

22.02.08

2 Senator S.W. Pallett of the Minister for Health and Social Services regarding a full independent inspection of services (OQ.23/2022):

Will the Minister provide details to the Assembly of when the last full independent inspection of services provided at all medical facilities within the Minister's portfolio took place; and what independent inspections, if any, have taken place within Health and Community Services since May 2018?

Deputy R.J. Renouf of St. Ouen (The Minister for Health and Social Services):

Independent inspections of services are important to provide assurance about the quality, safety and effectiveness of health and social care services in all modern healthcare systems. Independent inspections of Health and Community Services since May 2018 include inspections by the Jersey Care Commission of over 20 care homes and daycare centres run by H.C.S. (Health and Community Services), health and safety inspections of hospital buildings, pathology and radiology regulatory inspections, independent reviews relating to theatres, mental health, maternity, quality, safety and governance, and the Jersey nursing assessment and accreditation system covering all aspects of patient care including safeguarding patients, patient and environmental safety, medicines management and infection control. But with regard to a full inspection of all medical services at any one time, a broad-ranging inspection of this nature has not been undertaken to date. The Regulation of Care (Jersey) Law 2014 does not currently provide for full independent inspection of medical or hospital facilities by the Jersey Care Commission, although H.C.S.'s care homes and daycare centres are regulated and inspected. The States would need to pass regulations under the 2014 law before this could happen. That has not yet happened because plans agreed in 2019 prioritised independent inspection of both children and adult social work and mental health services by the Jersey Care Commission. However, I am currently consulting the Council of Ministers and the Commission about an alternative approach, which would include bringing forward the necessary regulation to allow for independent regulation by the Commission under the Regulation of Care Law ahead of schedule in 2024 and also, as an interim measure, in partnership with the Commission undertaking an independent survey during the course of this year to allow us to better understand our patient's experience of our services.

3.2.1 Senator S.W. Pallett:

As much as the survey may be of interest to the Minister I think what is interesting to the public is ensuring that Health and Community Services provided within the hospital are meeting current day standards. As much as the Minister said that he will be bringing forward regulations he has had since 2018 to do this. Will he make this his number one priority to ensure that all facilities, especially in the General Hospital, have a full inspection as a matter of urgency?

The Deputy of St. Ouen:

I will make it a priority. As I have said, I am bringing forward the means to have the inspection, which is to create the necessary regulation to allow for that independent regulation. It involves resourcing and preparing the Commission, which of course is not in my gift, and also preparing H.C.S. to meet that sort of inspection. This will be discussed with the Council of Ministers and I undertake to bring that discussion to the Council rapidly.

3.2.2 Connétable A. Jehan of St. John:

Would the Minister agree with me that the law mentioned does not prohibit an inspection but does not make it mandatory currently?

The Deputy of St. Ouen:

Yes, that is correct. But at the moment, the Care Commission is engaged and the States will shortly be receiving, I think, for lodging, its next tranche of work. What we are saying is that the tranche of work that follows will be, subject to agreement with the Commission and Council of Ministers, that piece of work which the Senator and the Connétable are seeking.

3.2.3 The Connétable of St. John:

Given that it does not prohibit an inspection, would the Minister agree with me that at a time of such concern around H.C.S. that an independent inspection would be a positive step?

The Deputy of St. Ouen:

Inspections are always positive and need to be taken in all modern healthcare systems. I have outlined the inspections that we do undertake on a regular basis by way of external review and internal assurance systems and the regulatory - for example, blood and pathology and all sorts of services - are regulated at the moment. This, as I have said, is going to be brought forward as rapidly as we can. It requires co-operation of many bodies, the Care Commission, the Treasury, the Council of Ministers, and all that will be worked on.

3.2.4 Deputy G.P. Southern of St. Helier:

What provision has the Minister laid down to enable the inspection of domiciliary care by the Care Commission and if none, why not?

The Deputy of St. Ouen:

I feel that question is one for the Minister for the Environment, who is the Minister responsible for regulatory functions. Domiciliary care services are presently regulated by the Commission.

3.2.5 Deputy G.P. Southern:

Does that include the application of the ethical care charter to domiciliary care under the powers that the Care Commission has?

The Deputy of St. Ouen:

I cannot speak for the Jersey Care Commission. They would have their parameters as to how they inspect domiciliary care.

3.2.6 Deputy M. Tadier of St. Brelade:

In addition to the possibility of an independent inspection, does the Minister see value in receiving direct staff feedback to find out what problems may exist on the ground and how they may be ameliorated? If so, can he update the Assembly on what mechanisms currently exist and what progress has been made to such staff feedback?

