



PROCEEDINGS OF THE GIBRALTAR PARLIAMENT

AFTERNOON SESSION: 3.30 p.m. – 6.15 p.m.

Gibraltar, Tuesday, 21st May 2024

Contents

Prayer	3
Order of the Day	3
Confirmation of Minutes	3
Announcements	3
Government Ministers' absence	3
Papers to be laid	4
GHA Audited Accounts	4
Heritage and Antiquities Advisory Council for 2023.....	4
Questions for Oral Answer	5
Health, Care and Business	5
Q367/2024 Child Care Provision – Free for children over nine months.....	5
Q368-370/2024 Integration of Care Agency – Consultation clarification; restructure	6
Q371/2024 Respite Services Agency – Alternative locations and solutions	9
Q372/2024 Hoist at the Boat House – Malfunctions last 12 months; functionality status....	11
Q373/2024 Care Agency complaints – Clinical practices, governance, safeguarding residents	13
Q374/2024 Staff transfers to GHA – Numbers accepted and signed.....	15
Q375/2024 Care Agency Recruitment – Finance Director and Procurement Adviser; separate vacancies.....	16
Q376-77/2024 Donation Fund – Managed; sources; purpose; policies; guidelines; investigations.....	17

Q378/2024 Relocation of wards – Ocean Views to St Bernard’s Hospital.....	20
Q379/2024 Ocean View admissions – Month by month from September.....	20
Q380/2024 John Cochrane Ward – Number of residents; total capacity.....	21
Q381/2024 Industrial Action – Staff walkouts.....	21
Q382–83/2024 Mount Alvernia, Hillsides, John Cochrane and John Mackintosh ERS facilities – Residents 2019 to present date; residents passed in calendar year	22
Q384/2024 Managements of ERS facilities and sites – Tenders specified	25
Q385-88/2024 Management of care plans – Responsibility; standards; subcontracted companies; zero-hour contracts	26
Q389/2024 Respite services for under-16s – Location; cost to service users and families...	32
Q390/2024 Sub-contracting services – Cost effective for the taxpayer	33
Q391/2024 Services to be sub-contracted – Additional tenders; services planned.....	35
Q392-93/2024 C Sullivan v. the Care Agency – Prevention of similar negligence; settlement	35
<i>The House recessed at 5.15 p.m. and resumed at 5.25 p.m</i>	37
Q394/2024 Shift Patterns for Allied Health Professionals –	37
Q395/2024 Emergency call handling – Envisaged timeline; control room staff.....	38
Q396-97/2024 Frontline emergency ambulance – Procurement cost; rapid response vehicles operational	39
Q398-99/2024 Chaperoning of patients – Examination protocol; safeguarding.....	40
Q400/2024 Prescription printers – Introduction; cost; resources; replacement	41
Q401/2024 Ozempic – Health complaints after taking.....	42
Q402/2024 New Community Mental Health Facility – Recruitment: psychiatrists, psychologists, specialist mental health nurses	43
Q403/2024 Autism Spectrum Disorder and Attention Deficit Hyperactivity pathways – Addressing shortfall	43
Q404-08/2024 Psychologist waiting times – Sufficient; intact; employment; contractual arrangements; waiting lists	44
Q409-13/2024 Psychiatrist waiting times – Sufficient; intact; employment; contractual arrangements; waiting lists	46
Q414/2024 Effects of refinery – Impact on health; planned study	48
Q415-16/2024 Cancer diagnoses – Higher than Europe/world; types of cancer	48
Q416/2024 Supplementaries – Cancer diagnoses	51
Q417/2024 Accountability Agreement – Safeguards ensuring independence of appointments	53
<i>The House adjourned at 6.15 p.m.</i>	54

The Gibraltar Parliament

The Parliament met at 3.30 p.m.

MADAM SPEAKER: Hon. Judge K Ramagge GMH *in the Chair*

CLERK TO THE PARLIAMENT: J B Reyes Esq *in attendance*

PRAYER

Madam Speaker

Order of the Day

CONFIRMATION OF MINUTES

Clerk: Meeting of Parliament Tuesday, 21st May 2024.

Order of Proceedings: (ii) Confirmation of Minutes – the Minutes of the 6th meeting of 15th Parliament which was held on 13th, 14th, 15th, 22nd and 25th March 2024.

5

Madam Speaker: May I sign the Minutes as correct?

Members: Aye.

10

Madam Speaker signed the Minutes.

ANNOUNCEMENTS

Government Ministers' absence

Clerk: (iii) Communications from the Chair.

15

Madam Speaker: Just a very quick reminder, I see that there are some Government Ministers absent, so any Shadow Minister with questions for those Ministers who are absent who would like them converted into answers in writing that would happen automatically. If you want oral answers, then I remind you of the provisions of Rule 16.2 where you can request oral answer for the next time. Yes?

20

Hon. Dr K Azopardi: Thank you, Madam Speaker, I was going to enquire at the appropriate moment but as Madam Speaker has raised it now when we received the Business Order of the Day, we just were not clear whether those Ministers – obviously we understand that the

Hon. Mr Bruzon is away, but in respect to the other Ministers we were unsure if that was in relation to today or the whole week.

25 **Madam Speaker:** I do not know.

Chief Minister (Hon. F R Picardo): As I understand it, the whole week, Madam Speaker.

30 **Madam Speaker:** All right. So you know the procedure if you want Oral Questions.

Clerk: (iv) Petitions; (v) Announcements.

PAPERS TO BE LAID

Clerk: (vi) Papers to be laid.
The Hon. the Chief Minister.

35 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I have the honour to lay on the table the Ombudsman's Annual Report for the year ended 31st December 2023.

Madam Speaker: Ordered to lie.

GHA Audited Accounts

Clerk: The Hon. the Minister for Health, Care and Business.

40 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I have the honour to lay on the table the GHA Audited Accounts for the financial year ended 31st March 2010; the GHA Audited Accounts for the financial year ended 31st March 2011; the GHA Audited Accounts for the financial year ended 31st March 2012; the GHA Audited Accounts for the financial year ended 31st March 2013; the Care Agency Audited Accounts for the financial year ended 31st March 2011; the Care Agency Audited Accounts for the financial year ended 31st March 2012;
45 the Care Agency Audited Accounts for the financial year ended 31st March 2013; the Care Agency Audited Accounts for the financial year ended 31st March 2014; the Care Agency Audit Accounts for the financial year ended 31st March 2015; and the Mental Health Board Annual Inspection Report 2023.

50 **Madam Speaker:** Ordered to lie.

Heritage and Antiquities Advisory Council for 2023

Clerk: The Hon. the Minister for Education, the Environment and Climate Change.

55 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, I have the honour to lay on the table the report of the Heritage and Antiquities Advisory Council for 2023.

Madam Speaker: Ordered to lie.

Questions for Oral Answer

HEALTH, CARE AND BUSINESS

Q367/2024

Child Care Provision – Free for children over nine months

Clerk: (vii) Reports of Committees; (viii) Answers to Oral Questions.
Questions to the Hon. the Minister for Health, Care and Business. Question 367/2024, the
60 Hon. A Sanchez.

Hon. A Sanchez: Madam Speaker, is the Government still exploring the possibility of providing free child care for children over nine months of age?

65 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, we are committed to doing a feasibility study as stated in our Manifesto. My colleague, the Hon. Minister of Education and I will be jointly meeting to discuss the remit of the study.
70

Hon. A Sanchez: Madam Speaker, does the hon. Member have a time frame in mind for this study?

75 **Hon. G Arias-Vasquez:** Madam Speaker, we do not have a time frame for this yet. It is a manifesto commitment.

Hon. A Sanchez: Madam Speaker, does the hon. Member envisage that this childcare provision will be modelled around the free childcare currently available in the UK?

80 **Hon. G Arias-Vasquez:** Madam Speaker, as stated in my original answer, at the moment we are committed to doing a feasibility study to see what is possible and what is not. When we know the outcome of that feasibility study we will know what we are able to offer or otherwise.

85 **Hon. A Sanchez:** Madam Speaker, can the hon. Member confirm whether wraparound care is also part of the feasibility study that they are conducting?

Hon. G Arias-Vasquez: Madam Speaker, all of the aspects of childcare will be contained in the feasibility study.

90 **Madam Speaker:** Next question.

Q368-370/2024
Integration of Care Agency –
Consultation clarification; restructure

Clerk: Question 368/2024. The Hon. A Sanchez.

Hon. A Sanchez: As per Government press release 244/2024, could the Government confirm when the consultation about the possible integration of the Care Agency into the GHA Board commenced? Additionally, could they clarify if the consultation is still ongoing and who was or is involved in this consultation?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Questions 369/2024 and 370/2024.

Clerk: Question 369/2024, the Hon. A Sanchez.

Hon. A Sanchez: In relation to press release 244/2024, could the Government confirm whether senior management at the Care Agency and the ERS were advised about the possible integration before the publication of this Government press release?

Clerk: Question 370/2024, the Hon. A Sanchez.

Hon. A Sanchez: As per Government press release 244/2024, could the Government please clarify the cost, if any, to the Taxpayer or Mr Cumming's advisory role to the Minister for Health moving forward, inclusive of all allowances and additional benefits in kind?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Hon. G Arias-Vasquez: Madam Speaker, in answer to question 368/2024 the first meeting on the consultation was held on 12th April 2024 with the heads of services for the Care Agency. The consultation is still ongoing and meetings are in the diary for the summer months. All key stakeholders and their unions will be involved. Invites have already been sent out and the consultation is ongoing.

In answer to Question 369/2024 yes, Madam Speaker, I discussed the possible changes to how the GHA and the Care Agency would work more closely together with senior figures in each of the three organisations; and in answer to Question 370/2024, there will be no allowances or additional benefits save for covering any travel expenses if we would prefer that Prof. Cumming attends the meetings in person.

We have yet to determine a figure, but I am happy to share that figure once that is approved. Prof. Cumming will provide advice to me, as Health and Care Minister, and will work upon specific projects agreed with the GHA.

Hon. A Sanchez: Madam Speaker, in relation to Question 369/2024, Government press release 244/2024 announced a Health and Care restructure. Is it correct to assume that as part of that restructure the Care Agency's integration into the GHA Board will become effective as from September 2024?

Hon. G Arias-Vasquez: Madam Speaker, the purpose of the consultation is to determine whether or not that is a good idea or otherwise. So it is likely that the CEO of the Care Agency will sit on the GHA Board, but it is not confirmed that that would be the case or otherwise.

140 **Hon. A Sanchez:** Madam Speaker, could the hon. Member state what will happen if the staff Members of the Care Agency and the ERS opposed the integration and would rather remain functioning as they currently are?

Madam Speaker: That is a hypothetical question, so I am not going to allow that.

145 **Hon. A Sanchez:** Madam Speaker, the information that we have is that, in fact, very few consultation meetings have taken place and the ones that have are rather implementation meetings with a view to get the integration move done and completed as soon as possible. Could the hon. Member provide clarification on this?

150 **Hon. G Arias-Vasquez:** Madam Speaker, of course, in every single meeting that we have had so far we have made clear that there is no specific design on what the outcome of the consultation is. In fact, in many of the meetings the union has sought to ask us what the intention is in terms of the proposed merger and we have *specifically* said, in each and every meeting, that there is no specific outcome because that is the very purpose of the consultation.

155 The purpose of the consultation is to determine how it is best to implement any changes *if* these changes are determined to be beneficial to the Care Agency and the GHA.

Hon. A Sanchez: And aside from very senior grades in the Care Agency such as the CEO, for example, can the hon. Member confirm that consultation is being extended to heads of service, managers and other personnel within the Care Agency and the ERS to ascertain their views on the integration?

165 **Hon. G Arias-Vasquez:** Madam Speaker, of course, I can confirm that we have already held a meeting, as I have stated previously, with the heads of service of the Care Agency, and the consultation will trickle down into each and every level of the Care Agency, ERS and indeed the GHA.

So the consultation is not just solely with management, the consultation is with each and every level of the Care Agency and the ERS. We might not be able to meet with each and every individual, but we will be able to meet with people who represent the different interest groups.

170

Madam Speaker: Any other questions?

175 **Hon. Dr K Azopardi:** Can I just ask on this aspect, the consultation, the Hon. Minister indicates that the first meeting took place on 12th April, so it is about 5 weeks ago: how long does she envisage the consultation will take place before the Government will be in a position to take a policy view as to whether or not the merger would take place?

180 **Hon. G Arias-Vasquez:** Madam Speaker, again, in the meetings with the numerous interested parties and the numerous stakeholders, what we have said is that the consultation will take as long as the consultation needs to take.

We will make sure that everyone is consulted and we will make sure that everyone's views are taken into consideration. So I would not like to make a date, a firm commitment as to the date of the *ending* of the consultation, because I would rather do the consultation properly with everyone consulted rather than rush into an end date for the sake of an end date.

185

Hon. Dr K Azopardi: I welcome that position. So when the date of 1st September 2024 has been bandied about, it is no more than notional at this stage because the Government itself wishes to conduct a consultation as long as it wishes, or as long as it is necessary to do so. So this date is not fixed in time in any way.

190

Hon. G Arias-Vasquez: The date of September, to be clear, is the date that the Chairmanship of the GHA will change. So, in June, myself and Prof. Cumming will sit together on the Board of the GHA and will chair the Board together.

195 In September, I will chair the Board of the GHA for the first time. So that is the date of 12th June. But, no, you are absolutely correct the consultation will take as long as the consultation needs to take. It will not go on forever, but it will take as long as it needs to take to make sure that everyone is on board.

200 **Madam Speaker:** Any other questions?

Hon. A Sanchez: Madam Speaker, in relation to question 370/2024. When will the hon. Member be able to clarify the cost of the advisory role that Mr Cumming will be provided to – how specifically, moving forward?

205 **Hon. G Arias-Vasquez:** Madam Speaker, Prof. Cumming is here for an extended period in June, when we will be chairing the Board together. We intend to have discussions then.

But for the moment I am not particularly worried as he is rolling over 19 days from his current contract, which means that we have 19 days of services available to use. So, in June, we envisage to sit down and have a discussion about his agreement with the Government. So shortly thereafter we should be in a position to confirm.

210

Hon. A Sanchez: Madam Speaker, how many more of these appointments without vacancies or recruitment processes does the Minister envisage that she will need to appoint at a cost to the taxpayer, to advise her on the management of her Ministry?

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Hon. G Arias-Vasquez: Madam Speaker, there are some instances when the expertise that is afforded by these individuals actually lead to savings. There are some instances when the expertise of individuals in terms of, for example, Prof. Ian Cumming has turned around numerous hospitals in the UK, particularly in relation to theatre, theatre management and the ambulance service.

220

So there are certain instances when I will not shy away from making these types of appointments, at a limited cost to the taxpayer, in order to save us money in the longer term. I think this appointment is one of those that saves us significant money in the longer term and makes sure that there are efficiencies in the way that the theatres and the ambulances, for example, are run.

225

Hon. A Sanchez: Madam Speaker, the hon. Member has a Board that she has now announced that she will become a Chair of, that is full of professionals to advise her. She has a Director General, she has a Medical Director, she has a hospital full of clinicians that she claims run the hospital independently. We have already ventilated the issue of recruitment of a Procurement Adviser to the Ministry of Health and Business, also doubling up as a finance worker of the Care Agency without a recruitment process being remunerated twice.

230

Now we have another recruitment of another advisory role without a selection process. At this rate the hon. Member is going to need a whole floor in your report for her advisers. *(Interjections)* I assume or I presume that the hon. Member is not going to need any more individuals to advise her on her responsibility, or is she going to need any more individuals? And if she is, can she confirm that there will be a transparent and fair recruitment process for the recruitment of these individuals? Can she at least confirm that?

235

240 **Hon. G Arias-Vasquez:** I refer the hon. Member to the answer I gave a few moments ago.

Madam Speaker: Next question.

Q371/2024
Respite Services Agency –
Alternative locations and solutions

Clerk: Question 371/2024. The Hon. A Sanchez.

245 **Hon. A Sanchez:** In situations where the Boat House location currently used for respite services for individuals under 16 does not meet the needs and requirements of some service users, for various reasons, can the Government confirm what alternative locations and solutions are being offered to families for the delivery of respite services for those under the age of 16?

250 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, in the instances where the Boat House has been assessed as not meeting the needs and the requirements of some service users, then alternatives have been sought. For some service users this has taken the form of outsourcing to PossAbilities. For others, it has been offering a package of home support and/or depending on the age and presenting needs of the service users, respite has taken place within St Bernadette's Resource Centre.

The Care Agency's Community Learning Disability Team has been creative in offering solutions to complex cases that have required bespoke packages of care.

260 The manner of respite delivered is assessed and identified by the social worker using a holistic approach and bringing together all stakeholders involved in the care of the service user. When it is *not* suitable for the child to remain in the Boat House they may be supported out and about using other community resources.

265 In order to offer more support for the increasing demand, the services have been put out for tender. This is meant to deal with the issues that have arisen in this respect. This is currently being processed and the outcome will be shared with the public in the near future.

270 **Hon. A Sanchez:** Madam Speaker, can the hon. Member clarify in situations where the services that are provided in the Boat House do not meet the needs of certain individuals, home support does not meet the needs of certain individuals for different reasons, certain individuals cannot access a similar centre due to their age, what alternatives are provided for these individuals? We have information that there are individuals who cannot access respite services because the Government cannot find suitable alternatives for them.

275 I do not know if the hon. Member is aware of these situations, but can the Government confirm what it is doing for these individuals?

Hon. G Arias-Vasquez: Madam Speaker, I am grateful to the hon. Member for providing me with the opportunity to highlight what an amazing service we offer in the respite team.

280 So in respite, to put things in perspective, respite is a service which has grown exponentially in the past 8 to 10 years. Respite is a service which was not available 8 to 10 years ago, but has grown organically and is actually a service which is very welcome by the majority of the service users.

So when the Boat House is not available we try to offer alternative services. So we try to offer services in the service user's home. We try to offer alternatives, in PossAbilities, as I have stated.

285 Yes, I am aware of some situations and I am aware of the particular circumstances of the individual you are referring to, where the situation is not deemed available because there is not enough space in the Boat House. So because there is not enough space in the Boat House – and we are talking about space for the children to move around the floor – we have currently put these services out to tender because we are looking for a place that has the space available to offer these children the environment that they need.

290 So when we have put the services out to tender it is very much as a consequence of the requirements of the service users today, and to try to ensure that we continue to offer a service to the service users that meets each and every service users' needs.

Hon. A Sanchez: I appreciate that answer. But what is being done for these individuals *now*?
295 Because it is my understanding that the solution to that issue is not going to be resolved until July because the tender process is not going to be complete until July.

So is a solution for families like this, no respite until July, because these families have been facing inadequate respite for years? Is the solution for those families no respite until July or can the Government offer alternative respite and adequate respite until you complete the tender
300 process?

That is my question. Or is there no support and assistance for those families?

Hon. G Arias-Vasquez: Madam Speaker, I understand that the hon. Member is trying to seek an answer for me to say that there is no respite available. The Care Agency goes above and beyond
305 to make sure that each and every individual service user's needs are met.

The Care Agency and its staff, who are fantastic and know the requirements of each and every service user, will try to meet individual needs, be it by the Boat House, be it by possibilities or be it by trying to address them in their house. Now, knowing that some users do not have the services available because in none of those three instances are they able to cope, that is why we are trying
310 to go out to tender to make sure that the services are met in future.

So I am not sure, especially given that this is a nascent service which started eight years ago to offer families that need their help and support, the services that they need. I appreciate that the hon. Member does not like to be reminded of this, but this is a service which has been offered from 8-to-10 years ago, which is trying to take into account the needs of each and every service
315 user that uses the service.

So the Care Agency tries to go above and beyond to meet the individual needs of each and every Agency; and in fact this very morning I had a meeting where the service users of the respite were telling me how happy they are with the service that has been provided. So I think that is a testament to the fact that the team at the Care Agency goes the extra mile to ensure that each
320 and every one of the users of the service, their needs are met and they try to meet them in three different ways.

Now, knowing that that is not enough for some people, we are going out to tender to find additional space and additional services to cater for each and every one of the service users' needs.
325

Madam Speaker: Yes?

Hon. D J Bossino: Can I ask just one specific question if the Hon. Minister would care to answer? When she talks about – she has mentioned space and I think she mentions space in the context of
330 floor space – and she mentions that particularly in relation to the Boat House and the lack of availability because of the limited space once again available.

As part of the tender process is it the intention that the tender provider will also be providing floor space and area to which these children and users will attend? Is that the idea?

Hon. G Arias-Vasquez: We are looking for an improvement in the overall product. So we have gone out to tender to ask what is available for the users of respite services? And we look to get back – whether it be space, whether it be capacity, whether it be service – we need to get back
335 what is best for the service users of the respite services.

340 **Hon. D J Bossino:** I have not had a look at my hon. Friend's questions which I think touch upon this area, but I was one of the beneficiaries of her exposé this morning, as a parent of one of the users. I attended in that capacity, just to make it clear.

But she did say in that meeting that the contract will be in place by 1st July, I think she said. Are we not – given that we are now at the end of May – further advanced than what I think she is
345 letting on in answer to the question now?

In other words, does she not have a clearer idea as to these broad specifics? She may have them and she is not able to share them across the floor of the House and I accept that. But could she at least say that she does have an idea of where things are going in that regard?

350 **Hon. G Arias-Vasquez:** Madam Speaker, I know the tender in broad terms. We have not felt it appropriate for me to get involved in the nitty-gritty of the tender. There is a tender board, a tender process, and the Care Agency is running with that; and as we have always said it is for them to run with that tender, for them to know the ins and outs of it and exactly what they are offering.

So at the moment, the tender is out. The tender has not closed yet, but yes we fully intend to
355 have the tender in place by 1st July. There may be some slippage to that date but it should be 1st July or thereabouts.

Hon. D J Bossino: And would the Government be in a position then to announce who the successful tenderer is? I am not sure exactly how these things work, but is that the stage when
360 you would have – or the Government would have – advanced terms and conditions as far as the agreement is concerned? Or will that happen after an announcement is made as to who the successful tenderer is?

Hon. G Arias-Vasquez: Madam Speaker, part of the tender package are the terms and
365 conditions of the contract, so that has already gone out to the people that are interested. So by 1st July the contract should be signed and yes, of course, as soon as the tender is signed and it is signed off by the tender board we will be making that public as to who has got the tender in that regard.

370 **Madam Speaker:** Next question.

Q372/2024

Hoist at the Boat House – Malfunctions last 12 months; functionality status

Clerk: Question 372/2024. The Hon. A Sanchez.

Hon. A Sanchez: Can the Government confirm if the hoist at the Boat House has experienced any malfunctions within the last 12 months? Additionally, can they provide information on its
375 current functionality status and specify the dates and duration during which it was not working correctly?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

380 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, when the Boat House was kindly offered in November 2022 by the GSLA to provide the premises for the Community Learning Disability Team's respite services, the bathroom facilities were not in full working order. The bathroom has a ceiling hoist that requires specialist parts to be replaced.

385 A request for repair is being processed by the GSLA who is waiting for the specialist company to undertake this.

The use of a different mobile hoist is not indicated due to health and safety reasons. Initially, children accessing the service did not require the use of the hoist. Since providing the service, only two children have required the use of the hoist and alternative arrangements have been made for those two children for them to access respite outside of the Boat House.

390

Madam Speaker: Any questions?

Hon. A Sanchez: Madam Speaker, can the hon. Member confirm whether the services being provided in the Boat House had children requiring the use of the hoist for an extended period of time?

395

Hon. G Arias-Vasquez: Madam Speaker, as I have previously stated, to my knowledge there were two children that required the use of the hoist and alternative arrangements were made for those two children.

400

Hon. A Sanchez: Does the hon. Member not agree that the hoist should have been in working condition whilst these children were using these services before it was agreed that it would be a suitable location for these children to be provided with respite services?

Hon. G Arias-Vasquez: Madam Speaker, the respite services are provided to far more than two children. I think the figure is around 25 children that have received respite services at the Boat House. I am not confirming that figure, but I think that is a rough figure of the number of children that are provided with respite services at the Boat House.

405

Now, initially, the full number of children that received this care at the Boat House did not need the hoist, so the hoist was never used. Since these two children have needed it they have found alternative premises, because it has been found that they cannot use a hoist. They are trying to fix the hoist.

410

So would I agree that the hoist needs fixing? The hoist needs fixing but the children have been found with alternative premises, which they can attend, which has suitable facilities for them.

415

Hon. A Sanchez: Madam Speaker, but the Government is providing respite services by a disability team at the Care Agency in a facility where a hoist does not work. It is malfunctioning; it has not worked from the beginning. Does the hon. Member think that this is appropriate? I think it is one of the first things that should have been checked.

420

Hon. G Arias-Vasquez: Madam Speaker, as I have already said the GSLA is *lending* the Care Agency these facilities. So if 23 children can actually be housed and be offered respite services, then let those 23 children go there and be offered the respite services they require.

425

If the hoist is broken, we are looking at ways to fix the hoist but specialist parts are needed and they have been ordered. But as I have said, the two children that required the hoist have been located elsewhere so that they can enjoy the respite services.

Hon. A Sanchez: Madam Speaker, but I remind the hon. Member that it is not only about those 23 children, it is about the other two children that needed to use that facility and could not because the hoist was not working. It is not a matter of the Government finding them another facility, it is a matter of the fact that those two children cannot use that facility because the hoist is not working and it should have been working.

430

Madam Speaker: Question?

435

Hon. A Sanchez: I remind ... [*Inaudible*] has not been given an alternative facility because the Government cannot find an alternative facility for one of those children. So (*Interjection by Madam Speaker*) would the hon. Member ... [*Inaudible*] in the Boat House?

440 **Hon. G Arias-Vasquez:** Madam Speaker, I have told the hon. Lady previously that respite services are provided in the Boat House. If the Boat House is not adequate for the purpose of the child, they are provided services in PossAbilities. If PossAbilities is inadequate for the child they are found different respite services at home.

The Care Agency bends over backwards to ensure that each and every child's needs are met.
445 Notwithstanding that, given that (1) the need is increasing, and (2) that there are some children that need more space, we are putting the facilities out, we are putting the services out to tender to see if we can further improve the facilities.

I do not think there is much more that is humanly possible for a service that started 8 to
450 are showing that we are improving that service by looking to what further is available in the community.

Madam Speaker: Next question.

Q373/2024

Care Agency complaints – Clinical practices, governance, safeguarding residents

Clerk: Question 373/2024. The Hon. A Sanchez.

