:

# 4.11.9 Deputy C.F. Labey of Grouville:

Is the Minister satisfied that given the catalogue of errors highlighted in the Solace and Verita reports that nobody is being held responsible? It is all very well to say we are going to move forward but surely somebody has got to be responsible, and the management that were in place at the time and responsible for this are still all in place. I would like to have her opinion as to if she is satisfied with this state of affairs?

## The Deputy of Trinity:

The Solace report looked into the actual procedure. In any exclusion, patient safety is the most paramount. It has to be my number one because that is the most important thing but it is very difficult when, as I have said, that there has been a police investigation, which takes precedence, and the police investigation does at this moment take precedence. As we have heard last time, it involved the Health and Safety Inspectorate too. Those are now completed and that is why the Memorandum of Understanding is so important because it will put in place, which is very clear hopefully, which has clear precedence and what can happen, what can still proceed if there is a police investigation.

## 4.11.10 The Deputy of St. Martin:

I think Members will see the value of asking questions, however we do not need to have the wool pulled over our eyes with the answers. Can I have an answer from the Minister as a yes or no? We have heard, or we have not heard how these skills were maintained, not only by this doctor but also the other surgeon who was suspended for 3 years. Can I have an answer from the Minister if indeed she was taken to hospital today, would she be happy for both doctors to operate on her now? Yes or no?

## The Deputy of Trinity:

Are you talking about me personally? I think that is a very difficult question for me to answer. I am sorry but it is a difficult question. There are still some issues outstanding as patient ... and I have a duty of care to that clinician as to about the confidentiality. Regarding commitment with all staff, I am fully committed to all my staff in whatever area they are in, whether they are consultants operating, consultants who look after you medically, whether they are nurses, whether if they are a part of the community, and social workers including the States Manager's staff who make sure that our walls are kept clean to prevent infection. A lot of people go through that hospital and I am proud and pleased that I have full faith in every single one of them.

#### 4.11.11 The Deputy of St. Martin:

Can I take it then that the answer is the Minister would not be happy to be operated on by either of these surgeons on the grounds that they have been de-skilled?

#### The Deputy of Trinity:

I am pleased to say that I am not ill and I do not need a present operation at this time, and as I said, I have full faith in every single member of my staff.