WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES
BY DEPUTY J. RENOUF OF ST. BRELADE
QUESTION SUBMITTED ON MONDAY 2nd MARCH 2026
ANSWER TO BE TABLED ON MONDAY 9th MARCH 2026

Question

"Further to the publication of the Royal College of Physicians (RCP) review into the Neurology Department report, will the Minister advise –

(a) why the Health department nominated cases for review rather than allowing the RCP to choose them at random, as originally agreed, and who made this decision;
(b) what plans, if any, the department has to employ a second consultant neurologist, as recommended in the report, and if there are no such plans, why not; and
(c) whether all the recommendations are going to be accepted, and if so, in what time frame will they be implemented, and if not will he identify which recommendations are not going to be accepted and explain why not?"

Answer

In January and February 2025, the Royal College of Physicians (RCP) carried out an invited review of the Jersey Neurology Service. The review was commissioned by Health and Care Jersey (HCJ) to support planning for the future delivery of the service following the retirement of the Consultant Neurologist. The RCP concluded that:

"There was a strong commitment among all those involved with the neurology service and its management, including the ministerial team, to improving neurology patient care. The review team felt that there were positive foundations in place to support a new model with extra resource for a team who are dedicated to improving patient outcomes."

In response to each of the specific queries:

(a) The RCP do not select cases, and this was not an option. They request that the host organisation randomly select cases for them. This was the original agreement, and no decision was made to vary from the request made by the RCP for HCJ to select the cases. The 12 cases were selected randomly by the Medicines Care Group to support the RCP in understanding pathways and make recommendations for future models of care, rather than through a statistical sampling method, which the RCP noted would be required if the purpose had been to investigate specific clinical concerns.
(b) Before the RCP report it was recognised that the appointment of a second consultant neurologist was required for a range of reasons, including the HCJ desire to reduce the number of single-handed practitioners to help strengthen clinical governance and improve the resilience of services to patients. HCJ will, therefore, adopt this RCP recommendation.
(c) All the RCP recommendations have been adopted by HCJ. These were detailed in an action plan with timelines published on 19th February and considered in public by the HCJ Advisory Board on 26th February 2026.