455

Hon. A Sanchez: Has senior-level management in the GHA, ERS, PALS and/or Human Resources within these Departments or agencies received any concerns or complaints regarding clinical practices, governance and/or safeguarding of residents at any of the ERS sites or facilities?

460

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, senior level management in the GHA, ERS, PALS and/or Human Resources are continuously made aware of any concerns or complaints regarding clinical practices, governance and/or safeguarding of residents at any of the ERS sites or facilities and the wider GHA.
465

The ERS operates within the framework of the GHA and adheres to its policies and regulations. Senior management has been made aware of concerns and complaints from across *all* ERS sites.

470

Hon. A Sanchez: Is the hon. Member able to elaborate on any of these concerns or complaints?

475

Hon. G Arias-Vasquez: Madam Speaker, in compliance with GDPR, we are unable to disclose any details regarding cases where complaints or concerns have been raised. We are able to say that there are some relating to lack of space, some relating to medications, some relating to admissions or transfers or discharges, some related to catering. So there is a broad spectrum of cases where complaints have been made relating to the different sectors that the hon. Member alludes to.

Hon. A Sanchez: Madam Speaker, the information that we have is that senior management in the GHA and the ERS were made aware of very serious concerns about clinical practices,

480 governance and the safeguarding of residents in the ERS and that nothing has been done about
it. Can the hon. Member confirm whether this is currently being looked into?

Hon. G Arias-Vasquez: Madam Speaker, that is a very vague statement. I would say that it is
important to note that all queries, concerns, complaints undergo a comprehensive investigation
485 irrespective of whether they pertain to operational matters or individual perspectives, or of how
the organisation *should* operate. They are all escalated through the appropriate channels.

Madam Speaker: Next question. Yes?

490 **Hon. Dr K Azopardi:** Can I ask if the Minister has some kind of idea of how many complaints,
or the raising of concerns there have been in these different areas that are the subject of the
question?

Hon. G Arias-Vasquez: Madam Speaker, I have knowledge of 10 safeguarding concerns that
495 have been raised.

Hon. Dr K Azopardi: Again, does she have a breakdown of the safeguarding concerns? Where
would they arise? Are they all in the same facility or are they in different facilities?

500 **Hon. G Arias-Vasquez:** Madam Speaker, the concerns arise in relation to different facilities
throughout the GHA and ERS organisation.

Hon. Dr K Azopardi: And conscious, of course, of the protection of GDPR, which of course the
Minister has said, is it in relation to a particular profile of user? Is it in relation to a more elderly
505 kind of user?

Hon. G Arias-Vasquez: Madam Speaker, complaints are received across the board, so we are
unable to say that it is in relation to a particular profile of user. There are different profiles of users
that we receive complaints from.
510

Hon. Dr K Azopardi: But given that the Minister is aware of at least 10 safeguarding issues, is
she aware that in relation to all those matters they have all been investigated? And can she assure
the House that action is being taken in relation to those matters?

515 **Hon. G Arias-Vasquez:** Madam Speaker, we have a very strong clinical governance team that
seeks to address each and every one of the complaints. The complaints have to be put through
the right forum, so there may be an instance where we are not aware of the specific complaint
that the hon. Lady is making but when the complaint comes through PALS, comes through the
Ministry, they automatically get put through to clinical governance, and there is a strict procedure
520 that clinical governance goes through to ensure that each and every complaint is dealt with.

So, yes, in that regard if the complaint comes through the right procedure – so if the complaint
comes through PALS, or if the complaint comes to the Ministry the complaint will be received and
will be reviewed through strict procedures that are in the GHA.

525 **Hon. Dr K Azopardi:** I was not suggesting that she was or was not aware of the specific
complaint that my hon. Colleague to my right was asking about. I was really seeking a more precise
answer in relation to the 10 safeguarding concerns that she said she was aware of, or at least the
Departments were aware of in relation to those, because her answer was a bit in the abstract with
reference to the standard procedure.

530 What I am really asking is in relation to the 10 that she is aware of and she gave to me in the supplementary, can she assure the House that those matters have been investigated and that she has been assured, and she can assure the House that those matters have been dealt with?

535 **Hon. G Arias-Vasquez:** Madam Speaker, I have a table with each and every one of the complaints, with information relating to each and every one of the complaints and what it pertains to, and the outcome in relation to each and every one of those 10 concerns.

So as I have tried to confirm: in relation to the complaints which have come through PALS or which have come through the complaints office in the Ministry, clinical governance has gone through a thorough process to determine what the complaint is about and if it needs further investigation or otherwise.

540 So in relation to each and every one of those 10 concerns I have the outcome and it tells me what the outcome was in each and every one of those 10 cases and I can confirm that.

Madam Speaker: Next question.

Q374/2024

**Staff transfers to GHA –
Numbers accepted and signed**

545 **Clerk:** Question 374/2024. The Hon. A Sanchez.

Hon. A Sanchez: Could the Government provide clarification on the following: (a) the number of TUPE transfers offered to staff members with ERS or Care Agency contracts to the GHA; (b) the number of these transfers that have been accepted and signed?

550

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, all Care Agency employees working within the ERS have been offered the option to TUPE transfer to the GHA. To date, out of the 241 to be transferred offered, 207 employees have now transferred to the GHA.

555

The GHA Workforce Department continues to liaise with the employees and the union representatives in order to finalise the remaining 34 TUPE transfers.

560 **Hon. A Sanchez:** Could the hon. Member state what the real reasoning is behind these TUPE transfers from the ERS to the GHA?

Hon. G Arias-Vasquez: Madam Speaker, in 2013 there was a reorganisation and the members should have moved from the ERS to the GHA via TUPE transfer. This should have happened in 2013 and it is the industrials and the admins which did not transfer to the GHA.

565

So what the Director of Workforce is doing at the moment is tidying up that exercise. It has absolutely nothing to do with any consultation going on at the moment. It is a tidying up of the exercise which took place in 2013, where some of the employees who should have transferred to the ERS or to the GHA were not transferred at that moment in time.

570

Madam Speaker: Any other Supplementaries?
Next question.

Q375/2024

**Care Agency Recruitment –
Finance Director and Procurement Adviser; separate vacancies**

Clerk: Question 375/2024. The Hon A Sanchez.

575 **Hon. A Sanchez:** Can the Government confirm when the official recruitment process for the vacancies of Finance Director of the Care Agency and Finance and Procurement Adviser to the Ministry of Health and Business will commence? Additionally, could they clarify if these positions would be advertised as two separate vacancies?

580 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, they have not commenced. The vacancy will be advertised once the consultation process for any merger has been finalised. Whether it will be one position or two positions will depend on the conclusion of the consultation.

585

Madam Speaker: Supplementaries?

Hon. A Sanchez: Can the hon. Member explain why the decision as to why they would be advertised as two separate vacancies or one, is dependent on the integration?

590

Hon. G Arias-Vasquez: Of course, Madam Speaker, there is a very logical reason for that because part of what we may be looking at to do in the Care Agency, and the GHA, and the ERS is to try and have the administrative functions joining together. So we might have HR, admin and finance, for example, joining together so that it comes together for the ERS Care Agency and HR.

595

We are not saying that that will be the case, but we are saying that is one possible permutation of any merger. So therefore if finance, for example, merges, then the Finance Director of the Care Agency might no longer be a role. So, therefore, everything will depend on what happens as a result of that consultation.

600

Madam Speaker: Any other Supplementaries?

Hon. A Sanchez: Madam Speaker, it is a bit slightly vague, is that what the hon. Member is aiming to do across the board, to reduce jobs and cut jobs in that manner across the board?

605

Hon. G Arias-Vasquez: Madam Speaker, we have made it very clear in every single press release that we have issued so far on the merger that we do not intend to cut any jobs in the Care Agency, in the GHA or in ERS. What we intend to do is make sure that there are efficiencies, make sure that the system works as efficiently as possible for the benefit of the ultimate user. So there is absolutely no intention whatsoever of cutting any jobs across the GHA, the Care Agency or the ERS.

610

Hon. D J Bossino: I am not sure what the hon. Lady means when she says not cutting jobs. Given her answer, if indeed it is the Government's decision to proceed with what I assume, from listening to the exchange, is the Government's preferred choice, which is to merge these facilities, although it is undergoing the process of consultation. So the result of that, because she said in answers to previous questions there is the possibility that they do not proceed with that. That is because the consultation at the moment is that Government is wide-eyed as far as that is concerned. Anything can happen.

615

620 But should it decide to amalgamate, either in its entirety or the aspects that she referred to a few moments ago, the reality is that jobs will be lost. In other words, vacancies will be lost. Does she accept that?

625 In other words, it is possible, as she said that there may no longer be any future need for the Finance Director position of the Care Agency should the Government proceed to merge in whichever form?

630 **Hon. G Arias-Vasquez:** Madam Speaker, no, not at all. I might not have expressed myself properly or might not have been clear enough. In relation to the two positions which I am being asked for specifically in this question, there might not be a need for those two positions to remain separate positions.

635 Now, in every other Department, no jobs will be cut. The complements will be kept the same but there may be a merge of the administrative functions within each. We have not worked out what that will look like because we are unclear as to that being the outcome; but what we are very clear about and what we have said at every single step of the way, is that there will be no job losses.

640 The only Finance Director there is, for example, is the Finance Director of the Care Agency. The only HR Director there is, is the Director of Workforce. So there will be no job losses as a result of the mergers and there will not be any positions lost within the complement as a result of the merger.

Madam Speaker: Next question.

Q376-77/2024

Donation Fund –

Managed; sources; purpose; policies; guidelines; investigations

Clerk: Question 376/2024. The Hon. A Sanchez.

645 **Hon. A Sanchez:** Could the Government provide information regarding the Donation Fund at the ERS including: (a) How it is managed; (b) The sources of these donations; (c) The purpose of this fund; and, (d) The policies and guidelines governing this donation fund along with the date of implementation?

650 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 377/2024.

655 **Clerk:** Question 377/2024. The Hon. A Sanchez.

Hon. A Sanchez: Could the Government provide confirmation whether any individuals employed by the Government, Government agencies or Government-owned companies have been under investigation in the past 12 months regarding the Donation Fund at the ERS?

660 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the Donation Fund is managed by the Finance & Accounts Department. There are two accounts: one for donations received and another for donation payments. Donations received are receipted by the

665 Accounts Department and recorded through a cash book charged to a 'Donations Received
Account'. Donations payments, Madam Speaker, are then effected by the Finance Department as
and when required, who ensure that there are sufficient funds charged to the Donations Payments
Account.

670 As regards the source of these donations, Madam Speaker, I am advised that these are
commonly as follows: ERS families wishing to make a donation when a relative may have passed
away; from local charities, companies or individuals; or from anonymous donors.

675 Madam Speaker, the Fund was established for the following purpose, although generally as a
benevolent fund to be used for the benefit and the residents and staff. When families donate I am
advised they at times specify that their donation is to be spent on staff as a gesture of appreciation
for care given throughout the time that their relative was in ERS. Also that it is used to purchase
specific items that may be of benefit to patient residents.

680 I am advised donation payments deriving from the Donation Fund have always been managed
discretionally by the ERS Care Manager. The Care Manager is required to respect the wishes of
the donor and the needs of the residents and the organisation. ERS Finance has confirmed that
there are records going as far back as 2013.

685 In respect to Question 377/2024, there has been an individual who has been under
investigation in the last 12 months regarding the Donation Fund. The matter, however, has been
dealt with under internal human resources processes and the procedures are now closed. Because
this is an internal HR issue, it is not appropriate for me to say anything further.

Hon. A Sanchez: Madam Speaker, can the hon. Member clarify whether this Fund has been
used to purchase or buy any form of gifts for any Government official and/or Government
Minister, and if so what these gifts were?

690 **Hon. G Arias-Vasquez:** Madam Speaker, the subject to this question is a matter which has been
under formal investigation, I do not consider it is appropriate for me to comment any further.

695 **Hon. A Sanchez:** Well, Madam Speaker, the information that we have is that this Fund was
used to buy hampers for around 40 Government officials including a Government Minister.
I actually would like to hand over a photo of one of the hampers in question to the hon. Member
and I would like to ask the hon. Member that given this Fund contains the proceeds of donations
made by members of our community, whether the hon. Member feels that this is an appropriate
use of the ERS Donation Fund?

700 **Hon. G Arias-Vasquez:** Madam Speaker, I confirm that the hampers were received. The
hampers received in my office, for example, were sent back *immediately* because I do not consider
that the use of the funds was appropriate; and therefore an internal investigation was sought.
It was started and it is terminated, and as I have said the matter has been dealt with in its entirety
by HR both in the Civil Service and in the GHA, and therefore I do not feel it is appropriate to
comment on the matter any further.

Hon. Dr K Azopardi: May I?

710 **Madam Speaker:** The Hon. the Leader of the Opposition. I gave him way before the
hon. Member stood up.

715 **Hon. Dr K Azopardi:** So to be clear, the Minister is confirming that the Donation Fund was used
to purchase hampers, one of which was received by a Government Minister. That is what she is
confirming?

Hon. G Arias-Vasquez: Madam Speaker, the Donation Fund was so used. The hampers were all sent back and the matter was dealt with internally by an internal investigation.

720 **Hon. A Sanchez:** The hon. Member is stating in this House that all of the hampers were sent back, and if they were not sent back all of them were declared as per Government General Working Orders. Is that what the hon. Member is saying?

725 **Hon. G Arias-Vasquez:** Madam Speaker, I am unable to confirm whether each and every one was sent back and was declared. As far as I am concerned the matters that came to my attention were properly declared.

Hon. A Sanchez: Madam Speaker, can the hon. Member confirm the total amount that was spent from the ERS fund on hampers?

730 **Hon. G Arias-Vasquez:** Madam Speaker, I do not have that information available.

Hon. A Sanchez: Madam Speaker, does £2,420 ring a bell?

735 **Hon. G Arias-Vasquez:** Madam Speaker, once again, I do not have that information available.

Hon. A Sanchez: Madam Speaker, is the hon. Member aware of an invoice or a PRF authorising the payment of these hampers? And if there is such, there must be a controlling officer authorising a payment? Someone must have authorised the payment of these hampers.

740 **Hon. G Arias-Vasquez:** Madam Speaker, as I have confirmed, as soon as the matter was brought to my attention I delivered everything to the Chief Secretary, the workforce was made available and the matter was dealt with internally, appropriately.

745 **Hon. A Sanchez:** Final question, can the hon. Member confirm whether the person managing the fund at the time has since then been given a promotion?

Hon. G Arias-Vasquez: Not to my knowledge, Madam Speaker.

750 **Madam Speaker:** Next question.

The Hon. C A Sacarello: Thank you, Madam Speaker.

755 Could the hon. Member, she mentioned earlier on that sometimes some of the benefactors list staff as potential recipients of their benefit. Could the Hon. Minister please comment on the Government's policy on this, as to limits and nature of gifts, if there is a policy?

Hon. G Arias-Vasquez: Madam Speaker, it is a very specific question. I am not aware of the policy in the ERS or the GHA of such a donations fund, but I can make myself aware of the policy if there is one.

760 **Madam Speaker:** Next question.

Q378/2024
Relocation of wards –
Ocean Views to St Bernard’s Hospital

Clerk: Question 378/2024. The Hon. A Sanchez.

765 **Hon. A Sanchez:** Does the Government have any plans to relocate any of the wards from Ocean Views to St Bernard’s Hospital?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

770 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, there are currently no plans to relocate any of the wards in Ocean Views to St Bernard’s Hospital. All matters, however, are kept constantly under review.

Madam Speaker: Next question.

Q379/2024
Ocean View admissions –
Month by month from September

775 **Clerk:** Question 379/2024. The Hon. A Sanchez.

Hon. A Sanchez: Could the Government provide the total number of patients admitted into Ocean Views from September 2023 broken down by month?

780 **Clerk:** Answer the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez):

Month	Admissions
1st September 2023	11
1st October 2023	11
1st November 2023	15
1st December 2023	13
1st January 2024	10
1st February 2024	4
1st March 2024	8
1st April 2024	10
1st May 2024 (to date)	7

Madam Speaker: Any Supplementaries? Yes.

785 **Hon. Dr K Azopardi:** Just for clarification, these are *new* admissions, I assume, per month, yes? On the basis that we are talking about Ocean Views – so that I am clear in my mind that these are not – sometimes people are casually in and casually out, if the Hon. Minister knows what I mean by that.

790 **Hon. G Arias-Vasquez:** Many thanks for requesting that clarification. These are the numbers of admissions but a patient could have been admitted more than once.

Madam Speaker: Next question.

Q380/2024
John Cochrane Ward –
Number of residents; total capacity

Clerk: Question 380/2024. The Hon. A Sanchez.

795 **Hon. A Sanchez:** Could the Government furnish the total number of residents in John Cochrane Ward for the following dates, delineated by the count of residents at the outset of each month from 1st September 2023 to 1st May 2024, including the figures up to present date? Additionally, could they provide the total capacity of this facility?

800 **Clerk:** Answer the Hon. the Minister for Health, Care and Business.

Hon. the Minister for Health, Care and Business (Hon. G Arias-Vasquez):

Month	Residents
1st September 2023	25
1st October 2023	23
1st November 2023	24
1st December 2023	23
1st January 2024	20
1st February 2024	22
1st March 2024	22
1st April 2024	19
1st May 2024 (to date)	19

The capacity for the facility is 30 beds.

Madam Speaker: Any Supplementaries?

805 **Hon. A Sanchez:** Could the Minister elaborate on whether it has any plans for John Cochrane moving forward, or does it envisage that John Cochrane ward will remain to operate and function as it currently does?

810 **Hon. G Arias-Vasquez:** At present, John Cochrane will remain an ERS ward in the Hospital.

Madam Speaker: Next question.

Q381/2024
Industrial Action –
Staff walkouts

Clerk: Question 381/2024. The Hon. A Sanchez.

815 **Hon. A Sanchez:** Could the Government provide information on whether there have been any instances of staff walkouts or industrial action at any of the ERS sites or facilities from January 2024 to the present date?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

820 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, there have been four separate occasions when the same six employees working at ERS walked out during working hours. These incidents occurred on the following dates: 25th March 2024; 26th March 2024; 9th April 2024; and 12th April 2024. Please note that these matters are currently under internal investigation, and as such I am unable to provide any additional information at this time.

825
830 **Hon. A Sanchez:** Madam Speaker, I understand that the hon. Member says that the matters are under internal investigation, but can she confirm whether the Government is in consultation with the unions and the staff in an effort to resolve the situation; or whether the staff have taken industrial action in relation to the walkouts?

Hon. G Arias-Vasquez: Madam Speaker, as I previously stated, the matter is under internal investigation and I will be giving no further information.

835 **Madam Speaker:** Next question.

Q382–83/2024

Mount Alvernia, Hillside, John Cochrane and John Mackintosh ERS facilities – Residents 2019 to present date; residents passed in calendar year

Clerk: Question 382/2024. The Hon. A Sanchez.

840 **Hon. A Sanchez:** Could the Government furnish the following information for the Mount Alvernia, Hillside, John Cochrane and John Mackintosh Wing ERS facilities for all the years from 2019 to present date, delineated by month: (a) total number of residents, (b) total number of residents who have unfortunately passed away over the course of the calendar year?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

845 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I now hand over a schedule with the requested information.

Apologies, Madam Speaker, I will answer Question 382/2024 together with 383/2024 and the answer to 383/2024 is I am handing over the Schedule with all the information requested.

850 **Clerk:** Question 383/2024. The Hon. A Sanchez. *(Interjection)*

Madam Speaker: That means I will give you less time.

855 **Hon. A Sanchez:** In the following ERS facilities – (1) Mount Alvernia, (2) Hillside, (3) John Cochrane and (4) John Mackintosh Wing – passed away during the years of 2019 to 2024 to present date, broken down month by month, and month of each calendar year by location, and by percentage of residents by each site?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

860 **Hon. G Arias-Vasquez:** Madam Speaker, now I am answering the right question. I hand over the Schedule provided with the answers to 383/2024 and 382/2024.

865 **Madam Speaker:** Alright, we will do the usual, I will give you time to look at that and we will take the next question.

Answer to Questions 382 and 383

ERS DEATHS 2019

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	6	4	2	5	5	2	2	5	1	4	4	3
John Mackintosh Wing	1	2	1	3	1	0	2	0	1	1	0	2
Hillsides	1	0	0	1	0	1	2	0	0	1	0	1
John Cochrane Ward	1	1	0	1	2	0	1	2	1	1	2	1

OCCUPANCY 2019

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	129	130	133	129	129	129	128	130	131	130	128	129
John Mackintosh Wing	54	53	53	53	51	53	54	54	53	54	54	54
Hillsides	45	46	45	48	46	45	45	45	44	44	44	50
John Cochrane Ward	32	32	32	32	31	31	32	32	31	31	32	32

870

PERCENTAGE OF RESIDENTS PASSED AWAY 2019

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	4.7%	3.1%	1.5%	3.9%	3.9%	1.6%	1.6%	3.8%	0.8%	3.1%	3.1%	2.3%
John Mackintosh Wing	1.9%	3.8%	1.9%	5.7%	2.0%	0.0%	3.7%	0.0%	1.9%	1.9%	0.0%	3.7%
Hillsides	2.2%	0.0%	0.0%	2.1%	0.0%	2.2%	4.4%	0.0%	0.0%	2.3%	0.0%	2.0%
John Cochrane Ward	3.1%	3.1%	0.0%	3.1%	6.5%	0.0%	3.1%	6.3%	3.2%	3.2%	6.3%	3.1%

ERS DEATHS 2020

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	10	4	3	4	3	1	3	2	3	2	6	1
John Mackintosh Wing	2	0	1	0	2	0	3	0	2	1	2	1
Hillsides	1	3	1	0	0	1	1	0	0	3	1	2
John Cochrane Ward	0	0	0	0	0	1	1	0	1	0	0	0

875

OCCUPANCY 2020

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	127	130	128	129	126	123	121	119	119	120	121	119
John Mackintosh Wing	52	53	54	53	52	51	51	53	52	50	46	47
Hillsides	45	46	44	43	44	44	43	44	43	43	43	45
John Cochrane Ward	32	31	32	24	23	15	15	31	31	31	31	31

PERCENTAGE OF RESIDENTS PASSED AWAY 2020

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	7.9%	3.1%	2.3%	3.1%	2.4%	0.8%	2.5%	1.7%	2.5%	1.7%	5.0%	0.8%
John Mackintosh Wing	3.8%	0.0%	1.9%	0.0%	3.8%	0.0%	5.9%	0.0%	3.8%	2.0%	4.3%	2.1%
Hillsides	2.2%	6.5%	2.3%	0.0%	0.0%	2.3%	2.3%	0.0%	0.0%	7.0%	2.3%	4.4%
John Cochrane Ward	0.0%	0.0%	0.0%	0.0%	0.0%	6.7%	6.7%	0.0%	3.2%	0.0%	0.0%	0.0%

880

ERS DEATHS 2021

GIBRALTAR PARLIAMENT TUESDAY, 21st MAY 2024

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	34	5	1	1	2	3	2	0	1	1	4	1
John Mackintosh Wing	6	0	1	0	1	2	0	2	0	0	1	1
Hillside	1	0	2	1	1	1	0	1	0	0	1	0
John Cochrane Ward	4	2	1	0	0	1	0	0	1	1	1	2

OCCUPANCY 2021

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	122	86	81	83	107	109	110	108	111	113	111	112
John Mackintosh Wing	50	44	47	47	54	54	53	53	53	54	54	51
Hillsides	45	45	44	42	44	46	43	44	44	44	44	44
John Cochrane Ward	27	23	22	19	20	20	31	31	31	30	28	27

885

PERCENTAGE OF RESIDENTS PASSED AWAY 2021

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	27.9%	5.8%	1.2%	1.2%	1.9%	2.8%	1.8%	0.0%	0.9%	0.9%	3.6%	0.9%
John Mackintosh Wing	12.0%	0.0%	2.1%	0.0%	1.9%	3.7%	0.0%	3.8%	0.0%	0.0%	1.9%	2.0%
Hillsides	2.2%	0.0%	4.5%	2.4%	2.3%	2.2%	0.0%	2.3%	0.0%	0.0%	2.3%	0.0%
John Cochrane Ward	14.8%	8.7%	4.5%	0.0%	0.0%	5.0%	0.0%	0.0%	3.2%	3.3%	3.6%	7.4%

ERS DEATHS 2022

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	2	3	2	3	2	2	1	5	2	0	2	0
John Mackintosh Wing	2	3	2	1	1	2	3	1	0	2	1	2
Hillsides	2	0	0	1	0	2	0	3	1	0	0	1
John Cochrane Ward	0	1	3	1	1	1	0	1	1	0	0	0

OCCUPANCY 2022

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	111	109	109	111	109	109	107	109	106	107	109	107
John Mackintosh Wing	53	51	51	67	67	61	66	69	67	68	69	69
Hillsides	43	42	47	46	44	46	44	44	43	42	43	43
John Cochrane Ward	25	25	24	24	23	22	23	23	21	21	22	21

890

PERCENTAGE OF RESIDENTS PASSED AWAY 2022

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	1.8%	2.8%	1.8%	2.7%	1.8%	1.8%	0.9%	4.6%	1.9%	0.0%	1.8%	0.0%
John Mackintosh Wing	3.8%	5.9%	3.9%	1.5%	1.5%	3.3%	4.5%	1.4%	0.0%	2.9%	1.4%	2.9%
Hillsides	4.7%	0.0%	0.0%	2.2%	0.0%	4.3%	0.0%	6.8%	2.3%	0.0%	0.0%	2.3%
John Cochrane Ward	0.0%	4.0%	12.5%	4.2%	4.3%	4.5%	0.0%	4.3%	4.8%	0.0%	0.0%	0.0%

ERS DEATHS 2023

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	2	5	2	2	4	3	2	6	4	4	3	3
John Mackintosh Wing	1	1	4	2	1	0	3	1	0	0	1	0
Hillsides	0	1	0	0	0	2	3	0	0	1	4	2
John Cochrane Ward	0	0	0	1	0	1	0	0	1	0	0	1

OCCUPANCY 2023

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	108	109	116	127	127	124	122	125	118	119	121	122
John Mackintosh Wing	69	69	70	70	67	70	69	68	69	70	70	70
Hillsides	41	43	42	43	42	43	43	43	44	44	42	43
John Cochrane Ward	24	26	26	27	26	28	25	24	25	23	24	23

PERCENTAGE OF RESIDENTS PASSED AWAY 2023

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Mount Alvernia	1.9%	4.6%	1.7%	1.6%	3.1%	2.4%	1.6%	4.8%	3.4%	3.4%	2.5%	2.5%
John Mackintosh Wing	1.4%	1.4%	5.7%	2.9%	1.5%	0.0%	4.3%	1.5%	0.0%	0.0%	1.4%	0.0%
Hillsides	0.0%	2.3%	0.0%	0.0%	0.0%	4.7%	7.0%	0.0%	0.0%	2.3%	9.5%	4.7%
John Cochrane Ward	0.0%	0.0%	0.0%	3.7%	0.0%	3.6%	0.0%	0.0%	4.0%	0.0%	0.0%	4.3%

ERS DEATHS 2024

	JAN	FEB	MAR	APR	MAY
Mount Alvernia	4	6	8	5	3
John Mackintosh Wing	0	1	1	3	1
Hillsides	1	0	0	0	0
John Cochrane Ward	1	1	0	0	0

OCCUPANCY 2024

	JAN	FEB	MAR	APR	MAY
Mount Alvernia	119	124	123	127	125
John Mackintosh Wing	69	69	69	70	69
Hillsides	50	48	49	50	50
John Cochrane Ward	20	22	22	22	22

PERCENTAGE OF RESIDENTS PASSED AWAY 2024

	JAN	FEB	MAR	APR	MAY
Mount Alvernia	3.4%	4.8%	6.5%	3.9%	2.4%
John Mackintosh Wing	0.0%	1.4%	1.4%	4.3%	1.4%
Hillsides	2.0%	0.0%	0.0%	0.0%	0.0%
John Cochrane Ward	5.0%	4.5%	0.0%	0.0%	0.0%

Q384/2024

**Managements of ERS facilities and sites –
Tenders specified**

895 **Clerk:** Question 384/2024. The Hon. A Sanchez.

