

### **3.9 Deputy R.G. Le Hérissier of the Minister for Health and Social Services regarding recommendations made by the Francis Inquiry investigating the Mid Staffordshire NHS Foundation Trust:**

In the light of recent events at the Mid-Staffordshire N.H.S. (National Health Service) Foundation Trust, and the recommendations made by the subsequent Francis Inquiry, would the Minister state how, if at all, she will be applying the recommendations to Jersey.

#### **The Deputy of Trinity (The Minister for Health and Social Services):**

All reports published at any time are reviewed to identify any opportunities for learning further or enhancing our services across Health and Social Services. The Francis Report made 290 recommendations, a third of which related to the role of the regulation of the N.H.S. I am pleased to say that we have already in place processes that would address some of the other concerns highlighted in the Francis Report. Nevertheless, we have established an oversight group to review this and any other independent inquiries' reports and we shall identify and respond to any other issues that may be related to our health services in Jersey.

#### **3.9.1 Deputy R.G. Le Hérissier:**

I wonder if the Minister could tell the House who are the members of that group and when does she expect the group to report?

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

The oversight group is from clinicians and management from the hospital, Family Nursing Services, the Care Federation, voluntary and community sector and also I think there are some G.P.s (General Practitioners) involved too. They will do an action plan but they will also consider the other reports that have come out since, which is the Beswick Report, the Keogh Report, and I understand that the Royal Colleges of Physicians and Surgeons have reviewed and will make their recommendations too. So it is a wide-ranging listing of recommendations which we need to put in the pot and review.

#### **3.9.2 Deputy J.H. Young:**

The Francis Report included numerous references to the Care Quality Commission in the U.K. which provides an independent body for investigating complaints and to maintaining and reporting of clinical standards. Can the Minister say whether or not any such equivalent arrangements exist in Jersey and, if not, will she, in this review she has been describing, be having a look at how we can cover that same ground in Jersey?

[10:45]

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

The C.Q.C. (Care Quality Commission) only regulates in England; Wales and Scotland have their own regulatory body. As you know, we do not have any regulatory body but that is part of the ones being addressed in the Regulation of Care Law, which will come to this Assembly the middle of next year.

#### **3.9.3 Deputy J.H. Young:**

A clarification, if I may. Could the Minister confirm that that arrangement she cited does include independent investigations against matters that go wrong?

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

The Regulation of Care will include an inspection and regulatory group and we are working in conjunction with Guernsey and the Isle of Man, because they are in similar circumstances. As it stands at this present moment in time, the only regulation and inspection goes into nursing and residential homes and so none of the Health and Social Services Department is regulated, which,

when I became Minister, I felt that was important that we put regulation in place. But it is in the law coming next year, hopefully, if this House approves it.

#### **3.9.4 Deputy R.G. Le Hérissier:**

One of the overarching findings of Mid-Staffordshire was the total detachment and alienation of staff from patients, which was incredibly sad. The Minister has read out a very impressive list of participants in the study, but the patients are not mentioned, or the population. Will she set up a structure so that there is feedback from patients and the broader population which can inform the future structures to bring about greater independence?

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

Indeed. That is already in place. One of the main features that came out of the Francis Report was listening to patients and to our staff, and we have a great range of measures already in place. We might not have the law in place, but it does not mean to say that we are not doing the work. I would stress a lot of work is being done to make sure that that hospital and the Health and Social Services Department is fit for purpose and is safe for patients, because that is my main priority. Going back to the patients, listening to patients is important and is paramount. We have a full complaints system, including compliments, we have a newly set-up listening post which is when patients and their relatives feel that there is something not quite right, or even to give praise. That is done through an independent group. We have a patient advisory panel; we investigate everything and we have a proper whistle-blowing procedure for grievances, and we also participate in the national patient surveys.