

APPROVED

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES
BY DEPUTY M.R. LE HEGARAT OF ST. HELIER
ANSWER TO BE TABLED ON TUESDAY 12th MARCH 2019**

Question

Will the Minister confirm how many Hospital consultants are currently suspended?

Will the Minister explain the reasons why a consultant may be suspended? What is the process for suspending a consultant? For how long may a consultant be suspended; how often is a suspension subject to review before a period of suspension is concluded; and who is given notice that a consultant is suspended?

Will the Minister explain what protections are in place for private patients when a Hospital consultant is suspended but may continue to offer services to such patients?

Answer

Will the Minister confirm how many Hospital consultants are currently suspended?

A number of consultants are currently under exclusion from practice within Health and Community Services (HCS), but as the number is small – less than five – the exact number cannot be stated as this would risk leading to their identification.

Will the Minister explain the reasons why a consultant may be suspended?

A consultant may be excluded in relation to concerns in respect of practice or conduct. Restriction of practice will always be considered as a first measure, however, in order to protect the interest and/or safety of patients, the practitioner and other staff, exclusion may be used in appropriate circumstances. Exclusion is also used in order to assist in an investigative process where there is a clear risk that the practitioner's presence may impede the gathering of evidence.

What is the process for suspending a consultant? For how long may a consultant be suspended; how often is a suspension subject to review before a period of suspension is concluded; and who is given notice that a consultant is suspended?

Where a concern about a consultant arises, the approach to be taken by HCS is set out in the *Policy for the Handling of Concerns and Disciplinary Procedures relating to the Conduct and Performance of Doctors and Dentists*. Where exclusion is deemed an essential course of action, this will be for no more than four weeks at a time. The justification for continued exclusion is reviewed on a regular basis and before any further four-week period of exclusion is imposed.

Where a consultant is excluded, the Medical Director will inform the General Medical Council and discuss the case to ensure no additional restrictions or withholding of licence to practice is required. The Minister for Health and Social Services is also informed of any exclusions.

Following a formal meeting with the practitioner, the formal exclusion is confirmed in writing, as soon as is reasonably practicable. This confirmation will state the effective date and time; duration (up to 4 weeks); the content of the allegations; the terms of the exclusion; the need to remain available for work; and that a full investigation (or what other action) will follow. The practitioner will be advised that they may make reasonable representations about the exclusion at any time after receipt of the letter confirming the exclusion.

In cases where disciplinary procedures are being followed, and where a return to work is considered inappropriate, exclusion may be extended for four-week renewable periods. The exclusion will still only last for four weeks at a time and be subject to review. The exclusion will be lifted, and the practitioner allowed to return to work, with or without conditions placed upon their employment, as soon as the original reasons for exclusion no longer apply.

Will the Minister explain what protections are in place for private patients when a Hospital consultant is suspended but may continue to offer services to such patients?

HCS has no jurisdiction over a consultant who practises privately outside of their programmed 'public' activity. Individual practitioners are responsible for their indemnity insurance and accountability with their regulatory body. However, in serious circumstances, a referral will be made to the General Medical Council which may impose restrictions on practice or interim suspension orders on a practitioner preventing them from practising if it is considered that there is a risk to patient safety.