Hon. A Sanchez: Is the Government planning to issue tenders for the management of the ERS facilities and sites? If so, could the Government specify which ones?

900 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the Government has already issued a tender announcement on 13th May 2024 for the management of ERS facilities at John Mackintosh Home, Hillsides and Bella Vista. These are the sites which are currently under contract since September 2019.

905

Hon. A Sanchez: Madam Speaker, when reviewing the tender documents they do not appear to differentiate between lots for each site. Is it correct to assume that the Government intends to award the contract to a single supplier; or has the Government still not made a decision as to this?

910 **Hon. G Arias-Vasquez:** Madam Speaker, the tender has been put out and we are waiting to see what comes back. So it is not that the Government has not made a decision, it is waiting to see what information or what comes back from the tender process.

Madam Speaker: Any other Supplementaries?

915

Hon. D J Bossino: Yes, if I may.

Can the Hon. Minister advise when she expects the tender process to be complete?

920 **Hon. G Arias-Vasquez:** Madam Speaker, similar to the tender for the respite services, we do not intend this tender to go on forever. So it may not be 1st July but it will be some point in July when the tender will close and the tender should be awarded by mid-to-late July.

925 **Hon. D J Bossino:** Would she be able to state, I know from her presentation this morning that as far as the Care Agency aspects of things, the contract is intended to last for three years with possible renewals thereafter, indeed with possible early terminations. Is the plan to do the same in relation to the ERS premises?

Hon. G Arias-Vasquez: I believe that is the case, yes.

930 **Madam Speaker:** Next question.

Q385-88/2024

Management of care plans –

Responsibility; standards; subcontracted companies; zero-hour contracts

Clerk: Question 385/2024. The Hon. A Sanchez.

935 **Hon. A Sanchez:** Regarding the recent Government tenders for respite services, home support and domiciliary care could the Government clarify who will be responsible for managing the care plans of each service user within the Care Agency and the ERS?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

940 **Hon. the Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will answer this question together with Questions 386/2024 to 388/2024.

Clerk: Question 386/2024. The Hon. A Sanchez.

945 **Hon. A Sanchez:** In relation to the recent Government tenders for respite services, home support and domiciliary care, could the Government clarify who will be responsible for overseeing the professional standards and quality assurance of the services provided to service users of the Care Agency and the ERS? Will it be the subcontracted companies or the Care Agency and the ERS themselves?

950 **Clerk:** Question 387/2024. The Hon. A Sanchez.

Hon. A Sanchez: In relation to the recent Government tenders for respite services, home support and domiciliary care, could the Government clarify who will monitor the standard of training delivered to those providing services to the service users of the Care Agency and ERS. Will it be the Care Agency and the ERS directly, or the subcontracted companies?

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Clerk: Question 388/2024. The Hon. A Sanchez.

Hon. A Sanchez: Can the Government provide an assurance that the use of zero-hour contracts will be abolished as one of the conditions in the tender award process for the recent tendering of respite services, domiciliary care and home support?

960

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Hon. G Arias-Vasquez: Madam Speaker, in answer to Question 385/2024, the ERS does not provide home support or domiciliary care. Hillside has four respite beds available. The responsibility of the care plans for respite care in Hillside falls under the responsibility of the nursing team with input from other healthcare professionals such as doctors, physiotherapists and occupational therapists; the speech and language therapists; as well as the collaboration with the residents' families and/or legal guardians.

965

The Care Agency sub-contracts care workers from a range of agencies and is going through the process of updating and renewing these arrangements in a transparent manner in line with central Government procurement regulations. Care plans are developed by the Care Agency and the subcontracted companies are required to deliver care in line with these plans. This is overseen by the management of the Care Agency through regular scheduled review meetings and audits.

970

In answer to Question 386/2024, within the GHA framework professional standards and quality assurances will be upheld in the services offered to residents across all ERS sites. The contracts that are currently being tendered for the ERS services will have tight services and quality specifications, which any provider will be expected to deliver. We will therefore be able to demand these standards. It will then be for senior leadership teams and the ERS to ensure that all providers deliver against those service specifications.

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The quality standards and service levels are specified within the contract and service specification. Oversight of all aspects of the service, including professional and quality standards will be – and is – undertaken by the management of the Care Agency through regular and scheduled review meetings and audits.

985

To go one further, I am the first Minister to be given the portfolio named 'Quality of Care'. Once the contracts are all in place it is the intention to look at the best and most cost-effective manner of auditing these contracts.

In answer to Question 387/2024, the training requirements will be defined by the contract specifications and monitored by the ERS senior leadership team. There is a clear requirement for the subcontracted companies to provide training in line with the standards required of the role and of the Care Agency and keep clear records of the training. Oversight of all aspects of the service, including the training standards, will be undertaken by the management of the Care Agency through regular and scheduled review meetings and audits.

990

In answer to Question 388/2024, the contract documents clearly state that the contractor shall comply with all applicable laws, including Employment Law in Gibraltar. There is no direct intention within the tender process to change any current Employment Law.

995

Hon. A Sanchez: Madam Speaker, so just by way of clarification, the hon. Member is stating that the heads of service, the social workers and the team managers at the Care Agency will be in charge and responsible for the management of the services and the care plans that are offered and delivered to the service users of the Care Agency? They will still be in control of this?

1000

1005 **Hon. G Arias-Vasquez:** The heads of service in the Care Agency will, as at present, oversee all of the care plans that have been provided to the sub-contracted agency as happens at the moment.

Madam Speaker: Any other Supplementaries?

1010 **Hon. A Sanchez:** In terms of overseeing professional standards and quality assurance, can the hon. Member clarify whether complaints received will be monitored by the Care Agency and the ERS, or will they monitored by the sub-contracted company?

1015 **Hon. G Arias-Vasquez:** Madam Speaker, complaints always go directly to the Care Agency or the ERS, so they will be monitored by the Care Agency and/or ERS who will hold the companies to account.

Madam Speaker: Any other Supplementaries?

1020 **Hon. A Sanchez:** When the hon. Member mentions audits and reviews, will the Care Agency be carrying out these audits and reviews on the sub-contracted company, or will the sub-contracted company be carrying these audits and reviews on themselves?

1025 **Hon. G Arias-Vasquez:** Madam Speaker, this is a matter which, once we have all the contracts in place, we wish to see how best to audit the services. So the question might be either the Care Agency or neither. So it might be an external entity which might review all the contracts and ensure that all the standards are in place as per the service specification in the contract.

1030 So once all the contracts are in place, we will then determine how to best audit the services that are given, but it would certainly not be by the sub-contracted company. It will either be by the Care Agency or by an external company, which will review all of the services which are sub-contracted.

1035 **Hon. A Sanchez:** I assume since the Hon. Minister has mentioned that she is the first Minister with the title of Quality Care and she has an emphasis on auditing and she has mentioned an independent company, would that independent company also be auditing the Care Agency and the services that the Care Agency provides?

1040 **Hon. G Arias-Vasquez:** Madam Speaker, what I said was, in fact, that we did not know whether it was going to be an independent company that was going to be auditing. What I said is that once all the contracts were in place we would look to establish what is the best way of auditing the services provided. So once we are in that position we will look to see what needs to be audited and by whom.

1045 **Hon. D J Bossino:** Would the Hon. Minister assist me, and I take this opportunity to draw comfort from her words now in answer to the questions in this House, comfort which was not necessarily there when she gave her presentation today and that relates to the specific issue of management.

1050 The comfort that I draw is that, very much so, management of care plans and overseeing quality and all the rest of it is in effect going be in the hands of the Care Agency, which is the body in respect of which many of the users, certainly their parents – as she would have heard this morning very loud and clear – draw a lot of comfort from, because we are very happy indeed with the service that the Care Agency currently provides, particularly in this context of respite.

But can I ask her to clarify the way I interpreted it – and it is possible that I was mistaken in this interpretation – that earlier this morning she was more nebulous as far as the management is concerned. In other words, I think she said, that aspect of the contractual terms and relationship

1055 with the soon-to-be successful tenderer was somewhat in the air and still needed to be negotiated and she said that, I think, on more than one occasion.

Can I give her the opportunity to explain the position, and can she basically confirm what I think she has said today across the floor of the House, which is that management will very much be in the hands of the Care Agency?

1060

Hon. G Arias-Vasquez: Madam Speaker, the question relates to care plans and who is in control of the development of the care plans and the management of those care plans in relation to the respite services. So the care plans and the *duty of care*, which is what I said this morning, will always rest with the Care Agency.

1065

Now, the management or heads of services of the Care Agency will always be on top of those care plans and will always be on top of those providing the services. I think that answers your question.

1070

Hon. D J Bossino: And I think it is a question of seeing how the thing develops; and in that context can I ask her whether there will be the possibility of early termination? She said, this morning and in the context of an exchange we had earlier, that the contracts will be for three years but that there will be early termination provisions.

1075

I assume, certainly the parents will be on to the Care Agency, I think, very quickly should they notice that something has gone awry or is not quite what we expect in terms of the quality of the service. So I ask her to confirm that the Care Agency will have the contractual opportunity to put an early end to the contractual relationship should it not be going in the right direction.

1080

Hon. G Arias-Vasquez: Madam Speaker, I was very clear this morning in the meeting which the hon. Member attended that the contract has a three-month termination provision. So the contract can be terminated at any point pursuant to a series of events, one of which is that the Care Agency is not happy with the standards of service provided.

1085

Now, the benefit of having gone out to tender and the benefit of having contracts in place is that we are able to fully specify the standards of service that we are expecting of whichever company is successful in being awarded the tender. So because we are able to point to a schedule of services and standards that we are looking to be provided with, we are therefore able to terminate the contract when those standards are not met.

I think that answers that question.

1090

Hon. D J Bossino: Just by way of confirmation, if she may, when she talks about a three-month period is she talking about a notice period, in effect, of termination? I think she is nodding her head. Can she please confirm that position first, if she may?

1095

Hon. G Arias-Vasquez: Yes, that is right, apologies. It is an ability to terminate the contract with three months' notice.

Madam Speaker: Supplementaries?

Hon. A Sanchez: ... *(Inaudible)*

1100

Hon. G Arias-Vasquez: Madam Speaker, the Care Agency will monitor all of these services in the same way that it currently monitors information it requires from the companies in relation to the individual workers. So the Care Agency will be requesting schedules of training received etc., from the individual company that is awarded the tender.

1105

Hon. A Sanchez: How is the Care Agency going to monitor issues, for example, of ensuring that all the sub-contracted carers that are employed have a minimum level of English required to

provide the necessary, or to be able to complete the necessary forms and to administer the necessary medication? How is the Care Agency going to ensure that it monitors this?

1110 **Hon. G Arias-Vasquez:** Madam Speaker, the contracts in question are contracts that have been sub-contracted for a while. So these are services which are monitored consistently already by the ERS and they are contracts which we will ensure that the standards are properly met.

1115 Sorry, just to clarify, in the question that was recently asked by her hon. Colleague, the question was in relation to respite and the meeting that occurred this morning in relation to the contract for *respite* services. The questions that I am answering now are in relation to ERS contracts. So when I say that there were no contracts in place and no specifications in place, I am referring to the contracts for the respite services.

1120 In relation to ERS and the ERS contracts, there are contracts in place already and this is already monitored. What we are looking to do is seek to build on the experience that we have obtained in the past four years and make sure that the service specifications are more detailed. So in terms of training, in terms of level of English, etc. the ERS will be monitoring the level of the qualifications of each and every employee provided to them by the sub-contracted entity.

1125 **Hon. A Sanchez:** Madam Speaker, but how is it monitored? Can the hon. Member explain how the agreements are in place; or if they exist already, how is this monitored? Does the sub-contracted carer have to complete an exam upon entry into the sub-contracted company? Do they have to complete a certain exam to show the level of English? Do they have to complete a certain report just to show that they can complete the report, that they understand the medication or the names of the medication?

1130 How is this monitored? How is this demonstrated? How is the level of English demonstrated and how is this monitored? How is it currently monitored and how is the Care Agency going to monitor it over time?

1135 **Hon. G Arias-Vasquez:** Madam Speaker, I am not making myself clear. These questions are not in relation to Care Agency contracts, these questions are in relation to ERS contracts, right? So the ERS contracts have already been contracted for.

1140 So there are two different contracts: the Care Agency contracts and the ERS contracts. The ERS contracts are already in place, but to my knowledge they do not contain any requirements as to training or minimal specifications of English. So at the moment they are not monitored. So the contracts that are in place in the ERS sites do not contain any provisions related to training, so there is no requirement to monitor them. So therefore I cannot answer that question because it does not exist.

1145 In relation to the Care Agency sites and the contract that is out of a tender in relation to respite, no contract exists there. So there is no standard as to training, so there is no requirement to monitor training at present.

Madam Speaker: Yes, the Hon. Mr Bossino had a question.

Hon. D J Bossino: I am grateful.

1150 Can the Hon. Minister, in relation to the quality of service provided, is she able to say – because I think one of her officials said and in fact has told me directly in the past – that one of the issues that they grapple with is the inability to provide sufficient beds for users, this is for overnight stays and the beds are actually quite limited for the number of users that are currently in place and those coming upstream.

1155 Is it, therefore, the intention that the tenderer will be expected to increase the provision of beds? And if so, how will the floor space – if I can borrow that term in relation to a different answer she gave – be provided? Would that be expected to be provided by the successful contractor?

Hon. G Arias-Vasquez: Madam Speaker, to be clear, the tenders that are out at the moment are for the *day* service of respite. So they are for the services provided between 3 p.m. and 7 p.m., both for children and for adult services.

1160 The overnight stays are not currently out for tender, right? So in relation to your question: is there an intention? We would love to be able to provide additional space and additional beds. Bear in mind that this is a service which has recently started, which has had a huge take-up from parents. I think I can see the hon. Member nodding, it is a fairly recent occurrence.

1165 What we are talking about is the ability for parents of children with special educational needs to be able to leave their children overnight in order to have a break from the care requirements provided, because we understand that the demands on parents can be significant and therefore in order to give the parents and the siblings a break, we provide the service.

1170 So, at the moment, I think yes it is limited in the number of beds but it is a fairly new service that we would look to increase were it possible to do so. But the tender process at the moment is in relation to respite for children between the hours of 3 p.m. and 7 p.m. every day.

Hon. D J Bossino: That clarification is indeed very useful.

1175 So can I offer this to her: is it the Government's intention to provide the overnight stay aspects of the respite services as is currently provided, which is of huge and significant benefit to families, I can tell her that? From the facilities that the Government is committed to build, I think where the Department of Education currently is at the Commonwealth Park, is that the intention to provide that service in that location?

1180 **Hon. G Arias-Vasquez:** So I am very proud to be able to say that we are constantly looking for ways to make the service better and we are constantly looking for ways to improve the plight of parents and to assist the parents as much as possible.

1185 So the aim would be, yes, of course to look to support the parents. The aim of the new facilities that would house Dr Giraldi's and St Bernadette's might not necessarily be for respite. St Bernadette's and Dr Giraldi's might be more for supported living. Whether there be space for the respite there as well is a question which is still up in the air. We are looking at the best use of that service.

1190 What we are committed to doing is looking at each and every pound that the taxpayer spends in terms of the Care Agency and looking at how that pound can be maximised. So if we do feel that there is requirement for more respite beds, then we will provide that. But at the moment I want to be very clear that the tenders that are out are for respite for day services, a service which is currently sub-contracted and a service which we feel can be improved.

Hon. D J Bossino: Sorry about this ...

1195 **Madam Speaker:** One more.

Hon. D J Bossino: I declared the interest already, but I think this does affect quite a few number of families and I do not think that point came out clearly, but maybe it is just me and everybody else understood it perfectly well.

1200 **Madam Speaker:** I am loath to and I have given a lot of leeway in terms of what was said this morning. (*Interjection*) But I remind the hon. Member that he should ask questions, supplementaries that arise from the answers given now and not this morning. (*Interjection*) So let's keep it to that. There has already been a lot of supplementaries on this.

1205 So one more.

Hon. D J Bossino: Absolutely and I am really grateful for the Hon. the Chair, Madam Speaker's patience in relation to this.

1210 But what I was going to ask is whether ... Because I do not fully understand the distinction that has been made, although perhaps from a personal perspective I welcome it in the sense that, at the moment, we want this service to remain with the Care Agency. I think she heard that, as I said before, very loud and clear.

1215 So as far as the overnight stay service is going to remain with the Care Agency, does the Government have any intention, can she explain why a distinction is being made between one aspect of the service and the other? And may I also, with the Speaker's leave, ask her whether they have any current intention to also farm that out by way of tender process? By that, I mean the overnight stay.

1220 **Hon. G Arias-Vasquez:** So the distinction that has been made, Madam Speaker, is purely from the organisational perspective of where those services are offered and the services themselves. So respite between 3 p.m. and 7 p.m. is offered to more families, and we are able to offer that service to more families than we are able to offer overnight respite.

1225 So the aim is to look at where we are at the moment, the space available at the moment, which is another thing, apologies for this, Madam Speaker, but is another thing that I addressed this morning. So what we looking to address is the space available for those families and to increase the space and to increase the numbers that are able to avail themselves of the respite service which, I think, as the hon. Member acknowledges is very much valued by these family members.

1230 So what we are looking to do is to future-proof the respite services and allow us to make sure that it can continue to grow in a way that is concordant with the numbers that we are seeing come through the service. So that is what we are doing and that is what we are doing at the moment, for respite services between the hours of 3 p.m. and 7 p.m. which has a larger number of service users than the overnight stay.

1235 Would we look to increase the respite services? Absolutely. Have we really looked to consider that yet? That is not something which we have stopped to consider just yet to see how we can increase that service in the future.

Madam Speaker: Next question.

Q389/2024

Respite services for under-16s – Location; cost to service users and families

Clerk: Question 389/2024. The Hon. A Sanchez.

1240 **Hon. A Sanchez:** Can the Government disclose the location where it envisions that the respite services for individuals under the age of 16 to be offered once the tender process is completed? Additionally, can it confirm whether it foresees any of these services involving a cost to service users and their families?

1245 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, we are currently in the tender process and we will only know the potential locations once the tender process is closed. We expect to award the updated contract from 1st July 2024.

1250 The tender process has not been developed in a way with any intention to charge the service users or their families.

1255 **Hon. A Sanchez:** Madam Speaker, given that there are very limited locations where respite services, especially for those under the age of 16 can be offered in Gibraltar, does the hon. Member not have any ideas or anything in mind as to where she envisions that the services are going to be offered?

1260 **Hon. G Arias-Vasquez:** Madam Speaker, the very purpose of a tender process is to put it out there to see what comes back. So when we put it out for tender, we will see what comes back and who can offer the space in the best possible manner.

Madam Speaker: Next question.

Q390/2024
Sub-contracting services –
Cost effective for the taxpayer

Clerk: Question 390/2024. The Hon. A Sanchez.

1265 **Hon. A Sanchez:** Can the Government provide further details on how sub-contracting services, such as respite services, would be cost effective for the taxpayer?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

1270 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the Care Agency currently sub-contracts care workers from a range of agencies who provides domiciliary care, home support, respite care, learning disability care and children's care. The Care Agency is going through the process of updating and renewing the contract arrangements.

1275 The sub-contracted companies provide administrative and managerial support to the workforce, for example, management of rotas, recruitments and payroll. The sub-contracted companies also need to manage absence levels and cost of absences and training costs.

The renewal of these contracts via a competitive tender process also means that the taxpayer can be assured of a competitive pricing process.

1280 **Madam Speaker:** Any Supplementaries?

Hon. A Sanchez: Madam Speaker, has the Government carried out an assessment of how much sub-contracting these services would save the taxpayer annually?

1285 **Hon. G Arias-Vasquez:** Madam Speaker, we have conducted an assessment of what we envisage will be the savings, but we have to very much wait for the tenders to come back to see what savings will be made.

1290 **Hon. D J Bossino:** Savings, and I know it may sound like an obvious question, but I will explain. Is the idea of savings that the overall cost of the Exchequer will come down? Is that her aim? Or is it that the cost will remain the same but the Government will get more out of it, as she was saying, I think before, make the pound work more? Looking for the expression.

1295 **Hon. G Arias-Vasquez:** Madam Speaker, again, it depends on the outcome of the tender process. The purpose of the tender process is to make sure that we have maximum efficiency and that each and every pound that the taxpayer pays in this regard is spent to its maximum efficiency.

So the purpose of the tender, whether it be by way of saving or by way of providing more services for the same cost, is essentially to provide a better outcome for the Gibraltar taxpayer.

1300 **Hon. D J Bossino:** So just to follow on that, is it the position then that if the Government after receipt of the tenders is not satisfied, that it either is going to save money or produce more service for the same cost, that these services will not be 'contractualised'?

1305 **Hon. G Arias-Vasquez:** Madam Speaker, it will always be the case that if we do not feel that we are getting the best value for money, then we will look to alternative arrangements.

Madam Speaker: Yes, Mr Sacarello. The Hon. Mr Sacarello.

1310 **Hon. C A Sacarello:** Thank you very much, Madam Speaker. *(Interjection by Madam Speaker)*
I am following yesterday, indeed.

Could I ask the Government, Madam Speaker, if there is a danger here that we could be compromising on quality delivered, given the hon. Lady's comments earlier on training or the lack of oversight of the level of training; and in particular for example with the English language level?

1315 **Madam Speaker:** We are not going to go back to allow you to ask a supplementary on a question we have finished with. So if you have a supplementary on *this* question, I will allow it, but we are not going to go backwards.

1320 **Hon. C A Sacarello:** Thank you very much, I appreciate that. The question is related to this particular question, I just made reference to an answer that you gave earlier on. But that is fine.

My question remains: are we compromising, are we as Gibraltar compromising on standards here? Is there a drop in quality given a lack of oversight of the training and other standards?

1325 **Hon. G Arias-Vasquez:** Madam Speaker, absolutely not. In fact, the very essence of what we are trying to do is improve the standards and make everything more efficient, more cost effective for the taxpayer. What we are trying to do is specify the standards that we are actually demanding of these companies.

So absolutely not. Is there going to be a dilution of services? Absolutely not. Is there going to be a dilution of the quality of services? Absolutely not.

1330 **Hon. C A Sacarello:** Will the level of English spoken by these people be similar to what we can offer locally?

1335 **Hon. G Arias-Vasquez:** Madam Speaker, the realities of our global positioning means that we will be getting a lot of workers across the border. That is the reality of our situation.

Will we try and improve the standard of English? Absolutely. Will we try and match people to their abilities so the people that can speak only English will have care workers that speak English? Absolutely. But that is what we try and do currently.

1340 Now, can I sit here and say to you that everyone will speak the Queen's English? Absolutely not! And I think we have to be realistic in that respect.

Hon. C A Sacarello: Madam Speaker, yes, the King's English, but the answer is a little facetious when we are talking about matters as important as the care of people. The young people are in vulnerable positions, particularly when they are feeling –

1345 **Madam Speaker:** Sorry, I am going to stop the hon. Member because I cannot see how this supplementary relates to Question 390/2024. We have dealt with the language.

Next question.

Q391/2024

**Services to be sub-contracted –
Additional tenders; services planned**

Clerk: Question 391/2024, the Hon. A Sanchez.

1350

Hon. A Sanchez: Could the Government clarify whether it intends to issue additional tenders to sub-contract services previously provided by the Care Agency and/or the ERS? If so, could the Government specify with which services they are planning to sub-contract?

1355

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, on 13th May 2024 the Government advertised the ‘Tender for the provision of care services and facility management for the elderly residential services for John Mackintosh Home, Bella Vista and Hillside.’

1360

The Government has no intention to issue any tenders for services which were previously provided for by the Care Agency and ERS.

HM Government of Gibraltar has issued and will be issuing tenders for services which are currently sub-contracted by the Care Agency or ERS to ensure a better value for money and accountability to the taxpayer. The Care Agency and ERS sub-contract care workers from a range of agencies and are going through the process of updating and renewing these arrangements in a transparent manner in line with Government procurement regulations.

1365

Madam Speaker: Any Supplementaries? Next question.

Q392-93/2024

**C Sullivan v. the Care Agency –
Prevention of similar negligence; settlement**

1370

Clerk: Question 392/2024. The Hon. A Sanchez.

Hon. A Sanchez: Madam Speaker, could the Government elaborate on any lessons learned from the personal injury case of *C Sullivan v. Care Agency* and detail any measures being taken to prevent similar instances of negligence from arising in the future?

1375

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 393/2024.

1380

Clerk: Question 393/2024. The Hon. A Sanchez.

Hon. A Sanchez: In relation to the personal injury case of *C Sullivan v. Care Agency*, could the Government confirm how the £10 million settlement has been paid, specifically whether it will be paid in one instalment or multiple instalments, and from what source?