The Deputy of St. Ouen:

Yes, we value staff feedback and changes that have taken place within H.C.S. by organising it into care groups have meant that staff have a structure in which they can feed their concerns and wishes into their care group, which is then taken forward through the structure and implemented. We have the usual procedures that apply in all States of Jersey employment scenarios, that staff can lodge a

complaint, staff can whistle blow, staff can report matters of concern to them. Also I know staff are regularly talking to executives and they also approach me on occasions.

3.2.7 Deputy M. Tadier:

Whether as part of any future inquiry or just general normal workstreams, will the Minister undertake to find new ways to engage with the staff who may not currently engage or may never have been asked for an opinion on their experiences in the workplace so that any grievance can be made throughout the whole system?

The Deputy of St. Ouen:

We are always seeking out ways to communicate with staff and, if there are additional ideas that the Deputy has, I would be very willing to receive them. We are very concerned about our staff's well-being at the moment after the 2 years they have been through and it has been very tiring, very taxing for them. We have a significant well-being programme in place, which would include allowing them to voice their concerns and provide us with feedback.

3.2.7 Deputy I. Gardiner:

I am welcoming the Minister's recognition of the urgency to bring forward an independent inspection of the hospital. I would like to check with the Minister if it would include all satellite services for the General Hospital and not just the General Hospital itself?

The Deputy of St. Ouen:

The care homes that H.C.S. runs are presently regulated and the daycare centres, so I think this would include all medical services. Obviously this has to be worked through with the Care Commission but I cannot imagine why any would be left out.

3.2.8 Deputy I. Gardiner:

There are several services that are not located within the General Hospital, if it is dental or if it some services at Overdale and other places, would they be included in the review as well?

The Deputy of St. Ouen:

Yes, I do not imagine it would be geographically based that it would just be in the Gloucester Street premises. It would be all the medical services provided by H.C.S.

3.2.9 Senator S.C. Ferguson:

How does the Minister reconcile the report of bullying and people being afraid to speak with his wonderful idea about how everybody talks to everybody and everybody can freely discuss matters of concern?

The Bailiff:

I am afraid, Senator, that does not relate to independent inspections of the facilities for Health and Community Services. I cannot allow that as a valid supplemental question. Do you have another supplemental question?

Senator S.C. Ferguson:

Will the examination of what is going on within the department include proper and fair communication with the staff as to their areas of concern?

The Bailiff:

That is a valid question, I think, Minister.

The Deputy of St. Ouen:

Certainly that would be important and I would want that to happen. I am sure the Care Commission would want that to happen. I do not know exactly how these things work but I imagine that would be a fundamental part of the terms of reference, call it what you will, of an inspection.

[10:00]

3.2.10 Senator S.C. Ferguson:

I do not quite understand. Has the Minister not gone into more detail about this given the concerns that are being voiced about matters of concern raised by staff being ignored or being suppressed?

The Deputy of St. Ouen:

There is no need for staff to feel ignored or suppressed. We want to hear their views. We are open and I feel confident that an inspection would rely very heavily on staff views and want to hear them.

3.2.11 Deputy R.J. Ward:

Any inspection should include the role of management in the hospital and the provision of services. Can the Minister assure us that that will include their response to things such as the H.R. Lounge bullying report, which was integral in looking at the way staff are treated and therefore, in the end, the delivery of services?

The Deputy of St. Ouen:

It may well do. I do not think we can get ahead of ourselves and start saying exactly what any inspection would cover. So I think that is a matter to be agreed with the Jersey Care Commission. It would be unusual for a body being inspected to set the parameters of what can and cannot be inspected. I do not feel I can say yes or no.

3.2.12 Deputy R.J. Ward:

Would the Minister be confident that if that was the case and we address those issues that management would have responded to them appropriately? As Minister, is he confident that those issues that are highlighted so significantly have been addressed?

The Deputy of St. Ouen:

I am confident that they are being addressed, if I can put it that way, because it requires culture change. That is what I have been trying to achieve throughout my term, with the assistance and leadership of the management team. The management team now including so many people who have clinical experience and are still working in clinical areas. It is not a quick fix. It is about turning around a large ship and making that cultural change, which is happening.

3.2.13 Senator S.W. Pallett:

I am pleased the Minister is finally talking about what I consider to be a long overdue inspection of medical services, including those in the hospital. Will the Minister commit to providing myself and all Assembly Members a timeline for delivery of a full inspection of hospital services and those under his remit by the next States sitting so that we can fully appreciate or fully understand how he is going to deliver that full inspection?

The Deputy of St. Ouen:

I will circulate to States Members and, as far as I can at this stage, I will try and set that out. If the Senator and Members would understand that this still requires discussions with the Care Commission and Council of Ministers and of course we must seek funding; both the Commission would need funding and H.C.S. need funding for preparation of the inspection. But as far as possible, I will circulate to States Members a full timetable.