

2014.09.22

**3.7 Connétable P.J. Rondel of St. John of the Minister for Health and Social Services regarding hospital waiting times to see specialists in all departments:**

Would the Minister provide details of the average hospital waiting time to see specialists in all departments, particularly the eye clinic? Will she advise whether there are some disruptions in senior staffing in the eye department recently and, if so, explain how this has been resolved?

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

Average waiting times in departments across the hospital are now published on the States website and I would refer Members to the detailed response I have already provided to the Constable's written question. The average wait for patients seen in the ophthalmology clinic over the past 3 months has been less than 8 weeks. The hospital has had vacancies at consultant level within that service. These have been banished by adopting a number of strategies that have included the utilisation of locums and temporary staff and the transfer off-Island of a small number of patients. I am delighted to report that as of 15th September we have a full on-Island team consisting of 3 permanent consultants.

**3.7.1 The Connétable of St. John:**

Can the Minister explain then why when a G.P. (general practitioner) writes for an appointment or a referral to the eye clinic back in early March, can she explain why on 16th June the patient received a letter from the eye clinic to say that patient had been put on a waiting list and at the time of asking this question no other contact has been received from the hospital? That is some 6 months from the original referral.

**The Deputy of Trinity:**

As this Assembly knows it is very difficult to go into individual letters and I am very happy to ... if the Constable and I just want to talk about it, and I will investigate. All referrals done by G.P. are clinically assessed into they are either urgent, soon or routine. They go on the appropriate waiting list accordingly. But regarding that specific issue, I am quite happy to take it up.

**3.7.2 The Connétable of St. John:**

Given the answer we have been given that within the eye clinic, some 8 weeks is the waiting time, when will these patients that have been put on whatever list it may be, the slowest list, gets some response from the department? Because 6 months, 3 months, both those are well over the 8 weeks that we have been given. Will she also explain how long has the department, i.e. the eye clinic, been running short of one of the consultants?

**The Deputy of Trinity:**

As I said, the referrals that come from a G.P. are always clinically assessed appropriately and if there is any change in that patient's condition the G.P. contacts the appropriate consultant to update with a condition. The issue in the eye clinic has been for approximately about a year, but very pleased that we have 3 permanent consultants. Regarding the level of consultants, in the U.K. it will be 2 eye clinic consultants regarded for a population of 100,000 and we have 3 per 100,000, which I am very pleased about.

**The Connétable of St. John:**

Supplementary?

**The Bailiff:**

No, I am sorry ...

**The Connétable of St. John:**

Nobody else has asked some questions. It is my last question in this Chamber and you will not even give me a supplementary. **[Approbation]**

**The Bailiff:**

Connétable, you do tug at the heart strings. **[Laughter]**

**The Connétable of St. John:**

Do not cut me off at the knees again, Sir.

**The Bailiff:**

Very last question. **[Aside] [Laughter]**

**3.7.3 The Connétable of St. John:**

With the answer we have just been given; extra visits. Why is it taking so long for the people who are supposed to refer back to their G.P., which has a cost implication because there is a referral already been sent in, so that patient is waiting. If he has to go back to his G.P. that is another £30 or £40 out of that patient's pocket, why do they have to go back when they have already received one letter back in June, or the only letter in June from the hospital; why would they have to go back, getting worse or not, when they believe they are in a waiting list? Surely something is wrong somewhere within the department.

**The Deputy of Trinity:**

No, all referrals, as I said, are clinically assessed and sometimes the patient's condition can change and it is important that liaison from the G.P. to the hospital, that communication, continues because a patient's condition can change quite swiftly, so that is important. As regarding the specific issue about presumably a parishioner, I am very happy to take it up with you and look into the details.