1385

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

1390 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, following the unfortunate incident where a service user with both physical and learning disabilities sustained a serious injury, the Care Agency has conducted a review to identify the factors that contributed to this event. It is important to acknowledge that while the incident was an accident, the support arrangement at the time did not fully adhere to their intended staffing protocol.

1395 In summary, the incident highlighted that at the time of the accident a Government training-scheme employee was supporting the service user on a one-to-one basis in the bathroom, whilst his colleagues were supporting other service users in the flat. Protocol dictated that this cohort of employees are to be supervised at all times.

1400 At the time of the accident there were staff shortages, and in order to continue services staff who had already completed training for over six months on the scheme and were considered competent, were at times having to work independently.

The lessons learned pertinent to this case underscore the importance of strictly following staff and health and safety protocols, and cancelling respite services if those cannot be adhered to due to staffing shortfalls.

1405 The Care Agency has enhanced their learning and development programme where there continues to be focus on risk assessment, emergency response and specific challenges to supporting people with both physical and learning disabilities. Training is mandatory for all staff, and is reviewed regularly.

1410 The Care Agency insurance cover for liability has also been upgraded. In addition to this, the Care Agency has reviewed policies to enhance standards of care and recruitment. In terms of governance, the Learning Disability Services record all accidents and incidents which are reviewed in the form of debriefing sessions with those involved as a means to learn from the experience. The measures are part of the Care Agency's ongoing commitment to provide safe and high quality care to the service users.

1415 In answer to Question 393/2024, Madam Speaker, I can confirm that the £10 million was paid in one instalment in accordance with the Court Order and processed by Treasury on 8th May 2024.

Hon. A Sanchez: Madam Speaker, I am grateful for that explanation.

1420 In relation to the hon. Member's explanation about the unfortunate accident and the lessons learned from the trainee supervising the service user, could the hon. Member comment on the fact whether it was a case at the time, that due to Government policy at the time far more experienced carers were being replaced by trainees from the future job strategy, as she says, with little and no supervision is sometimes solely based on factors, say, because it was Spanish and they had to be replaced by local individuals that came from the Future Drug Strategy, for example?

1425 **Hon. G Arias-Vasquez:** Madam Speaker, in the explanation that I provided, I provided the information which I think specifically answers the question that the hon. Member has asked.

I am unable to provide any further information on the circumstances of that case.

Madam Speaker: Any supplementaries?

1430 **Hon. Dr K Azopardi:** Can I just ask on the settlement sum, the payment, the Hon. Minister, I think said that they have been paid in one instalment. Can she confirm whether there was any part of that £10 million that was paid by insurance cover? And secondly, was the payment made from the Consolidated Fund or from any other fund, or from any other entity controlled by Treasury?

1435 **Hon. G Arias-Vasquez:** Madam Speaker, as I confirmed in an interview which I gave on the day that the settlement was entered into, the £10 million was not covered by insurance because the insurance had already been exhausted previously.

1440 As to the Hon. Leader of the Opposition's second question, I am unable to confirm that as I do not have the information in front of me.

Hon. Dr K Azopardi: Will the Hon. Minister be able to obtain that information and perhaps write to us on that basis once she obtains it?

1445 **Hon. G Arias-Vasquez:** Absolutely, Madam Speaker, if the hon. Member could write me a quick email, I will be happy to provide that information.

1450 **Madam Speaker:** All right. As I understand it, we are now at the end of the questions, of the Hon. Mrs Sanchez's questions, but we have 382/2024 and 383/2024 to come back to. Is the hon. Member ready to ask supplementaries on those, or would you like some more time?

Hon. A Sanchez: I do not have supplementaries.

Madam Speaker: You do not have supplementaries? All right. So we can move on.

1455 **Clerk:** Question 394/2024.

Hon. G Arias-Vasquez: (*Interjection*) Sorry. Given that we are about to change, would it be a good opportunity to have a quick recess and come back in 10 minutes?

1460 **Madam Speaker:** All right. We will recess for 10 minutes. Come back at 5.25 p.m.

The House recessed at 5.15 p.m. and resumed at 5.25 p.m

Q394/2024

Shift Patterns for Allied Health Professionals –

Clerk: Question 394/2024, the Hon. J Ladislaus.

1465 **The Hon. J Ladislaus:** Madam Speaker, please outline the shift patterns for all Allied Health professionals within the GHA, broken down by Department.

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I now hand over a Schedule with the information requested.

1470 **ANSWER TO QUESTION 394**

Grade	Working Hours
CHIEF PHARMACIST	8.45-4.30 (winter) 7.30am to 3.30pm (summer) plus on-call rota
PATHOLOGY SERVICES MANAGER	8am-3.30pm
CHIEF SPEECH & LANGUAGE THERAPIST	8.45-4.30 (winter) 7.30am to 3.30pm (summer) or 8am-3.30pm plus on call
HEAD OF OPTOMETRY	8.30/9am-4/4.30pm (winter) and 8am-3.30pm
RADIOLOGY SERVICES MANAGER	9am-4.30pm (winter) and 8am-3.30pm (summer)
PHYSIOTHERAPY SERVICES MANAGER	8.30-4.30pm all year round
SNR CLINICAL PHARMACIST/DISPENSARY MANAGER	8.45-4.30 (winter) 7.30am to 3.30pm (summer) plus on-call rota
HEAD OCCUPATIONAL THERAPIST	8.30am-4.30pm all year round
SPECIALIST DIETITIAN	8.30am-4.30pm all year round

CLINICAL PSYCHOLOGIST	9am to 5pm plus two evening clinics per week
COUNSELLOR	9am to 5pm plus two evening clinics per week
CLINICAL PHARMACIST	8.45-4.30 (winter) 7.30am to 3.30pm (summer) plus on-call rota
BASIC GRADE PHARMACIST	8.45-4.30 (winter) 7.30am to 3.30pm (summer) plus on-call rota
PHARMACY ASSISTANT TECHNICAL OFFICER	8.45-4.30 (winter) 7.30am to 3.30pm (summer) plus on-call rota
BLOOD BANK MANAGER	8am-3.30pm plus on call
QUALITY MANAGER	8am-3.30pm plus on call
PUBLIC ANALYST	8am-3.30pm
DEPUTY PUBLIC ANALYST	8am 3.30pm plus on call
SENIOR BIOMEDICAL SCIENTIST	8.45-4.30 (winter) 7.30am to 3.30pm (summer) or 8am-3.30pm plus on call
BIOMEDICAL SCIENTIST	8.45-4.30 (winter) 7.30am to 3.30pm (summer) or 8am-3.30pm plus on call. Shift rota - working three shifts/week.
BIOMEDICAL ASSISTANT	8.45-4.30 (winter) 7.30am to 3.30pm (summer) or 8am-3.30pm plus on call. Shift rota - working three shifts/week.
PATHOLOGY PRODUCTION ASSISTANT (P/time)	8am-3.30pm
	8.45am-4.30pm (winter) and 8am-2.30pm (summer) plus on call
BIOMEDICAL SCIENTIST - Molecular Team	7.45am-8.15pm
BIOMEDICAL ASSISTANT - Molecular Team	7.45am-8.15pm
HEALTH PROMOTION OFFICER	8.30am-4.30pm all year round
APPROVED MENTAL HEALTH PRACTITIONER	8am to 1pm and 2pm to 5pm plus on call
DIETITIAN - Sen I	8.30am-4.30pm all year round
OCCUPATIONAL THERAPIST - Sen I	8.30am-4.30pm all year round
OCCUPATIONAL THERAPIST - Sen II	8.30am-4.30pm all year round
JUNIOR OCCUPATIONAL THERAPIST	8.30am-4.30pm all year round
PHYSIOTHERAPIST - Sen I	8.30am-4.30pm all year round
PHYSIOTHERAPIST - Sen II	8.30am-4.30pm all year round
JUNIOR PHYSIOTHERAPIST	8.30am-4.30pm all year round
PHYSIOTHERAPIST HELPER	8.30am-4.30pm all year round
RADIOGRAPHER	9am-4.30pm (winter) and 8am-3.30pm (summer) plus on call
RADIOGRAPHY ASSISTANT	9am-4.30pm (winter) and 8am-3.30pm (summer)
SPEECH & LANGUAGE THERAPIST	9am-4.30pm
PAEDIATRIC SENIOR SUPPORT WORKER	9am-4.30pm
HEAD ORTHOPTIST	8.30am-4.30pm
HOSPITAL OPTOMETRIST	8.30/9am-4/4.30pm (winter) and 8am-3.30pm.
TECHNICAL INSTRUCTOR	8.30am-4.30pm all year round

Madam Speaker: Right, I will give you time to consider that. We will carry on with the next question in the meantime.

Q395/2024
Emergency call handling –
Envisaged timeline; control room staff

Clerk: Question 395/2024, the Hon. J Ladislaus.

1475 **The Hon. J Ladislaus:** Madam Speaker, what is the envisaged timeline for all emergency calls to be handled by a single unified control room and who will staff that control room?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

1480 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, at present the implementation of a tri-service control centre is not included in the GHA Strategic Plan. Our current focus remains on the ongoing development of the 111 999 call centre.

1485 **Madam Speaker:** Any supplementaries? To the Hon. Minister rather than to your hon. Colleague.

1490 **Hon. D J Bossino:** So is the idea to transpose what is currently offered by the 111 to the GHA, is that what she means by the last limb of her answer? So in other words, the Government is going to see how that develops with the potential of adopting it for the GHA. I did not quite understand.

Hon. G Arias-Vasquez: Madam Speaker, there was a press release a couple of weeks ago, I think it was last week or something, which says that the service will move to the GHA. So the 111 999 service is now manned by the GHA.

1495 **Madam Speaker:** Next question.

Q396-97/2024

Frontline emergency ambulance – Procurement cost; rapid response vehicles operational

Clerk: Question 396/2024. The Hon. J Ladislaus.

1500 **The Hon. J Ladislaus:** Madam Speaker, what was the cost of procuring the new frontline emergency ambulance?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

1505 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will answer this question together with Question 397/2024.

Clerk: Question 397/2024. The Hon. J Ladislaus.

1510 **The Hon. J Ladislaus:** Madam Speaker, when will the new frontline emergency ambulance and rapid response vehicles be operational?

Clerk: Answer, the Minister for Health, Care and Business.

1515 **Hon. G Arias-Vasquez:** Madam Speaker, the answer to Question 396/2024 of the total cost of the new frontline emergency ambulances and the high dependency unit is £281,748.

In answer to Question 397/2024, the most recent projection delivery date of frontline ambulances is estimated to be within 10 weeks. Two frontline ambulances have arrived at the coach builders and now require conversions for operations in Gibraltar. As for the rapid response vehicle, the fleet procured a new RRV in 2023, so there are no immediate plans for their replacement.

1520 **The Hon. J Ladislaus:** Madam Speaker, can the Hon. Minister confirm whether they will replace older vehicles in the GHA's ambulance fleet or is it envisaged that they will work alongside them for the time being?

1525 **Hon. G Arias-Vasquez:** Madam Speaker, there is a plan to roll out new ambulances as and when they are required. So the ambulances will be working alongside the current fleet until the plan kicks in for that ambulance to be replaced.

Madam Speaker: Any more supplementaries? Next question.

Q398-99/2024
Chaperoning of patients –
Examination protocol; safeguarding

Clerk: Question 398/2024. The Hon. J Ladislaus.

1530 **The Hon. J Ladislaus:** Madam Speaker, what is the protocol at the GHA in respect of chaperoning of patients upon examination by a doctor?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

1535 **The Hon. the Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will ask this question together with Question 399/2024.

Clerk: Question 399/2024. The Hon. J Ladislaus.

1540 **The Hon. J Ladislaus:** Madam Speaker, has a chaperoning protocol at the GHA proved to be effective in safeguarding: (1) Patients, (2) Clinicians, and (3) Members of staff acting as chaperones?

1545 **Clerk:** Answer, the Hon the Minister for Health, Care and Business.

Hon. G Arias-Vasquez: Madam Speaker, GHA clinical staff follow General Medical Council, Nursing and Midwifery Council and Nursing Registration Board Guidelines on chaperoning. These professional bodies regulate all consultants and nurses. These guidelines, together with legislation, protect the patient, the clinician and any member of staff acting as a chaperone.

1550 Within the GHA, a chaperone will usually be a healthcare professional unless the patient has requested a family member or friend. All patients are entitled to have a chaperone present for *any* consultation or examination. The chaperone will be the same sex as a patient, as per safeguarding, as an impartial observer during an examination of a patient.

1555 The process of having a third person present, i.e. the chaperone, provides emotional and sometimes physical support to the patient. The chaperone's role is effectively in safeguarding and respecting the patient's dignity by being alert to any improper behaviour during the consultation or examination. Chaperones also safeguard and protect clinicians against alleged allegations of improper behaviour or conduct during consultations or during conducting an examination.

1560 Finally, members of staff acting as chaperones fulfil a number of requirements to safeguard patients and clinicians. Additionally, under GMC, NMC, GHRB/NRB guidelines, these guidelines lay out that the chaperones should be prepared to report any concerns about a clinician's behaviour or actions. From this, you can see that the approach to chaperoning in the GHA is comprehensive and whilst it can always be improved we believe it is effective.

1565 **The Hon. J Ladislaus:** Madam Speaker, have factors relating to Gibraltar as a unique jurisdiction – I am referring, of course, to our size, location, cultural differences – been taken into account when implementing the chaperoning service that we have in place?

1570 **Hon. G Arias-Vasquez:** Madam Speaker, the provisions are provided here in Gibraltar, so they will always be adequate to meet the cultural needs of the population.

1575 **The Hon. J Ladislaus:** Madam Speaker, we are aware that there have been some issues in recent years in terms of chaperoning, and there is at least one case where allegations have been made by a service user of inappropriate conduct by a consultant. Has there been an internal investigation into such allegations and have the conclusions of that investigation influenced any changes in chaperoning protocol since?

1580 **Hon. G Arias-Vasquez:** Madam Speaker, we are aware of one particular complaint that has been made. That complaint has been investigated thoroughly by the GMRB, the GMC and beyond that. The matter is currently the subject of legal proceedings so we are unable to go into that in any further detail.

Madam Speaker: Next question.

Q400/2024
Prescription printers –
Introduction; cost; resources; replacement

Clerk: Question 400/2024. The Hon. J Ladislaus.

1585

The Hon. J Ladislaus: Madam Speaker, when were the current prescription printers introduced to the GHA, and:

- 1590 (i) What was the cost of purchasing all the current prescription printers, inclusive of all resources necessary to run them, such as ink and specialist paper?
- (ii) What is the cost of replacing a prescription printer?
- (iii) And what has been the annual cost, broken down by year, of running the current prescription printers since they were introduced, to include the combined cost of ink, specialist paper and maintenance?

1595 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

1600 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, prescription printers were initially deployed within the GHA in April 2010. The cost of purchasing all the current prescription printers, inclusive of all resources necessary to run them – such as ink and specialist paper – for the period 2019 to date is £69,150.

The cost of replacing a prescription printer is currently £494.00.

Additionally, the breakdown of the £69,150 is as follows: the prescription printers.

So financial year 2019-2021, 19 printers were purchased at a total cost of £7,318.00.

For the financial year 2021-2022 there were no purchases.

1605 Financial year 2022-2023 there were no purchases.

Financial year 2023-2024 there were 16 printers purchased at a total cost of £7,714.00.

The financial year 2024 to date there are no printers purchased to date.

The blue prescription roll printing paper, the cost of that is: in the financial year 2019-2021, £21,800.

1610 Financial year 2021-2022 the cost is £7,850.00.
Financial year 2022-2023, £9,668.00.
Financial year 2023-2024, £14,800.00.
For the financial year 2024-2025 there have been no purchases to date.
Prescription printers are only purchased as and when required. As these prescription printers
1615 are thermal printers, there is no need to use ink or toners, and as such there is no cost incurred
for the ink.

The Hon. J Ladislaus: I am grateful for that.

Has the Hon. Minister considered, or would she consider reviewing this policy of the use of
1620 printers to print prescriptions and perhaps move towards a more electronic-based system
whereby there would be a cost saving to the GHA?

Hon. G Arias-Vasquez: Madam Speaker, that has indeed been mooted and it is one of the
1625 things that we are looking for as a cost-saving measure.

Hon. D J Bossino: Which – I am assuming it is a company that provides the printers – can she
state which company provides the printers?

Hon. G Arias-Vasquez: Madam Speaker, that is a very specific question. I do not have the
1630 information on me.

Hon. D J Bossino: Is she able to say that they are outsourced, although she is not able to identify
which provider it is, but is she able to say that they are provided by a company?

Hon. G Arias-Vasquez: Madam Speaker, I assume that we buy the printers from somewhere.
1635 So, yes, the GHA does not manufacture printers, so it must be.

Hon. D J Bossino: Not the actual printers but the servicing and all the rest of it, that is what
I want to find out. Maybe if we ask the question at the next session or indeed write to the hon.
1640 Member given that she does not have the information?

Hon. G Arias-Vasquez: Thank you.

Madam Speaker: Next question.

1645

Q401/2024
Ozempic –
Health complaints after taking

Clerk: Question 401/2024. The Hon. J Ladislaus.

The Hon. J Ladislaus: Madam Speaker, how many service users have presented at the GHA
1650 with health complaints after having taken the drug Ozempic?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, a service
1655 user can present to the GHA with a health complaint at any time whether or not they are taking

Ozempic. It is difficult to disentangle whether these complaints are attributable to the drug as the data is not recorded in that way.

1660 **The Hon. J Ladislaus:** Madam Speaker, incidentally, in July 2023 the European Medicines Agency announced it was looking into mental health side effects associated with Ozempic, including thoughts of self-harm and suicide. Has the GHA carried out an impact and risk assessment prior to authorising the prescription of Ozempic in Gibraltar?

1665 **Hon. G Arias-Vasquez:** Madam Speaker, the GHA goes through NICE guidelines. So whatever is authorized by the NICE guidelines would be implemented in Gibraltar. So I do not believe that we have carried out such an impact assessment, but we would follow the NHS and any recommendations that were made by the NHS.

Madam Speaker: Next question.

Q402/2024

New Community Mental Health Facility – Recruitment: psychiatrists, psychologists, specialist mental health nurses

1670 **Clerk:** Question 402/2024. The Hon. J Ladislaus.

The Hon. J Ladislaus: Madam Speaker, will there be recruitment of further psychiatrists, psychologists and specialist mental health nurses to staff the new Community Mental Health Facility?

1675 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

1680 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the new CMHT facility will be staffed by the *current* complement of professionals. This complement will be continually reviewed as the service grows or the needs change. The new model for the community mental health service will be multi-disciplinary and will also be closely aligned with the charity sector.

1685 **The Hon. J Ladislaus:** Madam Speaker, from the answer given by the Hon. Minister, which I am grateful for, can we therefore assume that there will be no expansion of the staffing complement?

Hon. G Arias-Vasquez: Madam Speaker, that is correct. At the moment, it is not envisaged that there is any expansion of the staffing complement.

1690 **Madam Speaker:** Next question.

Q403/2024

Autism Spectrum Disorder and Attention Deficit Hyperactivity pathways – Addressing shortfall

Clerk: Question 403/2024. The Hon. J Ladislaus.

1695 **The Hon. J Ladislaus:** Madam Speaker, are there currently enough psychiatrists employed by the GHA to implement the autism spectrum disorder and attention deficit hyperactivity pathways, which are currently in the process of being drafted? And, if not, what is being done to address any shortfall?

1700 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the number of full-time psychiatrists employed by the GHA is sufficient to meet the demand.

1705 **The Hon. J Ladislaus:** Madam Speaker, have any assessments been carried out as to whether that is the case to date?

Hon. G Arias-Vasquez: Madam Speaker, we are in consultation at the moment with multi-disciplinary teams of paediatricians, psychiatrists, occupational therapists, speech therapists, etc. in order to confirm that that is indeed the case.

1710 So there is not only a requirement for the psychiatrist to carry out this assessment, but the psychiatrists have carried out an assessment and have determined that, together with the multi-disciplinary team that has come together specifically for the development of the neuro-developmental pathway, they have the sufficient resources in place to be able to assess children as required under the pathway.

1715

The Hon. J Ladislaus: I am grateful for the comprehensive answer. Could the Hon. Minister confirm that in the event that a further need is identified for further staff, that further staff will be employed in order to implement these pathways?

1720 **Hon. G Arias-Vasquez:** Madam Speaker, it has always been this Government's policy to ensure that the service can be delivered. If we are advised by the clinicians involved that there is a need, we will look to that. But at the moment I want to be very clear that we are told that the complement is sufficient to cover the demand.

1725 **Madam Speaker:** Next question.

Q404-08/2024

Psychologist waiting times –

Sufficient; intact; employment; contractual arrangements; waiting lists

Clerk: Question 404/2024. The Hon. J Ladislaus.

1730 **The Hon. J Ladislaus:** Madam Speaker, what is the average waiting time for a service user to see a psychologist at the GHA from the moment of referral broken down by adults and children and adolescents?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

1735 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will answer this question together with Question 405/2024 to 408/2024.

Clerk: Question 405/2024. The Hon. J Ladislaus.

1740 **The Hon. J Ladislaus:** Madam Speaker, is the current complement of psychologists sufficient to meet the demands placed on service?

Clerk: Question 406/2024. The Hon. J Ladislaus.

1745 **The Hon. J Ladislaus:** Madam Speaker, is the current number of full-time psychologists employed by the GHA sufficient to meet the high demands placed in the service?

Clerk: Question 407/2024. The Hon. J Ladislaus.

1750 **The Hon. J Ladislaus:** Madam Speaker, is the GHA's current complement of full-time psychologists intact or has the complement been depleted because of long-term sick leave, disciplinaries, resignations or for any other reasons?

Clerk: Question 408/2024. The Hon. J Ladislaus.

1755

The Hon. J Ladislaus: Madam Speaker, how many psychologists are in employment at the GHA as from 13th May 2024? How many of those are employed: (1) On a full-time basis; (2) On a part-time basis; (3) As locums; and (4) On a consultancy basis?

1760

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Hon. G Arias-Vasquez: Madam Speaker, in answer to Question 404/2024, the current average waiting time for a service user to see a psychologist from the moment of referral is as follows: adults 16 weeks; children and adolescents seven weeks. It is very important to note, however, that whilst waiting to see a psychologist, patients can also receive other forms of support, such as from Gibraltar Young Minds, counsellors or in the form of self-help materials.

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In answer to Question 405/2024 and 406/2024, yes, a full complement of psychologists are employed by the GHA. Counsellors, behavioural therapists and assistant psychologists support the psychologists.

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And in answer to Question 407/2024, the current complement of full-time psychologists is intact and therefore not depleted.

In answer to Question 408/2024, the GHA presently employs five clinical psychologists on a full-time basis; and additionally the GHA has contractual arrangements via service-level agreements with one counselling psychologist and one assistant psychologist.

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The Hon. J Ladislaus: Madam Speaker, given the nature of mental health issues, does the Hon. Minister feel that 16 weeks in order for an adult to see a psychologist and seven weeks for a child to see a psychologist is acceptable; and are Government doing anything to lower those waiting lists?

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Hon. G Arias-Vasquez: Madam Speaker, as I pointed out whilst the adult or whilst the child is looking to see a psychologist, there are other therapies that are available. So the child will see a counsellor, the child will be referred to other therapies.

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So the current waiting time, whilst obviously we would want to reduce that, is much lower than the UK and is not waiting time in a vacuum. It is a waiting time supported by other services.

The Hon. J Ladislaus: Madam Speaker, with approximately 4,000 people in Gibraltar per annum between the years of 2019 and 2023 having been medicated for mental health issues, does the Hon. Minister agree it may be time to look further into the development of the psychology team and the services that they can offer and the therapeutic services on offer, to move away from

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over-medicating when alternative treatments, or even treatments that are complementary to medication, can be relied upon such as cognitive behavioural therapy?

1795 **Hon. G Arias-Vasquez:** Madam Speaker, we have spoken about it tangentially, so I appreciate that the hon. Member might not be aware of it. We spoke about, both in an opinion piece I wrote in the Chronicle and in the subsequent press release, we spoke about the moving of the community mental health team from where they currently are to a location which is yet to be determined.

1800 The aim of the move of that project is not solely to lift and shift the services, but is intended to provide additional services to support users in the community. So the aim of the move is to: (1) Improve the facilities available; and (2) Provide a change in the services that are offered. I speak about it in terms of a hub because it is a hub which is intended to provide additional services, both in respect to the support that the people need and in terms of the multi-disciplinary teams that will be providing those services.

1805 So the intention is to provide a centre where people can come and just be; to provide a centre where people can come to provide counselling services, etc.; where charities can be more plugged into the services that are offered to patients in the future; and indeed where charities can come and avail themselves of the facilities offered.

1810 So when we talk about a new mental health facility and new services that are being offered, what we intend to do is not only to simply shift the services that are currently provided in the Coaling Island facility, but to improve the range of offering of the services available to members of the community to indeed prevent medication; to indeed prevent these members from having to attend Ocean Views or a similar facility by catching them at a point in time where they can avail themselves of the facilities that are available in the community. That is the aim of the new community mental health project.

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The Hon. J Ladislaus: I am grateful. Can the Minister give just an approximate as to when she expects that the hub will be up and running?

1820 **Hon. G Arias-Vasquez:** So we are in the process at the moment, Madam Speaker, of determining, we have found a location and it is simply a case of putting together the project in as effective a manner as possible. We intend to announce the project, hopefully, within the next few weeks and then it is simply a case of how long the refurbishment of the building will take.

1825 **The Hon. J Ladislaus:** Can we just confirm that the building is already an existing building and does the Hon. Minister have any idea as to costs of refurbishment?

1830 **Hon. G Arias-Vasquez:** Madam Speaker, the aim at the moment – I am not committing to this because we still have a lot of work to do on this – is to refurbish an existing building and we have an estimate of cost but I would rather not give that estimate of costs here today.

Madam Speaker: Next question.

Q409-13/2024

Psychiatrist waiting times –

Sufficient; intact; employment; contractual arrangements; waiting lists

Clerk: Question 409/2024. The Hon. J Ladislaus.

1835 **The Hon. J Ladislaus:** Madam Speaker, what is the average waiting time for a service user to see a psychiatrist at the GHA from the moment of referral in respect of both adults and children and adolescents?

Clerk: Answer the Hon. the Minister for Health, Care and Business.

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The Hon. the Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 410/2024 to 413/2024.

Clerk: Question 410/2024. The Hon. J Ladislaus.

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The Hon. J Ladislaus: Madam Speaker, does the GHA employ a full time psychiatrist with a specialism in children and adolescents?

Clerk: Question 411/2024. The Hon. J Ladislaus.

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The Hon. J Ladislaus: Madam Speaker, of the psychiatrists employed by the GHA, how many are (1) On a full-time basis, (2) On a part-time basis, and (3) As locums?

Clerk: Question 412/2024. The Hon. J Ladislaus.

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The Hon. J Ladislaus: Madam Speaker, is the GHA's current full-time psychiatrists intact, or has the complement been depleted because of long-term sick leave, disciplinarys, resignations or for any other reasons?

Clerk: Question 413/2024. The Hon. J Ladislaus.

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The Hon. J Ladislaus: Madam Speaker, is the current number of full-time psychiatrists employed by the GHA sufficient to meet the high demands placed on the service?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

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Hon. G Arias-Vasquez: Madam Speaker, in answer to question 409/2024, the wait time for all varies depending on the acuity of the situation. In an emergency or crisis, the patient is seen according to the established mental health crisis pathway. For routine non-emergency referrals, the wait time is usually around four to six weeks.

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In answer to Question 410/2024, as per other small-size jurisdictions the GHA does not employ a full time psychiatrist with a specialism in children and adolescents. The core team of general psychiatrists work across the age range and span of conditions, and where required seek advice and input from the professionals in the UK.

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In answer to Questions 411/2024 and 412/2024, the GHA currently employs five consultant psychiatrists, three on a full-time basis and two part time. Additionally, there is one locum consultant psychiatrist working on a full-time basis and a part time locum consultant psychiatrist commencing on 3rd June 2024. The complement of full-time psychiatrists is intact and therefore not currently depleted.

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In answer to Question 413/2024, the number of full-time psychiatrists employed by the GHA is sufficient to meet demand as shown by the relatively short wait time of four-to six-weeks.

The Hon. J Ladislaus: Madam Speaker, we have heard the Hon. Minister state that it is unnecessary for us to have a full time psychiatrist. If my memory serves me correctly, the psychiatrist who is currently employed by the GHA as a locum gives the GHA four hours of work per week, if I am not mistaken, in increments of two hours each time. I believe that was the answer

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given by the Hon. Minister when I last asked that, and then he comes to Gibraltar once every three months for a week at a time for face-to-face consultations with children and families.

1890 Does the Hon. Minister really think that that is an appropriate amount of time to dedicate to this area, particularly given with evidence which we have had recently in the reports suggesting increasing numbers of children with SEN, within Gibraltar, many of whom require psychiatric treatment and medications?

1895 **Hon. G Arias-Vasquez:** Madam Speaker, it is not for me to opine on whether the complement is sufficient or otherwise. I am told by the clinicians that the current complement is sufficient to meet the current demands. So, yes, there is an increase in demand of SEN and again we go back to the neuro-developmental pathway.

1900 The neuro-developmental pathway for children with ASD, ADHD and other such neuro-developmental issues is dealt with by a multi-disciplinary team. So it is not purely the psychiatrists that are dealing with that issue, it is a team of psychiatrists, paediatricians, speech therapists, occupational therapists, etc. Everyone coming together to meet the requirements of the service.

So the neuro-developmental pathway with the multi-disciplinary team that backs it should be able to meet the demands of the service for children and adolescents.

1905 **Madam Speaker:** Next question.

Q414/2024
Effects of refinery –
Impact on health; planned study

Clerk: Question 414/2024. The Hon. J Ladislaus.

1910 **The Hon. J Ladislaus:** Madam Speaker, can the Minister comment as to whether the Government has recently commissioned any reports into the effects and impact of the neighbouring refinery on the health of Gibraltar's population? If not, are there plans to commission such a study?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

1915 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, we have not commissioned such a study and there are no plans to commission any study through Public Health.

Madam Speaker: Next question.

Q415-16/2024
Cancer diagnoses –
Higher than Europe/world; types of cancer

1920 **Clerk:** Question 415/2024. The Hon. J Ladislaus.

The Hon. J Ladislaus: Madam Speaker, are the number of cancer diagnoses higher in Gibraltar than the average statistics for diagnosis in Europe and the rest of the world?

1925 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 416/2024.

Clerk: Question 416/2024. The Hon. J Ladislaus.

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The Hon. J Ladislaus: Madam Speaker, what are the statistics in respect of cancer diagnoses in Gibraltar broken down by adults and children and types of cancer for the years: 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023 and 2024 to date?

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Clerk: Answer, the Hon. the Minister for Health, Care and Business.

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, there is currently no statistical evidence that suggests the number of cancer diagnoses in Gibraltar are higher than in Europe or the rest of the world. The GHA currently holds a database where discussions on possible cancer diagnosis held by a multi-disciplinary team are recorded. Below are the numbers of patients recorded on this database broken down by tumour groups.

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It is important to note that the database may not hold complete information around diagnoses as its primary function is *not* a cancer register. For example, skin non-melanoma diagnosis started to be collected more rigorously part of the way through 2022 and therefore previous statistics are incomplete. Cancer diagnoses within the private sector, for example, are also not reflected in this data.

I now hand over the Schedule with the information requested.

ANSWER TO QUESTION 416

Tumour Group	2016	2017	2018	2019	2020	2021	2022	2023	2024
Adrenal	-	-	-		1	-	-		-
Brain	-	8	-	6	1	7	5	5	1
Breast	13	31	34	31	26	42	35	37	9
Eye	-	-	-	-	-	-	1	1	-
Gynaecology	3	9	12	15	10	12	14	20	8
Haematology	-	3	4	5	7	7	20	20	3
Head & Neck	4	3	7	10	5	8	10	8	3
Lower GI	14	38	26	17	20	26	21	33	9
Lung	7	27	22	12	18	27	27	27	10
Sarcoma	-	4	1	1	1	1	1	3	1
Skin (Melanoma)	3	4	7	5	3	5	12	20	8
Skin non-melanoma	-	1	-	1	2	2	49	146	57
Thyroid	-	-		-	1	1	-	3	-
Unknown Primary	-		2	1	-	4	7	3	1
Upper GI & HPB	7	20	12	11	25	17	16	21	8
Urology	11	30	25	31	59	55	61	98	34

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Madam Speaker: I will give the hon. Member time to look at the Schedule and we will come back to any Supplementaries on this later.

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Hon. Dr K Azopardi: Madam Speaker, while my hon. Colleague considers the Schedule, can I just ask on 415/2024 which I think is not related to the Schedule? So the Minister says there is no statistical evidence, now in coming to that conclusion on advice from officials, obviously, can the Minister give us a bit more information as to how the GHA, or those advising her, have come to that conclusion?

1960 Specifically, if I may, so that she understands where I am going from, I appreciate the question is quite broad but in terms of assessing, for example, the correlation or impact of environmental factors on cancer, has there been a comparison between the rates of cancer in Gibraltar and those in the immediate region in Spain, in Andalusia or the provinces close by?

1965 **Hon. G Arias-Vasquez:** Madam Speaker, I am not aware of whether there has been such a survey conducted of the number of cancers in Gibraltar and in the nearby region. What I do know is that the clinicians involved, and in particular the oncologists involved would be the ones to inform myself and Government if they are of the opinion that these were contributing factors to the number of cancers in the area.

1970 Specifically, when the question is asked of the oncologist in Gibraltar he points to four factors, none of which relate to the refinery and they are diet, exercise the normal factors that an oncology would point out. So we would be looking to the oncologists and the Director for Public Health to point us in the direction of telling us whether they thought that it was required to have a survey specifically determining whether this was a factor or otherwise.

1975 Now, in the data that is provided, the data that has now started to be collected, is data which is far more accurate as to the number of cancers that are being recorded in Gibraltar. That data, in itself, presents slightly problematic factors in that there are people that come across the frontier who have their cancers diagnosed here in Gibraltar.

So if we are looking at a summary of the population in Gibraltar, the data collected may not be a complete picture of the number of cancers recorded in Gibraltar of the resident population because of factors such as that.

1980 **Hon. Dr K Azopardi:** I appreciate what the Hon. Minister is saying but because she originally, in her original answer, said there is no statistical evidence that it is higher, in fact what I think she has explained now is that that is based on advice. But that she has also accepted that there has been no real statistical comparison to Andalusia or the provinces next to Gibraltar.

1985 So it is not really based insofar as the precise question of a comparison with the regions around us. The answer is actually there has not been a real evidential comparison other than she takes advice from the oncologists and would seek their guidance. Does she not think that, perhaps, it would be helpful to try to assess that in a more precise way?

1990 **Hon. G Arias-Vasquez:** Madam Speaker, the question that was asked of me was whether the number of cancer diagnosis are higher in Gibraltar than the average statistics for Europe and the rest of the world. The answer to that question is that it is not thought that the cancer diagnosis in Europe and the rest of the world is higher in Gibraltar than in Europe or the rest of the world.

1995 So the answer to that question remains as stated previously that there is no statistical data, as analysed by the experts that we employ to analyse the statistical data, which points to the fact that there is a higher instance of cancer diagnosis in Gibraltar than the rest of the world. So that is just for the clarification purposes. We have not gone into looking at the numbers comparing Gibraltar to the surrounding regions.

2000 **Hon. Dr K Azopardi:** I appreciate that. I think the Minister has just repeated, really, what she said already.

2005 I fully appreciate that the original question was quite wide and I was trying to drill down, pointing to a more specific analogy, perhaps, or at least evidential base which could guide. And really what I was asking, and I do not think the Minister has answered, is: does she not agree that it would be helpful having regard to the sort of region that we all live in, in this part of the southern Mediterranean, that there be some kind of assessment made of the morbidity rates of cancer in Andalusia and indeed in Cadiz and Malaga compared to Gibraltar and that, perhaps, would be interesting from the sort of environmental aspects as well as the actual rates?

I appreciate that the question was much wider than that and what I was trying to ask her, really more precisely, is: does she not think that we could do a much more focused assessment?

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Hon. Prof. J E Cortes: Madam Speaker, if I may assist having been asked similar questions maybe 10 years ago. We did try this at the time and there was one particular study, I believe, on breast cancer which was not conclusive.

2015 Madam Speaker, the variables are so great that it was decided then and I do not think things will have changed now, although certainly data collection is much better now, but the variables were so great that it was not felt that they would be able to establish cause and effect in any way.

So I completely agree with the Hon. Minister's conclusion.

Madam Speaker: Next question.

**Q416/2024
Supplementaries –
Cancer diagnoses**

2020 **Clerk:** Question 417/2024. The Hon. J Ladislaus.

The Hon. J Ladislaus: I am ready, in respect of the previous question.

2025 **Madam Speaker:** Supplementaries for 416/2024. Alright, yes, we will take the Supplementaries to 416/2024 before moving on then.

The Hon. J Ladislaus: Madam Speaker, in respect of the answer, the Schedule handed, as regards Question 416/2024, I am looking at urology at the very bottom of that table. Can the Hon. Minister confirm whether that includes prostate cancers?

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): I believe it does, yes.

2035 **The Hon. J Ladislaus:** I am not sure whether the Hon. Minister will have this information but are the sharp increases in numbers seen here in respect to urology? Because there is an alarmingly sharp increase, 2016, 11 and we go all the way to 2023 there are 98 cases diagnosed. Are those increases in number due to better data collection and recording; or do these reflect actual increases in the number of people who are diagnosed with these cancers?

2040 **Hon. G Arias-Vasquez:** Madam Speaker, I think that the answer is both, but I also think that the spikes and in particular, for example, if you look at skin: non melanoma there is also a spike there which I also asked about. So the increase in skin: non-melanoma and the increase in urology are also linked to skin cancer and prostate awareness campaigns.

So there is always a spike after those campaigns, which shows the value of those campaigns and the need to increase screenings in this area.

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2050 **The Hon. J Ladislaus:** One question based on the answer that the Hon. Minister has just given and it is in relation to a specific type of cancer, which is ovarian cancer, which is well known for being diagnosed at a very late stage, usually. In respect of ovarian cancer, would the GHA perhaps benefit from further screening, or a screening campaign as has been done with these other cancers?

2055 **Hon. G Arias-Vasquez:** So, Madam Speaker, the GHA benefits from screening programmes and from awareness campaigns in respect of every single cancer. Let's be clear and let's say that at the outset. The one thing that I would say is that there are certain cancers whose symptoms are very vague. To give you another example, pancreatic cancer.

2060 So there are campaigns at the moment and we have groups that are talking to the Director of Public Health about vague symptom awareness in GPs, so that GPs are aware of certain vague symptoms that in and of themselves might not be nothing individually, but when taken as a whole may point to specific cancers such as pancreatic cancer.

Madam Speaker: Next question.

Clerk: Question 417/2024. *(Interjections)*

2065 **Madam Speaker:** Yes, you have to get my attention. You have been sitting there so quietly I had almost forgotten you were there. Yes, do you have a supplementary?

Hon. E J Reyes: Yes. I am going to ask for a clarification.

2070 **Madam Speaker:** Yes.

Hon. E J Reyes: Thank you, Madam Speaker.

2075 For those of us not so well acquainted with the medical terms, I see there is a lower GI and then second last from the bottom is an upper GI, but the upper GI also includes HPB. For those of us not acquainted with medical terms, perhaps the Minister could enlighten us a little bit?

Hon. G Arias-Vasquez: Madam Speaker, unfortunately, I am unable to assist but I am sure that I will be able to get that information for you should you request it.

2080 **Hon. D J Bossino:** If I may, Madam Speaker, is this information leading the Minister somewhere? In other words, what comment can she make about ...? I mean, she has provided this information and we are having our own internal discussions arising from that, and some of them have been the subject of questions and I put it in these broad terms.

2085 For example, breast cancer, there is some good news in the sense that there is a drop from a figure in the 30s and 40s for a pretty much long period of time between 2017 and 2023, and there is a huge decrease in 2024 from 37 to 9, which is a good – *(Interjection)* Oh, to date, I see. Forgive me, of course, yes we are very early on.

2090 But the broad question does remain – and I do apologise to the House for that mistake – what conclusions does she draw and will it assist or inform her in coming up with policy? Does she have any comments in relation to that?

2095 **Hon. G Arias-Vasquez:** Madam Speaker, whilst it is for me to look at this and draw conclusions, it really remains for the Director of Public Health, it remains for the oncologists to draw those conclusions. The conclusions are that the Director of Public Health is in constant communication with me about, is about screening programmes, awareness campaigns and the involvement of different charities in the awareness of different cancers, different symptoms, etc. It is all about awareness and screening programmes in this area.

Madam Speaker: Next question.

Q417/2024
Accountability Agreement –
Safeguards ensuring independence of appointments

2100 **Clerk:** Question 417/2024, the Hon. J Ladislaus.

The Hon. J Ladislaus: Madam Speaker, other than the Accountability Agreement referred to by the Hon. Minister, what other safeguards are envisaged to ensure the independence of the GHA from Government, considering the Minister's intended role as Chair of the GHA Board, the Chief Secretary's intended appointment as Vice-Chair and the Financial Secretary's appointment as a member?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

2110 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the GHA has clear clinical and corporate governance processes that ensures the independence of individual clinical decisions from Government. The GHA's Committee structures ensures transparency of decisions and oversees good governance within the organisation.

2115 The Accountability Agreement between the Ministry and the GHA will be explicit in terms of the responsibilities between the parties and the red lines to ensure transparency and independence. This is to be agreed between both parties. In addition, we will be establishing a Patient's Charter whereby we will be explicit with the public regarding the level of service delivery they can expect from the GHA.

2120 I am confident that the new arrangements will ensure appropriate HMGoG oversight to the GHA, whilst simultaneously ensuring the independence of clinical decision-making within the GHA.

The Hon. J Ladislaus: Madam Speaker, we have just heard that a new Patient Charter will be established. May I ask whether a new Constitution will also be established for the GHA?

2125 **Hon. G Arias-Vasquez:** Madam Speaker, the Constitution and the Patient Charter pretty much go as one. As has been referred to in other questions, there have previously been references to the seven-point plan by the GHA and pretty much what we are doing is a continuation of that seven-point plan and a seven-point plan in 2024 onwards.

2130 So the Patient Charter and the Constitution are pretty much very similar documents, save for the fact that the Patient's Charter we intended to be a statutory document. So you have the force of law.

2135 **The Hon. J Ladislaus:** Does the Hon. Minister agree that this newly announced policy of the Health Minister sitting on the GHA Board represents, in essence, a complete U-turn in their manifesto commitments, which was a manifesto in which they were narrowly given a mandate by the people to lessen ministerial involvement in the running of the GHA?

2140 **Hon. G Arias-Vasquez:** No. We have been very clear in all press releases to date, that what we are doing is calibrating the relationship with HMGoG has with the GHA. So if we take interviews that have been given since the manifesto was published we have, indeed, even seen the unions calling for greater communication between the GHA and HMGoG.

2145 So what is in fact happening is a form of calibration of the relationship between the two of them. What we need to do is have an exercise whereby we determine the level of involvement without being too far involved in order to have clinicians making the decisions with Government involved in policy at the very core of the GHA. That is what we are trying to achieve.

The Hon. J Ladislaus: Does the Hon. Minister agree that there is a marked difference between the concept of greater communication and sitting on the actual Board?

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Hon. G Arias-Vasquez: We do agree that or we do think, clearly, that there will be greater communication between the parties by the Minister's involvement in the actual Board; and we do think that will be beneficial to all parties because the GHA needs to understand what is driving policy and the HMGoG needs to understand intimately the needs of the GHA.

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The Hon. J Ladislaus: Madam Speaker, has the Hon. Minister considered that her mere presence on the Board symbolises tighter ministerial control over the running of the GHA, and it will have the inevitable consequence of impacting upon clinical decision-making whether the Minister contributes to those discussions or not and whether she intends for it to be that way or not? Just her presence in the room when discussions are taking place are likely to impact upon those decisions.

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Hon. G Arias-Vasquez: Madam Speaker, absolutely not, in fact the reality is that whatever decisions are taken on a GHA Executive Board, the HMGoG and myself are answerable in this Parliament to the people of Gibraltar. Therefore, it is almost inevitable that there has to be someone present on those discussions in order to lead the policy discussions on that Board.

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The Accountability Agreement, which in effect was part of the seven-point plan that was previously entered into, the Accountability Agreement will set out very clearly what the red lines are. We have said on numerous occasions that the GHA has to be led by clinical decisions; but policy has to be driven by Government.

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Government has to have an oversight of what is happening in the GHA and that is, therefore, what we are trying to do to come together to have that clinical decision with the overarching policy sat on the same Board.

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The Hon. J Ladislaus: I am grateful.

Has the Hon Minister had discussions with higher-level individuals responsible for the governance of the GHA as to whether it is a good idea for her to be sitting as the Chair of this Board?

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Hon. G Arias-Vasquez: Madam Speaker, I have daily discussions with management of the GHA, including discussions on the involvement of HMGoG in the GHA Board.

The Hon. J Ladislaus: And is this idea widely supported?

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Hon. G Arias-Vasquez: Madam Speaker, we believe it is.

Hon. J J Garcia: Madam Speaker, I think it is a good moment now to move that the House do now adjourn until tomorrow Wednesday, 22nd May at 3 p.m.

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Madam Speaker: The hon. Member will forgive me for proposing the question (*Laughter*) that this House do adjourn to tomorrow. I was not paying attention – 3 o'clock or 3.30? Tomorrow at 3 p.m. I will put the question which is that this House should adjourn to tomorrow at 3 p.m.

Those in favour? (**Members:** Aye.) Those against? Passed. This House will now adjourn to Wednesday 22nd May at 3 p.m.

The House adjourned at 6.15 p.m.



PROCEEDINGS OF THE GIBRALTAR PARLIAMENT

AFTERNOON SESSION: 3.00 p.m. – 6.20 p.m.

Gibraltar, Wednesday, 22nd May 2024

Contents

Communications from the Chair	3
Members of the Opposition to refer to Question numbers to identify Supplementaries	3
Questions for Oral Answer	3
Education, the Environment and Climate Change	3
Q430/2024 Hot school lunches – Timeline for implementing.....	3
Q431/2024 College of Further Education – Site; educational programmes to be delivered ...	5
Q432/2024 Programme of investment on infrastructure – Each zone; anticipated costs.....	6
Q433-34/2024 EV charge points – Numerical targets; tender issuance; installation and management.....	7
Q435/2024 Complement of buses – Reduction	9
Q436-38/2024 New cycle routes – Safety audit carried out; timeline	11
Q439/2024 CEPSPA petrol station access – Compliance with cycle routes policy	14
Q440/2024 Disruptive foliage – Walking experience plans.....	15
Q441/2024 Notre Dame School water ingress – Measures to resolve	17
Q442/2024 World War II Tunnel Project – How financed.....	19
Q443/2024 Trees at the Mount – Issue with termites	22
Q444-45/2024 Parson’s Lodge – Total cost of works	22
Q446/2024 Botanic Gardens Theatre contract – Granted to whom.....	24
Q447/2024 (commenced) Upkeep of Cemetery – Trimming of flora	27

<i>The House recessed at 4.27 p.m. and resumed at 4.45 p.m</i>	28
Q447/2024 (continued) Upkeep of Cemetery – Trimming of flora	28
Q448/2024 Gibraltar Taxis Service – Government satisfaction	29
Q449/2024 Commonwealth Park Lift – Non-operational: times, periods, length.....	31
Q450/2024 MT Theresa II oil tanker incident – Enforcement/action by Environmental Agency	33
Housing and the Gibraltar University	34
Q451/2024 Government Dwellings – Measures to prioritise needs	34
Q452-55/2024 Essential infrastructure upgrading – Costs; programme; commencement; implementation; management; participants.....	35
Q456/2024 New Housing Project designs – Update	40
Justice, Trade and Industry	41
Q457/2024 Domestic violence and sexual offences – Access to therapeutic services.....	41
Q458/2024 Criminal convictions under 18 years of age – Statistics.....	43
Q459/2024 Domestic violence conviction – Statistics: number of offenders	44
Q460/2024 Sexual offences convictions – Numbers	45
Q461/2024 Royal Gibraltar Police Officer training – Vulnerable witnesses; suspected offenders	46
Q462/2024 Youth detention centre – Where situated; specialist staff recruited	47
Q463/2024 His Majesty’s Prison – Adults, young people, children: convicted, serving sentence, awaiting trial.....	49
Q464-65/2024 Removal from EU grey list – When secured; what steps taken.....	49
Deputy Chief Minister	52
Q466/2024 Tennis Courts at the Mount – Availability for public use.....	52
Adjournment – Thanks to Prime Minister Rishi Sunak	54
<i>The House adjourned at 6.10 p.m.</i>	55

COMMUNICATIONS FROM THE CHAIR

Clerk: Meeting of Parliament Wednesday, 22nd May 2024.
(i) Communications from the Chair.

5

**Members of the Opposition to refer to Question numbers
to identify Supplementaries**

Madam Speaker: Just a very brief word.

When a Minister groups a series of questions together and in their answer they specify the question number that they are answering, I ask Members of the Opposition that imposing Supplementaries, they refer to the question number in respect of which the Supplementary relates. That will make it easier for the Minister to identify the information sought and importantly it will make it easier for the public to follow. Of course, if a Minister answers a series of questions non-specifically, then the direction does not apply.

Questions for Oral Answer

EDUCATION, THE ENVIRONMENT AND CLIMATE CHANGE

**Q430/2024
Hot school lunches –
Timeline for implementing**

Clerk: Answers to Oral Questions continued.
15 Questions to the Hon. Minister for Education, the Environment and Climate Change.
Question 430/2024. The Hon. A Sanchez.

Hon. A Sanchez: Could the Government confirm the timeline for implementing hot school lunches in all schools?
20

Clerk: Answer, the Hon the Minister for Education, the Environment and Climate Change.

Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes): Madam Speaker, there is no specific timeline for the implementation of hot school lunches for schools. The Department of Education is actively engaged with the successful bidder in conducting a feasibility study to provide hot school lunches at the secondary schools as a pilot, and then review the outcomes with the intent to expand to other schools.
25

The aim is to commence a service to the secondary schools during the first school term of the 2024-2025 academic year. In other words, this coming September.
30

Hon. A Sanchez: Madam Speaker, does the Hon. Minister, would he be able to elaborate on the details of this, is he aware if this would come at a cost to parents? Can he specify any more details on this?
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Hon. Prof. J E Cortes: Yes, Madam Speaker.

The intention is that it should be similar to what happened a few years ago before the company that did it went into administration. The cost would be borne by the parents.

One of the things we are negotiating, clearly, is to keep the cost down so that it will not be unreasonable. I cannot recall exactly how much it cost at the time, I think it was a few pounds, but that is the intention, that it would be paid by the parents or the carers of the children.

Hon. Dr K Azopardi: I think we have finished. Can I just raise a Point of Order, Madam Speaker? Yesterday, when we paused the session we paused at Question – I think it was 419/2024, if I remember rightly (*Interjection*) 418/2024. Obviously, we note that we started today at 429/2024 and the reason for that is because the Minister with that responsibility to answer those questions is not here and it is clear from what has just happened that, at least, the learned Clerk and Madam Speaker were aware of that.

It would be useful to us to also be aware of the batting order because it impacts on when Members on this side of the House are here, because it could have been that Members thinking they had a cushion of an extra 20 minutes might not have been here. It is a simple courtesy, I think, to Members on this side of the House to also be aware of how we are running the business and then the Members opposite can do that quickly via WhatsApp.

Deputy Chief Minister (Hon. Dr J J Garcia): Madam Speaker, just to clarify that this happens sometimes and it is unavoidable and I have been in this House for more than 20 years and it is not the first time that this has occurred regardless of who has been on which side. But if I understand it, I think, Madam Speaker and the hon. Clerk were not actually aware of it themselves. This is something which we found out now and I have had to react to the circumstances.

Hon. Dr K Azopardi: I am grateful –

Madam Speaker: What I would say to that, and I will let the hon. Member reply in a moment, is that it would be helpful if the House knew and the Opposition knew as soon as possible. I cannot put it any higher than that because I do appreciate that there may be Opposition Members who may be relying on the fact that we are continuing on from yesterday and may not be here and that may disrupt the issue.

So, all I would say is that I would urge Government Ministers to communicate to the Opposition and to the Chair as soon as reasonably practical.

Hon. Dr K Azopardi: With your indulgence, because you indicated that it would be okay for me to finish the point, I do not want to overextend it, but I fully appreciate what the Deputy Chief Minister says that sometimes these things happen. I appreciate that in a small Parliament sometimes matters emerge, but I would say two things about that.

We are now in the world of modern communications and the Members opposite can simply WhatsApp us just to let us know. That is okay, that would be enough for us to organise ourselves. Secondly, it would be hoped because I from time-to-time, express the hope that we would organise ourselves with a better way, with a clearer calendar going forward on these issues so that we all know where we are going on matters. Not just in terms of days of forthcoming sessions?

Madam Speaker: I am not going to ask, unless the Hon. the Deputy Chief Minister particularly wants to reply on the issue of calendar or better organisation, because I think that is a matter that was originally canvassed by me behind the Speaker's Chair and perhaps it is time to revisit those conversations. But now certainly is not the time for that.

I reiterate the comments I made earlier about giving reasonable notice as soon as possible, or as much notice as soon as reasonably possible, and we will move on with the questions now.

Hon. Deputy Chief Minister: Madam Speaker, if I may, certainly sometimes it is unavoidable and it happens. As I say, I have been here for more than 20 years and I have seen it happen on many occasions, but I do accept your view or your ruling that as soon as possible, as soon as we know, we should inform the Opposition. But working on diaries and diary management is something we are doing now in the Select Committee on parliamentary reform. So, hopefully, we will be able to address all these issues very soon.

Madam Speaker: I presume that the Opposition is in a position to continue with the questions as we have read now? (*Interjection*) All right.

Q431/2024
College of Further Education –
Site; educational programmes to be delivered

Clerk: Question 431/2024. The Hon. E J Reyes.

Hon E J Reyes: Good afternoon, Madam Speaker.

100 Is the Government able to update this House in respect to the site to be used and educational programmes to be delivered at a new College of Further Education?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

105 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, as is known publicly already, the site for the new Gibraltar College will be on Devil's Tower Road adjacent to the Cross of Sacrifice.

The College continues to expand its educational offer, for example, into vocational courses and under its new Principal, Daniel Benrimoj together with the Department of Education, is working on developing this further to make the most of the new facilities as well as overseeing courses off-site. No details are yet available.

Hon E J Reyes: Thank you, Madam Speaker.

115 A couple of things, the Minister has obviously referred me back to a site that they had once expressed as a preferable site, which was near to the Cross of Sacrifice. Having wandered around the location I am intrigued as to where, physically, the building can fit in because I think it is part of the Royal Air Force enclosure if one goes a bit to the north from the Cross of Sacrifice, and towards the east of the Cross of Sacrifice is a car park.

120 So is it the intention to alter some of those buildings to benefit the College? Otherwise, I cannot figure a particular space where the College will fit physically?

125 **Hon. Prof. J E Cortes:** Madam Speaker, the designs are in the public domain. They have got full planning permission, so those designs are available on the Town Planning portal. Yes, they should be there. But in order to assist, the plan is that there would be a slight variation of the Commonwealth of War Graves Commission's demise to be able to move the building forward, then there is a considerable gap between that and the car park, but it all would also move partly into what is currently the car park to give a footprint which will be, in fact, larger than the current College.

130 **Hon E J Reyes:** Thank you for that extra information, and in respect to the educational programmes – I am just asking for clarification because the Minister has neither confirmed nor denied – is it still the intention to continue offering more like a community college-type of

135 programme which includes adult evening education courses and so on, you know? It is a question that I am asked every now and then and I thought it better to get a more formal answer on that issue.

Hon. Prof. J E Cortes: No problem at all, I am very happy to assist my hon. Friend, as everybody knows, after many years at school together.

140 Yes, the College will continue in its present format plus it will allow opportunity for young people to do A-levels and vocational courses. It also has a developing LSF and will continue to increase the offer of occasional courses including off-site courses where facilities may be available elsewhere as well as the traditional, what we normally call evening classes for adults. Absolutely, that is all in the plans.

145 The details, as I said in my answer, are still to be confirmed. There is new management, so to speak, and the plans are although they are now there, we are now beginning to meet with the College to allocate exactly where everything is going and to plan ahead. I am sure I will be asked questions in the future and I would be very happy to provide that information to the hon. Member.

Madam Speaker: Next question.

Q432/2024

Programme of investment on infrastructure – Each zone; anticipated costs

150 **Clerk:** Question 432/2024. The Hon. C Sacarello.

Hon. C Sacarello: Good afternoon.

155 Can the Government provide us with its programme of investment on infrastructure for each Zone in the 2009 Development Plan with anticipated associated costs?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

160 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, the Government has an ongoing programme of investment in infrastructure that spans multiple utility services. This has been delivering and continues to deliver both new and replacement infrastructure across the whole of Gibraltar. It is not possible to provide details with costs of future projects, especially as some will still need to be tendered out.

165 **Hon. C Sacarello:** I thank the hon. Member for his reply there. Over the next few years, there are a huge number of developments that are coming onto the market that would equate, roughly speaking, just looking at the large developments, Madam Speaker, to around 6,000 units. Each unit will have varying number of bedrooms where we take an average of three per unit. This of course does not include commercial or smaller developments.

There is a question coming, Madam Speaker.

170 There is an average flow, I am talking from a waste water perspective, of 150 litres per person per day of waste water. If you take those rough rule of thumb measurements, you get 18,000 litres multiplied by 6,000, it is 2.7 million litres of waste water potentially, assuming full occupancy of these, per day. Can our sewers cope with this?

175 **Hon. Prof. J E Cortes:** Madam Speaker, the bulk of the increase in development will be on the east side and already there has been a lot of infrastructure taken along to – can I say just to simplify – the *eastern end* of Devil's Tower Road and there is more work planned for connection

of services to that area. So, yes, the sewer will be able to cope with that with the additional works that are going to be carried out.

180 There is also a modernisation of the supplies to the Upper Town, some of the works which are currently ongoing and there are also plans to improve services in the Upper Rock in conjunction with the Ministry of Defence, which also still has an interest there.

185 In answer to the hon. Member's question, the answer is yes; and as I say there is infrastructure work planned particularly the connecting to the east side which is where a large amount of new development is going to take place.

Hon. C Sacarello: Madam Speaker, I thank the hon. Member for his reply.

190 If we assume, of course, that the system can cope perhaps the Minister would be able to inform us what the sewerage volumetric capacity limitations are, especially in choke points, given that I asked for the investment on infrastructure?

Hon. Prof. J E Cortes: Madam Speaker, I would need notice of that question in order to be able to obtain the detail which is not something that, I think, from the question as it is asked I can be expected to have. Yes, Madam Speaker, if the hon. Member will drop me an email I would be
195 happy to provide him with that information.

Madam Speaker: Next question.

Q433-34/2024
EV charge points –
Numerical targets; tender issuance; installation and management

Clerk: Question 433/2024. The Hon. C Sacarello.

200 **Hon. C Sacarello:** What is the Government's numerical target in terms of EV charge points to meet the required level of demand for EV vehicles triggered when the sale of new petrol and diesel becomes unviable under the Laws of Gibraltar?

Clerk: Answer, to the Hon. the Minister of Education, the Environment and Climate Change.
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Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes): Madam Speaker, I will answer this question together with Question 434/2024.

Clerk: Question 434/2024. The Hon. C Sacarello.
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Hon. C Sacarello: The GSD welcomes the long overdue publication of the Government's electric vehicle-charging strategy. Will the Hon. Minister be able to provide certainty as to the intended date of issuance of the tender for the installation and management of EV charge points at various key locations around Gibraltar?
215

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

Hon. Prof. J E Cortes: Madam Speaker, in answer to Question 433/2024, the Government will ensure that the appropriate infrastructure and technology are in place to meet the demands of EV, of electric vehicles, whatever those may be in the future. The team is working on the appropriate planning for the transition of petrol and diesel cars to alternative energies such as publishing the Electric Vehicle Charging Strategy, I am confident we can meet the level of demand.
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225 In answer to Question 434/2024, the tender is currently being drafted and the teams are working on this with the procurement office. I say 'teams' in plural because it includes the Department of the Environment with the Gibraltar Electricity Authority working together.

Hon. C Sacarello: Madam Speaker, would the hon. Member be able to elucidate as to – ?
(Interjection)

230 **Madam Speaker:** Which question are you?

Hon. C Sacarello: I beg your pardon, Madam Speaker.

235 Question in relation to Question 434/2024. Would the hon. Member be able to elucidate as to the date of the tender, when it will be issued at this stage?

Hon. Prof. J E Cortes: I am afraid not, Madam Speaker. This is a complex tender and there is a lot of tender work being done at the moment. I am anxious that it should be out as soon as possible.

240 **Hon. C Sacarello:** Madam Speaker, the Government declared a Climate Emergency in 2019 and the Act was published that same year. Decarbonisation of the vehicle fleet was a key part of that strategy. Why has it taken the Government nearly five years to come up with a strategy for this? Is that their response to an existential emergency?

245 **Hon. Prof. J E Cortes:** No, Madam Speaker. The Government is committed to that and is doing a lot of work, firstly in preparation of the strategy and as I think this House knows, the net-zero delivery body chaired by the Hon. Deputy Chief Minister, is doing a lot of work throughout Government Departments to respond to the emergency and to aim at the commitments that it has in its Climate Change Strategy. That work cannot be judged by the publication of one single document.

250 **Madam Speaker:** Still on 434/2024?

Hon. C Sacarello: Yes, still on 434/2024.

255 Could I ask the Hon. Minister why there are no proposed EV charge points for Town, Upper Town or the Eastside?

Hon. Prof. J E Cortes: Madam Speaker, the issue there is related to the ability to supply, and part of the tender will include the need to take the right amount of power to the different points. We have been working closely with the companies that run the petrol stations and we are hoping that they will be able to have fast charging points so that they will be able to be charged at least there. But the challenge is taking sufficient supply to the different points and part of the work that is being done by the teams that I mentioned is in order to address this.

265 **Hon. C Sacarello:** Finally, Madam Speaker, on 434/2024 again.

The document, while certainly interesting, is very light unfortunately on data confirming how much the total capacity required will be, and it omits any mention of any regional breakdown, such as the ones just mentioned, in demand and how capacity will be distributed and shared.

270 So to this extent, it seems like more of a document of intent rather than a strategy. Will the hon. Member be willing to share such data with me and this side of the House either now or sometime in the next few weeks, some core data with regard to capacity?

Hon. Prof. J E Cortes: Madam Speaker, the document is deliberately high level. The drilling-down into the detail is very complex and that is informing the tender document. So I know that

275 the information is being gathered, I do not have it here, I do not know how soon it will be in a form that is useful to share. But I have no problem; there is nothing secret here.

We know it is a challenge to supply electricity for charging points in different parts of Gibraltar. We are doing the maths and that is why the tender document is so complex and it will be fed in and once information is here. I am very happy to share either here or if the hon. Member contacts me separately.

Madam Speaker: Yes. The Hon. Mr Bossino.

285 **Hon. D J Bossino:** If I may, Madam Speaker, in relation to 433/2024, the Hon. the Minister, mentioned in his reply when he was referring to the needs, and I think he said ‘whatever they may be in the future’. From this standpoint, the question is how is that going to be determined with any clarity or any specificity because if one takes those words as they are, then it is rather nebulous. Would he not agree?

290 **Hon. Prof. J E Cortes:** I have said this before, I think, Madam Speaker.

I suppose there were similar discussions when horses were being replaced by petrol vehicles, you know. Are we going have a petrol station near the Moorish Castle? How many petrol stations will we need? And these things evolve and these things happen.

295 When I say whatever these are in the future, fortunately the North Mole Power Station has surplus capacity at this point in time, and the assessments that certainly I am no longer involved directly with the GEA – although I am indirectly when it comes to renewables – fortunately I am informed that we can confidently supply the demands that electric vehicles will have and there are intelligence systems where either in garages, in housing estates or in an electric vehicle hub, as happens in some cities, the software will ensure that it equates the amount and distributes it equally, so that there is no surplus demand.

300 So all the technical people tell me that we can deal with it. It is not easy, but as I said, when horses gave way to cars I am sure there were similar dilemmas that had to be considered.

Madam Speaker: Next question.

Q435/2024
Complement of buses –
Reduction

305 **Clerk:** Question 435/2024. The Hon. D J Bossino.

Hon. D J Bossino: Has there been a reduction in the complement of buses?

310 **Clerk:** Answer, the Hon. the Minister for Education, the Environment and Climate Change.

Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes): Madam Speaker, the number of buses has been the same since 2015.

315 **Hon. D J Bossino:** The information that I have, Madam Speaker, is that there has been a reduction in the complement of buses. In other words, as I do not have the figures, I was given the figures, but I do not have them here with me. So in order to service the routes, I think, it requires 22 buses but then there is always a surplus of three or four just in case there is a breakdown, and we have heard of cases of infestation of cockroaches in some of the buses, which

320 has meant that some of the buses had to be removed but then that has resulted in a worsening of the service.

So can I delve further into that whether there has been a reduction? Can he acknowledge that what I am saying is, in fact, correct that there has been a reduction in the complement, in the sense that we do not have spare buses to replace those that are needed in order to carry out an efficient service?

325 **Hon. Prof. J E Cortes:** Madam Speaker, I have no knowledge of that.

There are 26 buses. I have no notice of a reduction of the service. At the moment, four buses are being treated for cockroaches as is well known and they are not in service. So they are spare, but they are no longer spare because they are being treated.

330 So have we not got spare buses? We do, but the reason why they are spare is that they have to be spare so that they do not have to be used. So I do not think there is a problem. I think the number of buses are adequately servicing the routes although, as I say, we are looking at improving the routes and we are looking at replacement buses.

But for the purposes of the question, there has been no reduction, there are still 26 buses.

335 **Hon. D J Bossino:** Madam Speaker, this question arises from the, answer that the Hon. Minister has given in answer to my supplementary question, so if I may, in relation to the cockroaches, I know it does not directly arise from the question in the Order Paper. Can he give us some information in relation to that? He talks about, in relative terms, quite a high number of the fleet that is available to the Gibraltar Bus Company infested with the cockroaches, which from the evidence that we have seen on this side of the House looks rather severe.

340 Does he have any information as to why that is the case? Because quite frankly, it is something which I think should be addressed, should not have happened in the first place, and should certainly be addressed as soon as possible.

345 **Hon. Prof. J E Cortes:** I do not think it is, if I may say, a logical supplementary, but I am happy to provide the information in the interest of the House knowing. Madam Speaker, there are cockroaches throughout the world, we all have heard that they will survive a nuclear winter.

350 It happens that there were four that became populated with cockroaches. As soon as this was detected they were taken off service. They have been treated now by the Environmental Agency. I have, today, seen the reports that it seems that the matter has been resolved. They are now going to be thoroughly cleaned to get rid of any of the treatment materials.

355 Why it happens? I think if we all look carefully even in our own houses, we will occasionally see cockroaches and they are very resilient. The warmer winters mean that they do not get killed off like they used to, so clearly it is a problem. But I am glad to say that, at the moment, they have been adequately dealt with and none of these infested buses have been on the streets taking passengers.

360 **Hon. D J Bossino:** Madam Speaker, with your indulgence, I am told here to ask the question as to whether they are actually in the seats themselves, which is quite disgusting, because these things, I see one of the things I will –

365 **Madam Speaker:** I am loath to go into a discussion on cockroaches when that was not the main question. I have indulged. The Hon. Mr Bossino with allowing him to put the question, but I think if the hon. Member wants to ask on cockroaches you should specifically ask the questions next time.

So if there are any other supplementaries on 435/2024 proper, please do go ahead, otherwise we will move on from cockroaches.

370 **Hon. D J Bossino:** There is a connection with the question and I would have asked the question in the Order Paper but it arose after the deadline. If needs be, I will file a question on it for the next session of the House.

Are the four replacement buses, which affect complement, back on the streets? In other words, those which were, dare I say, infected by the these particular insects?

375

Hon. Prof. J E Cortes: No, Madam Speaker, as I explained, they have been treated, the treatment seems to be successful, it takes a few days for the treatment to take full effect and then they have to be thoroughly cleaned to get rid of the materials that that were used. So I think it will be a matter of days before they are back in service. But I could not tell, the hon. Member exactly how many, but we are almost back on track.

380

Hon. D J Bossino: In relation to the number of buses, he says that there has not been a change since 2015. In which direction was there a change in 2015? He says that the current number is 26 and I would ask him to provide this House with information as to what the number was prior to 2015.

385

Hon. Prof. J E Cortes: Madam Speaker, I do not know. In 2015 I was, Minister for Health and I did not have any sight on buses. I can obtain that information, but I do not have it to hand.

390

Madam Speaker: Next question.

Q436-38/2024
New cycle routes –
Safety audit carried out; timeline

Clerk: Question 436/2024. The Hon. D J Bossino.

Hon. D J Bossino: Has the safety audit been carried out on all new cycle routes?

395

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes): Madam Speaker, I will answer this question together with Questions 437/2024 and 438/2024.

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Clerk: Question 437/2024. The Hon. D J Bossino.

Hon. D J Bossino: Has a cycle audit been carried out?

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Clerk: Question 438/2024. The Hon. D J Bossino.

Hon. D J Bossino: Please provide the details in terms of timeline as to when the cycling infrastructure will be rolled out?

410

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

Hon. Prof. J E Cortes: Madam Speaker, my answers to 436/2024 and 437/2024 I am going to combine because they are quite similar and in answer to these two, together, all new cycle infrastructure has undergone Design Manual for Roads and Bridges (DMRB) compliant Road Safety Audits. This is paramount to certifying that the design adheres to the strictest safety standards

415 according to the relevant standards for the scheme. The audit team is independent of the design team which ensures an unbiased perspective on the proposed design and implemented routes.

In answer to Question 438/2024, significant progress has been made with regard to the implementation of cycle infrastructure in the last 12 months since Kingsway opened in March 2023 and the launch of the Gibraltar Active Travel Strategy in January 2023.

420 As you may appreciate, Madam Speaker, the implementation of cycle infrastructure requires a great deal of planning, design, stakeholder involvement, traffic studies, etc.

There are also certain aspects to the proposed cycle network to await the completion of proposed developments, such as Chatham Views and the ex-Rooke site before these pieces of the complex jigsaw puzzle can come to life. The infrastructure is not only limited to cycling but
425 improving roads, parking and walking facilities to each respective area. Underground services as well as drainage are also upgraded and enhanced within these projects.

There are plans to develop the infrastructure in a number of areas subject to the funding that will be made available following the budget debate.

430 **Hon. D J Bossino:** Question 438. Is the Hon. the Minister able to be more specific in relation to the answer?

One acknowledges many of the things he has said, but there is set out in very clear terms in Gibraltar's Active Strategy, which they published in 2023, which talks about the different phases that would be rolled out in the context of the cycling infrastructure. So can I ask him when these
435 are going to take place and where?

Hon. Prof. J E Cortes: Madam Speaker, 'when' is when the budget is made available following the Appropriation Bill and where there are a number of small areas and extensions, within the next few weeks there will be an extension down the Europort area which will extend the new cycle
440 lane which we created a few weeks ago, which goes halfway down that road to the level just before you get to Charles Bruzon House that will be taken to the roundabout.

Then as part of a private development on Europort Avenue there will be an extension to the north and south along that area, which will eventually link with the proposed cycle route around the Rooke site. Then the other one that I can recall right now, Madam Speaker, is the extension
445 of the cycle lane from Waterport roundabout towards the comprehensive schools in the area we know as *Los Patitos*. Some of us remember the *Patitos*, but those are the ones that I can recall right now. Exactly when, apart from the short one that I mentioned that is just weeks away, once the development there leaves the site it will depend on the funding availability for its timing.

450 **Hon. D J Bossino:** Again using by way of reference, the strategy: is it the intention, as an initial stage, to create and to construct what are known as pop-up cycle lanes as a Phase 1, then to have more permanent structure? Is that what each of these projects that he has referred to are likely to undergo? Is that the process?

455 **Hon. Prof. J E Cortes:** The first one I mentioned, the short stretch, will be a pop-up. Most of the others I mentioned would be more substantial. Where we want to extend and perhaps the funding does not stretch, then we can do pop-ups in areas where we had meant to do substantial ones.

Another area which I forgot to mention, Madam Speaker, is the area parallel to Rodger's Road, La Bateria that is one area that we also want to create a cycle lane; and there is another one,
460 which I have just remembered – the thing is as we talk I remember more – is one behind King's Wharf along the waterfront. And those which we cannot fund immediately to the higher standard would, at least initially, as many as we can, be pop-up ones.

465 **Hon D J Bossino:** Barring, I think, one of the initiatives that he has referred to the others, he says, are subject to funding and therefore after we debate and presumably pass by Government

majority the Appropriation Bill, happens in a few months' time. Now beyond that, does he have, because he has been very specific as to the plans that he has, some of which may not happen should he not have the funding but assuming, if I may, and I know that I may be delving into the breach of the rule as to hypothesis, but –

Madam Speaker: Well then don't. (*Interjections*) If you know, don't.

Hon. D J Bossino: A fair assumption given the reply that I have had, where the Government has specific plans and presumably he is going to be advocating for funding in order to carry these out. Assuming that he does get the funding, can he give a timeline as to when he expects these cycle lanes to pop up, for use of a better expression? I mean, can I offer this to him, would it be during the course of the next financial year?

Hon. Prof. J E Cortes: Madam Speaker, these things take a lot of planning, a lot of design, preliminary designs are ready, for one or two of them they are pretty advanced, but I cannot say exactly when. But I must say though, as I think I mentioned, that we are now asking developers to provide cycle lanes around the development. So some of the ones that I have mentioned, like the one in Europort for example, will not require public funding because that is a condition to the developer and the one in Rooke as well will be privately funded as part of the planning process.

Madam Speaker: The Hon. Mr Reyes had a supplementary.

Hon. E J Reyes: Thank you, Madam Speaker.
If I may, the Minister on his original ...

Madam Speaker: On 438/2024. Are we still on 438/2024?

Hon. E J Reyes: Yes, 438/2024 because the Minister, in his original answer, made a reference in respect of cycling infrastructure, he made a reference to car-parking spaces and so on.

Does he have any idea at this stage? Because the general public feels that each day we are losing more and more parking spaces. Does he have any idea, a ballpark figure, of how many additional parking spaces will be lost?

Hon. Prof. J E Cortes: A section of the general public feels that, another section of the general public may not exactly agree and may have different views and there will be a range of views.

No, we are trying very hard to avoid any significant loss of parking. I could not give any figures, but I do know that in most of the ones that I can think of there would be realignments and no significant loss of parking as a result specifically of the cycle lanes. But every project is different.

Madam Speaker: Next question.

Hon. D J Bossino: I have supplementaries in respect of 436/2024 and 437/2024 – (*Interjection*) I am grateful.

In relation to the cycle, the reason why I asked this on this basis, in other words distinguishing between the audit for the new cycle routes and the cycle audit generally, is because that is how it was distinguished in the strategy and he will recognise that, I am sure. But can I ask who is carrying out these audits?

Hon. Prof. J E Cortes: At the moment, they are in-house.

Hon. D J Bossino: By 'in-house' I assume it is the Transport Department, and the hon. Member prefaces the response by 'at the moment'. Is there an intention to change that in the future?

520 **Hon. Prof. J E Cortes:** No. I said 'at the moment' because I do not know whether, before my time with this portfolio, it might have been done by another entity. That is why I was referring to the past and not to any consideration for the future.

525 **Hon. D J Bossino:** He says that the audits were carried out as against by way of a benchmark, as I took it, I think he talks about the standards of the scheme. Can he enlighten this House as to what he is referring to when he says that?

Hon. Prof. J E Cortes: I do not have the details here. There are rules and regulations but I am not familiar with the detail.
530 Again, I am happy to supply that information if the hon. Member asks me outside this House or if he asks me another question in a future session.

535 **Hon. D J Bossino:** When the hon. Member is referring to rules and regulations is he, presumably, not referring to statutory rules and regulations? (*Interjection*) These must be, what are they, internal policy documents and guidelines which his Department has against which these cycle lanes need to be built?

Hon. Prof. J E Cortes: Madam Speaker, I refer to the Design Manual for Roads and Bridges, abbreviated as DMRB. There are standard industry manuals that define how these things should be done and that is what I am referring to.

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Madam Speaker: Next question.

Q439/2024

CEPSA petrol station access – Compliance with cycle routes policy

Clerk: Question 439/2024. The Hon. D J Bossino.

545 **Hon. D J Bossino:** Does the access to the new CEPSA petrol station comply with the Government's stated policy regarding cycle routes?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

550 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, as part of the policy and through the publication of the Active Travel Strategy and the revised Highway Code, pedestrians and cyclists should have priority at junctions at all times. It must, however, be noted that the Gibraltar Highway Code is not law and is an advisory document that illustrates good practice. Safety considerations can, exceptionally, override this.

555 The proposed entry and exit of this site was approved through the Town Planning process with the relevant permits issued in January 2020. The entry is via Kingsway and the exit via the Eastgate Roundabout. This configuration works best as vehicles exiting on to the Eastgate Roundabout do not have to travel eastbound through the tunnels towards Beach View Terraces and back towards the frontier via the tunnel again.

560 If we can envisage that, Madam Speaker, if they came out where they come in, they would have to turn right and travel right through the tunnel, turn around and come back to the frontier. So the present system alleviates traffic congestion within the tunnel with its implications on safety and at the roundabout by Beach View Terraces.

I must stress, Madam Speaker, that the layout showing the 'Stop' and 'Give way' for cyclists was implemented and instigated by the tunnel operators with one goal in mind: the safety of cyclists and E-scooters using this infrastructure.

565

This proposal was tabled at the most recent Kingsway Emergency Planning Group meeting, chaired by the Tunnel Manager, attended also by the Chief Technical Officer, the tunnel design team, the Royal Gibraltar Police, the Gibraltar Defence Police, Gibraltar Parking Management Services Limited, Gibraltar Fire and Rescue Service, Gibraltar Health Authority, Civil Contingencies, Road Tunnel Safety Consultants, the Ministry of Transport and the Technical Services Department.

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The matter was specifically discussed as there was a desire that cyclists *should* have priority at this junction. However, concerns of high vehicular movement and lack of line of sight, particularly for HGVs and buses as they are coming along, may not see a cyclist down beside them and if they have right of way and the HGV turns in, they might not see the cyclist. This resulted in the general consensus being the keeping of this stop for cyclists in the interest of cyclists and E-scooter safety.

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The decision was upheld unanimously by the Traffic Commission, which includes a cycling representative.

CEPSA has now been open for over a month and the existing arrangement seems to be working well. Nevertheless, the junction can be reviewed and any modifications or improvements can be revised accordingly in the future, if required.

580

Hon. D J Bossino: Madam Speaker, a lot of thought has clearly gone into this and I assume it is because the Hon. Minister wants to ensure that the Government Status Policy, which I read briefly from the strategy, is that drivers and motorcyclists should *not* – and I accept it is *should* not – cut across cyclists going ahead when they are turning into or out of a junction; and presumably what the hon. Member is saying is that despite his best efforts that is what he wanted to achieve but it was impossible as a result, in effect, of safety considerations because of the traffic in the area.

585

My question, therefore, is in that context: is it not almost impossible to achieve this stated aim as set out in the strategy in almost any junction? In other words, that the cyclist should always have priority over vehicular traffic, because the points he has made, without meeting all and sundry, if I could put in on those terms, will always trump the cyclist. And therefore the status policy of the Government is simply not workable.

590

Hon. Prof. J E Cortes: Madam Speaker, the exception justifies the rule. These are exceptional circumstances. If we had not had the tunnel with that turn having to necessarily have these vehicles going back through the tunnel twice, then the entry could have been in reverse and then we could have done it.

595

I said in my answer that, exceptionally, we have to go against the recommendations that what we would like to do in the interest of safety. I think we have done it on this occasion but that does not mean that these circumstances will apply in every other occasion. So I do not think that the hon. Member is correct in his analysis.

600

Madam Speaker: Next question.

Q440/2024
Disruptive foliage –
Walking experience plans

Clerk: Question 440/2024. The Hon. D J Bossino.

605

Hon. D J Bossino: Are there plans to improve the walking experience such that foliage does not cause a disruptive effect?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

610 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, I cannot provide a concrete answer to this because there is no reference to a specific area of Gibraltar.

We encourage walking as a preferred choice across Gibraltar, and surely the hon. Member is not suggesting we remove all foliage from Gibraltar.

615 Perhaps he could be more specific, Madam Speaker.

Hon. D J Bossino: I think the question, as posed, is sufficient for the Hon. Minister to answer. *(Interjection)* Well, I can give him examples from direct experience and I can offer to him Europa Road, for example. You see parents with prams having to negotiate – and this is caused by
620 Government and private premises where there are trees and other forms of foliage and bushes and all the rest of it that encroach on pavements and they are having to walk on the road in order to negotiate these.

I have given them a specific example, but it is Gibraltar-wide. I am surprised that he is questioning what I am saying or doubting it and maybe the hon. Member himself does not walk
625 enough. But I can tell you that I do, and this is my personal experience and this is something that many people have told me.

And in the context of the Government's policy which is again set out in their much-vaunted 2023 Strategy, it says on at least two or three occasions that they want to improve their walking experience and specifically deal with foliage. This is why I have asked the question in these terms
630 and I offer him the further opportunity, if I may, to make a comment in relation to this.

Hon. Prof. J E Cortes: Madam Speaker, I am really sorry that the hon. Member seems to think that I can read his mind. Are there plans to improve the walking experience, such that foliage does not cause a disruptive effect? That could be everywhere and anywhere that could be on the Upper
635 Rock that could be Main Street.

The hon. Member has identified a specific area where, clearly, they interfere with his walking. I would say, Madam Speaker, that I could outwalk him anywhere, because I do walk a lot, and I would be happy to challenge him to a walk. But, Madam Speaker, the specific areas that he is concerned about, if they are reported they will be acted upon right away. He need not hesitate in
640 sharing those photographs with me and I will make sure that they are dealt with right away in order to enhance *his* walking experience in particular.

Hon. D J Bossino: Madam Speaker, I will happily take him up on the offer, most definitely. He has offered for me to walk with him and he has offered that I send him photos.

645 I will certainly –

Madam Speaker: Perhaps I should walk with both of you as arbitrator just to make sure you are –

650 **Hon. D J Bossino:** The point would be very obviously, clearly and forcefully made when I send him the photos as soon as I possibly can, because I will do so; and the serious point here is that it is in breach of the strategy where it talks about, in terms of improving the walking experience, and under the section of maintenance it talks about 'as well as the cutting back of vegetation'.

And, I repeat, this is not just Government premises but also private premises. But it is actually quite bizarre that it happens, *(Interjection)* as I say, in many areas of Gibraltar. But can I ask him specifically: when they are talking about maintenance, who is meant to be carrying out this
655 maintenance?

660 **Hon. Prof. J E Cortes:** Madam Speaker, first, let me say that we have done a lot to enhance the walking experience by the national trails and we were recently praised by how we have improved Mediterranean Steps in time for that wonderful charity challenge that we have every year. So we have done a lot to enhance the walking experience, maybe not where the hon. Member, particularly, walks. I assure him that that is not deliberate in order to spoil his walking!

665 Madam Speaker, if the area is private then it is clearly up to the owner of the property. But obviously we – by ‘we’ I would say the Department of the Environment – would notify that owner and ask them to carry out the works. The works, actually, depending on the area, there are different horticultural contractors with responsibility for different areas and the work would be apportioned to them according to the area where the offending foliage happens to be growing.

670 **Hon. D J Bossino:** Is the hon. Member telling the House that, in effect, the maintenance programme and the monitoring of all of this is being carried out by his Department; and that will be expressed in either directly Members of his Department literally cutting off the relevant foliage which is impacting on the ability to walk on pavements – which in some respects it is actually quite serious as I have told him in my question, it could result in danger to the pedestrian because you

675 literally need to go on to the road and sometimes carrying a child and in that sense this is a serious point that needs to be considered.

But also, how is success of that being monitored? Because I am totally confident that I will be able to persuade him that, certainly in Europa Road – and it is not just the area that I walk many people walk up and down Europa Road – there is a massive issue. I cannot talk about other areas,

680 but I am sure that there is other evidence of that happening.

Hon. Prof. J E Cortes: Yes, indeed, green Gibraltar is growing of its own accord! Madam Speaker, I can assure the hon. Gentleman that any areas that he identifies – and I will make it a point today on my way home to have a close look at Europa Road – that those will be dealt with right away and I would be grateful for carrying out the work in alerting us to where that

685 is.

The work, as I say, would be carried out not directly by my Department, they would work on the Upper Rock, but in urban areas it is done by horticultural contractors and if there are areas of concern – and I have no reason to doubt the Hon. Member – then they will be dealt with.

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Madam Speaker: Next question. (*Interjection*) No, we have dealt with this long enough. Next question.

Q441/2024
Notre Dame School water ingress –
Measures to resolve

Clerk: Question 441/2024. The Hon. D J Bossino.

695 **Hon. D J Bossino:** Are there water ingress issues in Notre Dame School; and if so what measures are being introduced to resolve them?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

700 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, there was water ingress at Notre Dame due to a latent defect on the waterproofing in one section. The rate of ingress was minor but because it had been concealed behind the plasterboard the damage was only evident after some time.

705 A repair was carried out to the single-ply waterproofing membrane at and beyond the affected area and to the pergola footings. The area was then flood tested satisfactorily.

The proprietary rooftop coating is on order and will be applied by the end of the month.

Hon. D J Bossino: The hon. the Member says 'one section'. Which section?

710 **Hon. Prof. J E Cortes:** The section in the southwest area where there is a pergola, which is the pergola I referred to.

Hon. D J Bossino: Is he saying that the issue is now totally resolved, no more water ingress issues?

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Hon. Prof. J E Cortes: I am saying that *that* area has been satisfactorily tested, according to the information that I have. I have been on site and as far as I am aware – but it still needs the rooftop coating. So at the moment repairs have been carried out to the single-ply waterproof membrane but there is still a need for the rooftop coating to complete the work.

720

Hon. D J Bossino: The question is Notre Dame School and he has identified one section and he has given the answers to his House. Does that section relate to the gym, because the specific information that I have is that there are water ingress issues in relation to the gym and he talks about a pergola?

725

So I wonder if there are other issues which are impacting this building.

Hon. Prof. J E Cortes: The pergola is on the roof. I do not think that this would impact on the gym but it might well, but I would need detail. This is the information that I have been given by the contractors who are dealing with it.

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Hon. D J Bossino: Well, what the hon. Member is in effect telling the House is that he may not have been given complete information, but the information that I have may be completely wrong as well, that is also a possibility.

735

Now, because we are talking about the school and the building, can I also ask him whether he is aware that there are also issues with water ingress which is having a rather serious impact in the car park down underneath the school building?

Hon. Prof. J E Cortes: Yes, Madam Speaker.

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Hon. D J Bossino: The hon. Member did not offer that answer in response, I imagine it is because he was thinking about the school, but the school is a building and the car park is under the school building. So in that sense, I would have assumed that in order to provide a complete answer he would have given that information in the first instance.

745

But given we are where we are, can he give information as to whether that water ingress issue has been resolved?

Hon. Prof. J E Cortes: I believe, Madam Speaker, that it has not but I believe they are looking at technical solutions, but it is not related to the problem in the school itself and I have answered according to the question.

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I would very easily have obtained further information if I have been told we are talking about the car park. The car park is not the school, otherwise I would have.

If the hon. Member, wants to ask me another question on a future occasion or wants to remind me to provide him more information, I have no problem at all. I know the problem is being addressed, but I do not have the full details.

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Hon. D J Bossino: The hon. Member says he does not have 'the full details' and he tells us that he has some details and he is saying that they are being addressed. I will take him up on the offer that he has proposed, is he able to state at least when he expects the issue to be resolved? Because it is it is having an impact on car users who use the facility to park their cars.

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Hon. Prof. J E Cortes: From my understanding, it is not the whole car park, there are some specific spaces. But, again, I think that the owners of those spaces have been, at least temporarily relocated but I am not sure, I would need notice of this. I do not know, exactly, when this will be resolved. I know that they are looking at technical solutions.

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But, again, I need notice of these questions if I am going to be more specific.

Madam Speaker: Next question.

Q442/2024
World War II Tunnel Project –
How financed

Clerk: Question 442/2024. The Hon. D J Bossino.

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Hon. D J Bossino: How is the World War II Tunnel Project being financed?

Clerk: Answer the Hon. the Minister for Education, the Environment and Climate Change

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Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes): Madam Speaker, the World War II Tunnel Project is being financed privately.

Hon. D J Bossino: I think the company is called Wright Tech Media Limited, are they the ones themselves providing the financing for this project? Is that the case?

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Hon. Prof. J E Cortes: Madam Speaker, the company that is doing the work is providing the finance. I know no more detail than that.

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Hon. D J Bossino: Is the hon. Member able to provide an answer as to, whilst the company itself may be providing its finance, whether it is itself receiving any financial assistance from the Government in *any form* whether through a Government company and all the rest of it?

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Hon. Prof. J E Cortes: Madam Speaker, to my knowledge, not in relation to this project. If the company has other arrangements on other projects, but not in relation to this project. At this point in time, I do not think so.

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Hon. D J Bossino: What are the contractual arrangements between the Government? I assume this is a Government site and it enters into contractual arrange arrangements with Wright Tech Media. But what is it? They take over the site and they earn the profits and the Government spends absolutely no money in terms of the infrastructure?

I ask him this because he will recall that during the summer months he, with a fair bit of fanfare shall we say, and with another official of his Department announced the refurbished World War II tunnels and now we are having a second version of it. So I am just trying to understand what has happened there and what the current contractual arrangements are with this particular entity.

800 **Hon. Prof. J E Cortes:** Madam Speaker, in relation to that fanfare, I could have played one because I am still quite an accomplished bugler, so I could easily have played the fanfare. (A Member: Hear, hear) The Hon. the Leader of the Opposition is signifying by head motion that he might not agree, but I would not like to challenge him to a bugling competition like I have challenged the hon. Member to a walking competition because I think that one I would definitely

805 win. *(Interjections)*

But joking aside, that was Phase 1, we always said there would be further phases. I think I have answered the question adequately. If the hon. Member wants more details on contractor arrangements, I would need notice in order to delve into the detail.

810 **Hon. D J Bossino:** Could he at least say whether the site is being handed over to this company and then the Government participates, or does not participate any further in relation to that. Whether, for example, in relation to ticket sales and percentages and profits from that sale, and issues like that. Does he have absolutely no notion whatsoever in relation to, at least, the basic contractual arrangements?

815 **Hon. Prof. J E Cortes:** Madam Speaker, the danger to my being generous with information when I have not had a specific question and I have not got a direct draft in front of me, is that it could be seen that I am misleading the House in some way, so I hesitate before I answer.

820 What I can say is that the management of the site would be done by the entity that is refurbishing it and financing it under the supervision of the Department. The details of the contract, I would not hazard to say from memory because I would be in danger of saying something that is not correct. I would rather have the benefit of my officials preparing the proper draft or my asking them for more details.

I think I have answered this question, as I said before, adequately, plus.

825 **Hon. D J Bossino:** Is he himself – ?

Madam Speaker: Is the hon. Member ... I am trying not to remind you, but I cannot resist it because you keep falling into the trap. *(Interjection)*

830 **Hon. D J Bossino:** The rule is – and I have been admonished by this side of that. So the rule is that I –

Madam Speaker: I am not admonishing you, I am reminding you. *(Interjection)*

835 **Hon. D J Bossino:** The rule is that one refers to the hon. Member, initially, and then one can say, use –

Madam Speaker: If we are being technical, they are not hon. Members they are Hon. *Ministers*. You are hon. Members, but they are Hon. Ministers. But in any event, we should not start questions with he, she, you. It is not new to you. The Hon. Mr Bossino will know it is not new. I have raised this with *(Interjection)* the hon. Member before.

845 **Hon. D J Bossino:** The Hon. Speaker has ...

Madam Speaker: What is the question?

Hon. D J Bossino: Wind and sails come into mind. The Hon. the Minister, can I ask him whether he is involved in, or has been involved in, the negotiation of the contractual terms; and are those contractual terms already determined? In other words, is there already a contract in place?

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855 **Hon. Prof. J E Cortes:** Madam Speaker, I have been briefed about the contractual details. So if I am briefed by my official and there is a discussion in the office, in the widest of terms, this is a kind of involvement, but I have not led the negotiations and I believe that there is a contract in place for the management of the site.

860 **Hon. D J Bossino:** Can the Hon. the Minister also state whether the project has received the relevant regulatory and planning approvals; because there has been an announcement and I assume that all of that is already in place. If not, it is possible that the project, as announced, may not happen.

So the question is: can he state whether this project has received the required regulatory and other approvals and permissions?

865 **Hon. Prof. J E Cortes:** Some of the details for the finalisation of those aspects which may require it, will be before the Development and Planning Commission tomorrow, so it is expected that, I mean, you never know – but it is expected that that will be dealt with and all the heritage aspects have been covered.

870 **Madam Speaker:** The Hon. the Leader of the Opposition had a supplementary. (*Interjection*)

875 **Hon. D J Bossino:** Madam Speaker, is the Hon. the Minister seriously telling this House that as far as this project is concerned, we are still not in a position where we have full planning permission. Is that the case? Because it is conceivable, given his answer, that tomorrow or whenever – I think he said tomorrow – the DPC meets and determines it against the application as it stands.

880 **Hon. Prof. J E Cortes:** Madam Speaker, those aspects that require planning are before the Commission tomorrow, but there are other aspects which were not significant and did not require it. I do not think the project is at risk. Although I must say, Madam Speaker, that this is stretching the information being requested well beyond the question that I have already answered, I think, satisfactorily.

Madam Speaker: Yes.

885 **Hon. Dr K Azopardi:** Madam Speaker, thank you.

890 I just wanted to ask one question and this is not about the detail of the contracts, but just to get clarity about something that the hon. Member said on that side. He made reference to a Management Agreement so, to be clear, while not having the detail in front of him the arrangements that the Government have with this company is by nature of a Management Agreement, it is not a lease that has been granted by the Government to this company, is that correct?

895 **Hon. Prof. J E Cortes:** Absolutely, Madam Speaker, there is no lease involved, it is an agreement to manage the site.

Madam Speaker: Next question.

Q443/2024
Trees at the Mount –
Issue with termites

Clerk: Question 443/2024. The Hon. D J Bossino.

900 **Hon. D J Bossino:** More foliage! (*Laughter*) Is there an issue with termites affecting trees at the site of the Mount?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

905 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, the Department of Environment has not had reports of termites in trees in the Mount.

Hon. D J Bossino: The Environment Department may not have received formal reports, but is he saying that the Government, in whatever guise or himself, has not received any information as to termites affecting trees in the Mount? Maybe the Hon. the Deputy Chief Minister can assist, but actually the information that I have on very good authority is that there is an issue to the extent that the issue has been resolved. That is what I have heard, but that there was an issue of termites affecting trees in the Mount.

915 **Hon. Prof. J E Cortes:** Madam Speaker, I have no knowledge of that whatsoever. Although I must say that termites do not affect trees because termites do not eat living tissue. So the tree must have some damaged tissue before termites will deal with it. But I have had no reports.

Madam Speaker: Next question.

Q444-45/2024
Parson's Lodge –
Total cost of works

920 **Clerk:** Question 444/2024. The Hon. D J Bossino.

Hon. D J Bossino: What was the total cost of the works carried out at Parson's Lodge?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

925 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, I will answer this question together with Question 445/2024.

Clerk: Question 445/2024. The Hon. D J Bossino.

930 **Hon. D J Bossino:** Please state whether a Planning Permit, Heritage Licence and Certificates of Fitness have been issued in respect to the works carried out at Parson's Lodge.

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

935 **Hon. Prof. J E Cortes:** Madam Speaker, the works at Parson's Lodge were at no extra cost to Government. The costs were covered by Knightsfield Holdings Limited from its annual contract fee. That was in answer to 444/2024.

940 In answer to 445/2025, the works were very limited in scale and primarily involved the tidying up of the site and the installation of exhibits. These were not considered to constitute development for the purposes of the Town Planning Act 2018 and therefore did not require planning permission. Similarly, no Certificate of Fitness has been issued as this would only be done if there had been works requiring approval under the Building Rules.

945 In respect of a heritage licence, none was required for the same reasons as given above. The changes were considered by the Heritage and Antiquities Advisory Council and were considered negligible so as not to require a licence. In any case the Ministry for Heritage supervised the changes throughout to ensure they were compatible with the Heritage and Antiquities Act 2018.

I understand that there may be further works planned for which planning permission and a Heritage Licence would most likely be required.

950

Hon. D J Bossino: Question 445/2024.

955 Can the Hon. the Minister, provide information as to what further works the Government is considering carrying out in the site? Well, I say the Government, but I think he is shaking his head, I assume it is Knightsfield Holding which is the company that has custody of this site. But is he able to provide information in relation to that aspect of his answer?

Hon. Prof. J E Cortes: Yes, I am glad that the hon. Member has clarified. It is not the Government doing the work it is done by Knightsfield Holdings. They have a contract for the site and they have a budget from which they do the work that they deem is correct and necessary.

960 I believe it is further restoration and expansion to part of the area which is currently not open to the public and further exhibits, but I do not have the details, Madam Speaker.

Hon. D J Bossino: Is the expectation that those works, if and when they were to materialise, are going to be drawn from the current budgets which Knightsfield Holding receives from the taxpayer?

970 **Hon. Prof. J E Cortes:** Madam Speaker, that is the expectation. If it was something massive and that the Government decided required more funding and was in a position to approve, then perhaps it could be requested and considered. But the expectation is that it will carry on as part of their contractual work.

975 **Hon. D J Bossino:** Now, in relation to the Certificate of Fitness, the information that I have, Madam Speaker, is that part of the premises is currently being occupied. In other words, that it is being used, I think, by an archaeologist as a residential area. If that were to be the case, would he not agree with me that the those premises which are being occupied ought to be the subject of a Certificate of Fitness because the Hon. Minister said that is one having been issued because one was not necessary?

980 **Hon. Prof. J E Cortes:** Madam Speaker, I explained that the Certificate of Fitness is required when there have been works requiring approval under the Building Rules. There is no archaeologist using it as a residential area. Occasionally, when there is a dig in Gorham's Cave, the area is used as a field base for work after hours, but there is no archaeologist living there; and there is also the Sub-Aqua Club, which has premises within there. But there is certainly not an area being used as anybody's residence.

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Hon. D J Bossino: Question 444/2024. The Hon. Minister's reply in relation to that question is about the cost of the works at Parson's Lodge are drawn from the fund that the Government gives to Knightsfield Holdings in respect of which he and I, across the floor of the House, have had our differences and certainly we have our concerns.

990 But is he able to be more specific? Is he able to say with exactitude how much money has in fact been spent by the company in respect of these works? But I imagine he will have an interest and will have some oversight in relation to that given the nature, the historical and heritage importance of this particular site.

995 **Hon. Prof. J E Cortes:** Madam Speaker, clearly I have an interest because of the nature of this to ensure that nothing is done there which contravenes the interests of heritage. But it is up to the contractor to use the contractual sum in order to fulfil their contractual obligations; and provided me, representing the Government, I am satisfied that the broad contractual obligations of this company are being carried out. I have no reason to have sight of absolutely every penny that they spend.
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Hon. D J Bossino: Madam Speaker, can the Hon. the Minister please provide ... he is explaining why he may not have oversight, why he does have oversight and he has an interest, but can I pin him down, please? Is he able to state – he may not have this information with him now – but if I asked him again or wrote to him, would he be able to provide the answer as to how much money has been spent by Knightsfield Holdings relation to this particular project?
1005

It is a very simple question, which is capable of a very simple answer.

Hon. Prof. J E Cortes: Madam Speaker, this is money spent by a private company. Therefore, I do not feel that I need to request or provide that information – provided they are keeping to the requirements of the contract. If I had any reason to believe that they were not keeping to the requirements of the contract, then matters might be different. But at this moment I am totally satisfied.
1010

Hon. D J Bossino: Which are the requirements of the contract which concerns the Hon. Minister, which he says they will need to comply with? He says he has no interest in knowing how much they spend in relation to particular projects so long as they keep within the requirements of the contracts.
1015

Which requirements are taxing the hon. Member when he gives that response?
1020

Hon. Prof. J E Cortes: The contract is a very wide one which includes the running of the museum, Parson's Lodge, the World Heritage Site, that is what I mean. Madam Speaker, I exercised a Government contract for 20 years. I think part of the time, the Hon. the Leader of the Opposition was the Minister overseeing my contract and never did he ask me for any detail. He had full faith in the way that I ran it. I did not have to provide anything and he never asked me for anything.
1025

So, I am perfectly satisfied with the current arrangement and the excellent work that has been done at Parson's Lodge, apart from the excellent work that the National Museum does in promoting Gibraltar internationally.
1030

Madam Speaker: Next question.

Q446/2024
Botanic Gardens Theatre contract –
Granted to whom

Clerk: Question 446/2024. The Hon. D J Bossino.

1035 **Hon. D J Bossino:** Has the contract for the running of events at the Botanic Gardens Theatre been granted; and if so, to whom?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change .

1040 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, there has been no Government tender in respect of the running of the events at the Botanic Gardens Theatre.

1045 **Hon. D J Bossino:** This is somewhat of a predictable response. He knows where I am leading to this. The Hon. the Minister has answered in the way he has answered presumably because he says no Government tenders have been awarded. But presumably, a Government tender and a Government contractual arrangement exist between the Government and the company which has been the subject of debates across the floor of the House, which is called – the name now escapes me – Wildlife, I think it is Wildlife Gibraltar Limited, has carriage of the Alameda Gardens.

1050 The information which I have, Madam Speaker, is that that company has now entered into contractual relations with another company and I can give him the name, it is – I think it was Apex, I have got it in my documents here – Apex Management Limited, which is wholly owned and the Director, the sole Director of which is an employee of the Culture Agency and I think related to the hon. Member and he can confirm, or not, otherwise, Mark John Cortes.

1055 So is he honestly advising this House that he is not going be providing any answers in relation to this because it is totally distant from him as a Minister of the Government?

1060 **Chief Minister (Hon. F R Picardo):** No, Madam Speaker, that is not the answer that the hon. Member is giving. The hon. Member is giving the answer that the hon. Gentleman should have expected, which is that Ministers are answerable in this House for the actions, activities and work of Government entities; and the hon. Gentleman himself, in the way that he has explained where he is going, has confirmed that the tender he was asking about has not been granted by a Government body, a Government agency or any entity which is controlled by a Member of the Government.

1065 **Hon. D J Bossino:** The Hon. the Chief Minister and the Hon. Minister failed to answer the question. The question talked about the contract for the running of events at Botanic Gardens Theatre whether it has been granted, and if so, to whom. It is not about tenders, it is nothing to do with that.

1070 I am asking whether the contract for the running of events at the Alameda Gardens Open Theatre has been granted. The information that I have, is that it has been granted to Apex Management Services Limited and I have explained to him the ownership structure of that particular company which I think, from this side of the House, causes concern because the arrangements are too incestuously connected with the Hon. the Minister.

1075 But look, if it is the Government's position, and I ask them this: is it the Government's position that they are not willing to answer any questions in relation to this because it is completely arms-length and a theatre inside Gibraltar's Alameda Gardens has nothing to do with him or the Government. Is that their position?

1080 **Hon. Chief Minister:** Well, Madam Speaker, I think it is obvious to me that the hon. Gentleman has come here to follow the rules of advocacy. That is to say, never to ask a question that one does not know the answer to which, I think, is absolutely the prudent thing to do. But if he knows the answer to his question, why is he asking the Minister?

Because given the way that he has postulated his supplementary, what he has done is confessed to you that he knew that he was asking a question of a Government Minister in relation

1085 to a company that is not a Government company. That is to say: he is asking the Government what a company that is completely unrelated to the Government has done.

It is as if somebody got up, Madam Speaker, and asked *me* a question about what TSN had done in terms of granting the contract for water in their boardrooms. Well, the Government is not answerable for TSN in this House and the Government is not answerable for Wildlife Limited in this House because it is not owned by the Government, it is not controlled by the Government.

Therefore, I am grateful, Madam Speaker, that in setting out the questions he has in order to create all of the innuendos that he wished to create, which I am sure that he plotted this morning as he walked with his partner across the foliage down Europa Road, he was intending to create, seeking to cast aspersions of a man who has dedicated the past decade-odd of his life to Gibraltar and who in everybody's lexicon would be green but nothing else.

So, Madam Speaker, I invite you to confirm that the question is out of order because it asks the Government a question when the Government is not responsible for the company that it is alleged has granted the tender.

1100 **Madam Speaker:** Any more supplementaries, not by way of comment, by way of supplementaries?

Hon. D J Bossino: Okay, just one. Just one in relation to –

1105 **Madam Speaker:** One supplementary question.

Hon. D J Bossino: Madam Speaker, the hon. Member actually hooted the horn from a very snazzy car, I saw him this morning in fact. (*Interjection*)

1110 **Madam Speaker:** Searching for the question. I am sure I will find it.

Hon. D J Bossino: Yes, the point is that is the Government's position and quite frankly totally and wholly predictable. But it does raise a matter of public interest so in that sense I stand by the question. But the Hon. Minister is shaking his head, he needs to calm down a bit as to where I am going with this.

1115 The reality is that the individual that I have mentioned by name, and it is in public information, is an employee of Cultural Services. (*Interjection*) No, but of the agency as I understand. So in that sense, Madam Speaker, is that individual – and he can correct us if that is wrong, as I think the Hon. Minister is suggesting that it is wrong – not an employee of, in effect, a public servant; and if that is correct, is there not a concern that this individual will be dividing his time for the work he does for the Government in the context of culture and for his own private interest in relation to the open air theatre?

1125 **Hon. Chief Minister:** Well, Madam Speaker, I can now answer the hon. Gentleman's earlier question. He needs to get in touch with the Ministry of Defence. I will tell him why. When I hooted the horn this morning, he was walking past Trafalgar Cemetery, it is obviously *there* that the foliage is causing him concern. (*Interjection*) He just said that he had to hear my horn being hooted as he avoided the foliage.

1130 So first of all, he needs to get in touch with the Ministry of Defence in the context of the foliage. And second, Madam Speaker, he seems to have got his targets wrong completely because the individual who he has referred to by name, if not by relationship, but that is the aspersion he is trying to cast, is not an employee of a Government company. He is an employee of a private company and so all of the questions that the hon. Gentleman is asking about how this individual is going to divide his time and not divide his time are also not questions for the Government.

1135 But let us call a spade a spade. The Hon. Mr Bossino has wanted to get up, to cast aspersions in respect of John Cortes and his family, again. He has done it before in this House and every time

1140 they have done it they have hit a brick wall. The last time they did it, Madam Speaker, they made an allegation that the Hon. Mr Cortes was, somehow, profiting from Wildlife Limited, only to find that all of the money in Wildlife Limited is reinvested in the Alameda Gardens. None of it is taken as profit because it is a not for profit organisation.

Today, he gets up to make a different sort of disgusting allegation except, of course, he cannot get right the company that employs the individual has nothing to do with the Government and the company that grants the contract has nothing to do with the Government. He gets it wrong every time he gets up and he casts aspersions that fall back on him every time he tries to do it.

1145 I suggest to the hon. Gentleman that he does the politics of constructive opposition instead of the politics of disgusting casting of aspersions because he has tried it before between 2011 and 2015 and he fell flat. He has tried it again between 2019 and 2023 and he has fallen flat; and if he pursues that, all he is going to do is keep falling flat.

1150 **Madam Speaker:** Next question. (*Interjections*) This is not a debate. The question has been answered and I am not going to allow this to fall into a debate.
Next question.

**Q447/2024 (commenced)
Upkeep of Cemetery –
Trimming of flora**

Clerk: Question, 447/2024. The Hon. D J Bossino.

1155 **Hon. D J Bossino:** Please provide an update with regard to the upkeep of the cemetery, in particular the trimming of the flora.

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

1160 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, I am very tempted to make further comments, but I will not.

I will refer, Madam Speaker, to a letter I wrote to her predecessor on 4th July 2023 and I would also like to express my disgust at what I have heard here today. (*Interjection*)

1165 **Madam Speaker:** Let's carry on with this Question, 447/2024.

Hon. Prof. J E Cortes: I will carry on, Madam Speaker. My apologies. But the person who he has referred to is in London today and his wife is having heart surgery tomorrow. Thank you very much, Madam Speaker.

1170 Madam Speaker, the upkeep of the cemetery continues all year round. The trimming of flora is very much a part of this, although it is largely seasonal, as I explained at the recent meeting of this House, with peak activity after the first rains. These works are carried out systematically through the cemetery.

1175 Additionally, if there is a burial in an area which is not currently being worked on, or a visitor so requests, the operatives will work with the cemetery staff to clear vegetation in and around that specific area.

Hon. D J Bossino: Madam Speaker, the hon. Member –

1180 **Madam Speaker:** Supplementaries on this question. Let's stick to the matter. (*Interjection*)

No, I asked the Hon. Minister to adhere to Question 447/2024. (*Interjection*) I am not having an argument.

1185 **Chief Minister (Hon. F R Picardo):** Madam Speaker –

Madam Speaker: Does the hon. Member have a – ?

1190 **Hon. Chief Minister:** Madam Speaker, might this be a convenient moment for the House to adjourn for 15 minutes?

Madam Speaker: I think it might. We will come back at quarter to five.

The House recessed at 4.27 p.m. and resumed at 4.45 p.m

Q447/2024 (continued)
Upkeep of Cemetery –
Trimming of flora

Clerk: Question 448/2024. The Hon. the Leader of the Opposition.

1195 **Hon. D J Bossino:** Madam Speaker, I appreciate why it was suggested that perhaps we adjourn and break the House for a few minutes, given the heated nature of the previous exchange. I would have at least one supplementary in respect to my question, but I am in your hands, I am willing to ask.

1200 **Madam Speaker:** In respect to 447/2024? Right, one supplementary.

Hon. D J Bossino: As tame as I can possibly put it ... [*Inaudible*]. The question really is focused in respect of this aspect, which is the height, if that is the word – it has been used quite often during the course of this afternoon – of the foliage in the cemetery, which I know I have received complaints about, particularly from elderly people who are affected, by this. I have been, 1205 unfortunately, recently, and in fact I have taken a picture as a result of the representations that were made to me.

Is there any reason why those cannot be trimmed down? I was told that there was a concern on *his* part in particular that it would impact on the migration of birds. Is that the case?

1210 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, this comment came to me, the same lady approached my Department and said that somebody had pointed it out. It came to my Department and then we did find out that it was a Member of the Opposition who had told them to contact the Department. We thought it had been a member of staff. So I assume that this is this incident.

1215 Madam Speaker, as I explained at the last meeting, there is a flush of vegetation following a rainy season and then it takes a period of time to get through the whole cemetery. It is not true to say that there is any edict on not cutting back the vegetation because of migratory birds or anything at all. The instruction is that it has to be kept down, it is just that they may not have got round to that particular point.

1220 That particular person, if it is the same person, was approached by my Department, pointed out to cemetery management the area, and that very day or the following day the area where this lady wants to be able to reach the resting place of her loved one had been cleared.

1225 And as I said, any time any member of the public finds that they cannot access for the reason that they have not got round to that part yet, the members of the public can approach management and they will immediately deal with it. So there is no problem whatsoever and there is no such instruction, Madam Speaker. (*Interjection*)

Madam Speaker: Next question. I gave you one supplementary. Next question.

Q448/2024
Gibraltar Taxis Service –
Government satisfaction

1230 **Clerk:** Question 448/2024. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: Madam Speaker, is the Government satisfied with the City Service operated by Gibraltar Taxis?

1235 **Clerk:** Answer, the Hon. the Minister for Education, the Environment and Climate Change.

Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes): Madam Speaker, the Government accepts that there is room to improve the City Service and is working proactively with the Gibraltar Taxi Association to achieve this.

1240 **Hon. Dr K Azopardi:** Well certainly I welcome that, the recognition that there is room for improvement and the Government is doing that. Of course, these are long-standing discussions, and it goes back to certainly in the recent spate of press releases between the Chamber and the Taxi Association in relation to this matter, there was even reference to measures being put in place by one of his predecessors, the Hon. Neil Costa, many years ago, almost like nine years ago,
1245 I think it was, or 10 years ago.

Now, can I just ask him to understand that? Is he in discussions with the City Service about increasing the number of taxis that would form part of the City Service? How many taxis form part of the City Service right now? Is he in discussions about increasing the number of taxis in the City Service?

1250 **Hon. Prof. J E Cortes:** Madam Speaker, the discussion is wide ranging. The Taxi Association is very frustrated at the bad name that they have in relation to the City Service, and I can tell you they are working *very hard* to try and improve things.

1255 Things have had to change. They were the ones who totally supported us when we have increased the fines for non-compliance with the city service. We have increased the availability of the Transport Inspectors in order to enforce it and I know that, for the first time in a long time, there have already been taxi drivers who have been fined for taking Rock Tours when they should have been on City Service and we have recently increased the fines, substantially, with the support of the Transport Commission.

1260 It is a three strikes, and on the third one the licence will be suspended and that has the *full* backing of the Taxi Association. We have also increased the period of time where the City Service is available and probably as from next year it will be available for 12 months of the year and we are increasing the hours. I will shortly be bringing legislation to this House. I think part will be in Regulations, part will be by way of Bill in order to increase the hours and the availability of taxis.

1265 So, I think that the details are being refined and there are discussions this week on this. There will be more taxis available on City Service.

1270 **Hon. Dr K Azopardi:** Well, I am grateful for that background. I am not sure if the Minister – well, I am sure he has not answered the question that I had about does he know how many taxis are in the City Service? So I will just repeat that to give him an opportunity to perhaps deal with that.

1275 He is certainly right that there is dissatisfaction with the City Service and he says that the Taxi Association are aware of it and want to deal with it. I think a lot of people have experienced arriving at the Airport and not being able to get into a taxi, you get into a queue and so on. I will not repeat what has been said in press releases because clearly the Taxi Association has also explained that this is about short-term demand, which then pans out and then you have got normal numbers.

1280 But this is why it is quite important to understand the numbers of taxis that are actually in the City Service. Without understanding that, it is very difficult to meet the point made by those who are frustrated by the lack of taxis; or by the Taxi Association who talk about there being sufficient taxis and these being about peak demand. So unless the Government is aware about the specifics of the numbers of taxis, then it becomes difficult. So I will just repeat that, to give him the opportunity to deal with that.

1285 But given that it is about I think numbers as well as enforcement, what specifically would the Transport Inspectors be doing in relation to the issue of the assessment of numbers that are necessary to run this service efficiently as people would wish it to run?

1290 **Hon. Prof. J E Cortes:** Madam Speaker, the number 15 comes to my head, but I would need to confirm that and I am happy to share that information with the Hon. the Leader of the Opposition. If I do not remember, he can communicate with me and I will tell him tomorrow.

1295 The Transport Inspectors have to make sure that the drivers on City Service are not doing tours because they are excluded from doing so while they are on City Service. They also have to make sure – and they do log, they have trackers – that they do the number of hours required; and if they do not do the number of hours on any particular day for good reason – there could be personal circumstances or whatever – they have to make them up accordingly and they will chart that out and ensure that happens.

1300 But we are also considering the possibility of increasing the number of drivers on the City Service and we are discussing that now with the Taxi Association. We are also looking at the possibility of introducing an app which would make it more Uber-like, if you like, in order to be able to access taxis in a different, more modernised way. All these things are happening.

Hopefully, we will be able to come to agreement soon, but I can say that everybody is working in the same direction. I genuinely think that we are going to make progress here, Madam Speaker.

1305 **Hon. Dr K Azopardi:** Well, certainly, we would welcome the development of any kind of app, I am sure the listeners would also welcome something like that.

Can I ask him to consider, does he agree it would be a possible idea to also consider, given that there seems to be disagreement as to whether there are sufficient numbers of taxis, or at least the jury is out on that issue, and there are particular views being fielded by different people. But certainly what is true is that people turn up at the Airport and cannot get a taxi.

1310 Does he agree that it would be helpful and perhaps something an idea that would be taken on board by Transport Inspectors, for the Transport Inspectors that fulfil this kind of independent enforcement capability under the Transport Act to actually assess, almost survey for a period of time: the kind of demand that we are looking at; the kind of numbers of people that turn up and are waiting for taxis; the kind of experiences that people are enduring, for a period of time so that they are on a more informed basis – will then be able to assist the hon. Member in the negotiations and discussions he is having on this issue?

1315 **Hon. Prof. J E Cortes:** Madam Speaker, data are always very useful and I believe some of this has started, but I have no issue at all with looking at how we could gather the information, or how

1320 we could gather *more* information which would be relevant to the improvements that we are seeing to introduce.

Madam Speaker: Next question? (*Interjection*)

1325 **Hon. Dr K Azopardi:** I had one more supplementary, if I may?

The Hon. Minister has given an indication of the nature of the discussions and his aspirations for reform. This is a long-standing issue, as he will understand, and frustrations have boiled over from time-to-time on this issue for a long time, and there has been correspondence in the newspapers from time-to-time on this issue.

1330 Can he give some idea to people who are listening, of a timescale for the reforms that he is aspiring to put in place?

Hon. Prof. J E Cortes: Madam Speaker, I think we could see this happening quite quickly. Already we have changed some of the legislation, we are working on other legislation to tighten up, and also to allow the City Service to be statutory further into the night. That, I think, will have to be a Bill so it will require the six weeks.

1335 So I think we are looking at several months, but I think that already in discussion with the Taxi Association, I can sense that there is more commitment, and I think that even now we are probably going to begin to be seeing some improvements.

1340

Madam Speaker: One.

Hon. D J Bossino: I am grateful, Madam Speaker.

1345 Is the Hon. the Minister satisfied that there are sufficient numbers of Transport Inspectors to effect the enforcement of these Regulations?

Hon. Prof. J E Cortes: At this moment in time, Madam Speaker, I think that the answer is probably yes. I think at the moment we are probably okay. I think we need to see how this develops and to see whether there is a need to review the numbers.

1350

Madam Speaker: Next question.

Q449/2024

Commonwealth Park Lift – Non-operational: times, periods, length

Clerk: Question 449/2024. The Hon. the Leader of the Opposition.

1355 **Hon. Dr K Azopardi:** Madam Speaker, how many times and for what periods, giving a breakdown of the number and length of each individual period, has the Commonwealth Park lift not been operational during the last three calendar years 2021, 2022 and 2023?

Clerk: Answer, the Hon. the Minister for Education, the Environment and Climate Change.

1360 **Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes):** Madam Speaker, the draft I have before me says the detailed information is not available, but I am happy to say that because I am answering today and not yesterday, I have obtained some information so I will give it now, it came in from the contractor. No figures have been provided for 2021 but

1365 there were 46 instances in 2022, 58 in 2023 and 17 so far this year. Those are instances, the data has not included the length of time.

If I continue then with the prepared answer, there is an existing maintenance contract for the Commonwealth Park Lift which includes after hours on-call service. Repair works are carried out on-site as and when required. Whenever the lift may have been out of service for any extended period of time – more than a day – it has been because of significant repair works being required or spares not being readily available.

1370 It must be remembered that the lifts at both Commonwealth Park and Campion Park are subjected to a constant and high rate of usage.

Hon. Dr K Azopardi: I am grateful for that information and this might be, I hope it will not have the tone, but this is the equivalent probably of the foliage question that frustrates my hon. Colleague here.

1375 The reason for this question is because I almost see, if not daily, frustration very often because I walk that path to work every day and then I walk back, and I see a lot of elderly people and a lot of people with prams who arrive at the lift and they see it broken down. I did specifically ask for this information because I did want it because I did not want to go on my anecdotal experience, although my anecdotal experience is that it has been broken down quite a lot. And indeed the hon. Member's statistics when he talks about 46 incidents in 2022, 58 incidents in 2023 that is almost like 4 a month.

1380 I do not know, it would be interesting to actually get a breakdown of (*Interjection*) when those incidents – yes, excuse the pun – have happened; and while he says in the prepared answer, and I appreciate it is prepared for him, but when he says in the prepared answer that it is about spare parts and sometimes it stays, I can tell him anecdotally, that sometimes it has been broken down for quite some time. It is beyond days.

1385 The point is that this information that the hon. Member has confirmed to this House has indicated that there are a *number* of incidents here.

1390 Now, will the Government engage with a contractor to try to understand a bit better what improvements can be made, either to the maintenance arrangements or to the lift mechanics itself – or is it something else? – to try to understand the causes of these things? Because while lifts break down, for there to be this number of incidents on a yearly basis seems to us on this side of this House as very high.

Hon. Prof. J E Cortes: Madam Speaker, this is already happening and we have engaged with the contractor to try to resolve it. But do bear in mind, Madam Speaker, that the number of incidents does not mean that on any of those occasions it has been an incident that has resulted in the lift being out of service for a day or more.

1400 There have been some few occasions, one occasion recently when the lift was not operational was not to do with the lift, it was due to the need for maintenance to the wood on the stairs, so that is not related to the lift. But, certainly, this is being done. I must say, Madam Speaker, that the lift is subjected to vandalism on occasion and that does not help either.

1405 But we are already engaged with a contractor to try and see whether there is something that can be done to reduce the instances.

Madam Speaker: Next question. One more?

1410 **Hon. Dr K Azopardi:** One more, yes, if I may.

I was going to ask: is the hon. Member aware, given the high number of incidents and he says that discussions with the contractor, the maintenance contractor, is already ongoing. Does he understand the *nature* of those maintenance arrangements with the contractor? How often do they visit? Are they being paid for callouts on incidents? Or are they being given a bonus when the lift is operational for a longer period?

Hon. Prof. J E Cortes: I believe, Madam Speaker, subject to confirmation, that there is a retainer and then they get paid on callouts.

Madam Speaker: Next question.

Q450/2024
MT Theresa II oil tanker incident –
Enforcement/action by Environmental Agency

1420 **Clerk:** Question 450/2024. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: Can the Government confirm whether any enforcement or other action has been taken by the Environmental Agency or any other Governmental body or agency in relation to the incident which saw thick, dark smoke from an oil tanker, namely the MT Theresa II, anchored off the North Mole on 27th April 2024?
1425

Clerk: Answer, the Hon. the Minister for Education, Environment and Climate Change.

Minister for Education, the Environment and Climate Change (Hon. Prof. J E Cortes): Madam
1430 Speaker, following reports of smoke emanating from the vessel on Saturday, 27th April the Duty Environmental Health Officer and the Port Authority were alerted.

The Port Authority immediately contacted the vessel and instructed it to immediately cease boiler and engine operations. The Gibraltar Port Authority obtained a report from the vessel's Captain which was shared with the Environmental Agency. The Captain's report indicated that the
1435 release of smoke was due to an incorrect air-fuel ratio.

The Environmental Agency is collating all available evidence and information to present to the Office of Criminal Prosecutions and Litigation to obtain charge advice.

Hon. Dr K Azopardi: I see. And given obviously the vessel long sailed, because I think it was
1440 reported that she was only here for about five hours, presumably sufficient details were taken as to the ownership, etc. and the mastering of the vessels, if the advice were to come back that they should be charging them there are sufficient details to pursue the matter. Is that correct?

Hon. Prof. J E Cortes: Yes, Madam Speaker.
1445

Hon. Dr K Azopardi: And can I ask also, because it was reported at the time that the
Environmental Agency was also investigating the possible impact of the fumes having regard to
the air quality monitoring system. Does the hon. Member have any information that he could
share in that regard?
1450

Hon. Prof. J E Cortes: Yes, indeed, Madam Speaker.

Data was extracted from the air-quality network and the conclusion was that there was nothing
of significance in the provisional data that can be attributed to the incident. There were several
peaks across 26th April, which were captured by some of the monitoring stations, but these were
1455 no bigger in magnitude than measurements on the preceding day.

So it does not seem that it was picked up which is of some consolation because, although it
looked horrendous, it clearly did not spread in any significant way to be able to be detected
specifically at the air monitor. It probably rose and did not reach the residential areas where the
monitors are located.

1460 So that, at least, is good news.

Madam Speaker: Next question.

HOUSING AND THE GIBRALTAR UNIVERSITY

Q451/2024

**Government Dwellings –
Measures to prioritise needs**

Clerk: Questions to the Hon. the Minister for Housing and the Gibraltar University.
Question 451/2024. The Hon. A Sanchez.

1465 **Hon. A Sanchez:** What measures is the Government implementing to prioritise the needs of individuals with disabilities and their families residing in Government dwellings, particularly those in flats that are unsuitable or inadequate for their needs?

Clerk: Answer, the Hon. the Minister for Housing and the Gibraltar University.

1470

Minister for Housing and the University (Hon. P Orfila): Madam Speaker, the Housing Department, as well as Government in general, takes the needs of individuals with disabilities very seriously. The Department undertakes, as part of its duties, the following measures: (1) we have face-to-face meetings with the individual with the disability and/or their families to identify the unsuitability of their Government dwelling; and (2) we liaise with the GHA Care Agency, Social Services or any other appropriate entity to identify and assess their exact needs and how they can be assisted.

1475

Representations are forwarded to the Housing Allocations Committee who may request medical or occupational therapy reports to properly assess the case. Recommendations are then made for inclusion on the relevant medical list, depending on the severity of the disability and unsuitability of current conditions.

1480

Hon. A Sanchez: Madam Speaker, although I understand the complexity and appreciate the complexity of the housing portfolio, I stress that there are constituents that come to see me with very serious concerns in relation to these matters, who seem to have been struggling with these issues for years. They do not seem to be new issues. They seem to have been dealing with several Housing Ministers now.

1485

Some of these constituents seem to have medical reports, patient risk assessments from the GHA, and some of which have assessed their situations as extremely high risk and in need of immediate action. Again, I ask the Hon. Minister, in situations like this, what is being done to relocate these families as a matter of priority to safeguard them?

1490

Hon. P Orfila: Madam Speaker, we try and reallocate people who have severe needs and who come to us through the Housing Committee, okay, that allocates severity of what you have, whether you need to be allocated immediate or not.

1495

In my months that I have been there, I have been very conscious of this and I do believe that, in fact, the ones that you have sent to me via email, I have acted upon immediately; and as far as I know that is our reaction. We *immediately* react to people who have the disability and we try and assist them as best as we can.

1500

Hon. P Sanchez: In the case when a family or a person has a risk assessment that categorises them as extremely high risk and in need of immediate action, as signed-off by a professional in

the GHA, does the Government Minister know how long it takes the Housing Department to allocate that family with a new reallocation?

1505

Hon. P Orfila: It could be immediate. It also depends on whether we have a house that fits the needs of the person available at the time. We have people who may need 5 RKBs and maybe we do not have any at the time; and the minute they do come in then we have to, obviously, bring the OT in, they have to assess the home or the house and then make it adequate for the needs of the person with the disability.

1510

So it is a process, it is not that you come in today and tomorrow. First we have to have the house that you require for your needs and for the size of your family. So there is a bit of a wait sometimes there.

1515

Hon. A Sanchez: What does the hon. Member mean by a wait? Are we talking about years, are we talking about five years? Would she categorise that as a reasonable wait, is that something that is acceptable?

1520

Hon. P Orfila: Madam Speaker, well, you started as being immediate. Immediate means there is no waiting, okay? If you are talking about people who have been on the list and have been waiting for a while, then they should be seen to very quickly now. But like I said, it all depends on a number of factors it is not just one factor that is contributory to finding them a house immediately. But those who are of immediate, we try our very best to sort that out as soon as we can.

1525

Madam Speaker: Next question.

Q452-55/2024

Essential infrastructure upgrading –

Costs; programme; commencement; implementation; management; participants

Clerk: Question 452/2024. The Hon. C Sacarello.

1530

Hon. A Sacarello: Following on from its recent announcements and press releases, can Government provide anticipated costs and their programme for upgrading the essential infrastructure at Road to the Lines?

Clerk: Answer, the Hon. the Minister for Housing and the Gibraltar University.

1535

Minister for Housing and the University (Hon. P Orfila): Madam Speaker, I will answer this question together with Questions 453/2024, 454/2024 and 455/2024

Clerk: Question 453/2024. The Hon. D J Bossino.

1540

Hon. D J Bossino: Please provide an update as to when the Road to the Lines scheme will commence.

Clerk: Question 454/2024. The Hon. D J Bossino.

1545

Hon. D J Bossino: Please provide details as to how the Rent and Repair scheme at Road to the Lines will be implemented and managed.

Clerk: Question 455/2024. The Hon. D J Bossino.

1550 **Hon. D J Bossino:** Please provide details of the criteria which will apply for the selection of participants in the Rent and Repair scheme.

Clerk: Answer, the Hon. the Minister for Housing and the Gibraltar University.

1555 **Hon. P Orfila:** Madam Speaker, the preferred bidder for the development of Road to the Lines has pulled out before the signature of an MOU. The site has been returned to the Housing Department, which will determine the best way forward after internal discussions.

Therefore, at this moment in time, I cannot provide you with further details in respect of Road to the Lines.

1560 On the Rent and Repair scheme, further information will be available in due course, as explained in greater detail during the course of the last meeting of the House.

Madam Speaker: Supplementaries?

1565 **Hon. C A Sacarello:** Madam Speaker, I would like to thank the hon. Member or Minister for her reply. I did not see any details provided on anticipated cost of the programme other than there is nothing in mind at the moment given that the preferred bidder has pulled out.

1570 With this in mind, is it the Government's intention to charge people for infrastructure, or in other words to let new tenants of the area take on board any infrastructural costs themselves? Or is it the case that there will be no infrastructure costs required by these new tenants?

Deputy Chief Minister (Hon. Dr. J J Garcia): Madam Speaker, I may be able to assist because I was dealing with the expression of interest for Road to the Lines and I think I have kept the House updated and informed as we have gone along and I had intended to do so in my Budget Speech, which will come later this year.

1575 But just to answer the hon. Member, the original plan had been that the proposed developer intended to add to the number of dwellings in Road to the Lines and we were told that in order to add to the number of dwellings the infrastructure needed to be upgraded to be able to cope. That would have been paid by the developer themselves and not by the Government.

1580 So, it is not a figure we can provide because it was not something the Government itself was going to do, it was going to be done by the developer as part of the award of the expression of interest.

Madam Speaker: Yes, the Hon. Mr Bossino.

1585 **Hon. D J Bossino:** Madam Speaker, in relation to 453/2024, which is my hon. Friend's question, this is for – (*Interjection*) No, 452/2024. I have asked questions about this in the past, but I would seek clarification from the Hon. the Deputy Chief Minister as to whether we are dealing with the same projects.

1590 In other words, I think I have asked questions about the northern defences in respect of which he gave a very specific answer as to who the successful tenderer was, and indeed he provided me with a name – a name I did not recognise, not a Gibraltarian name. Are we talking about the same projects, if I can start there?

1595 **Hon. Deputy Chief Minister:** Madam Speaker, there are two projects: one is the northern defences and expressions of interest went out for that one, it is still being considered, we have not publicly announced the outcome of that process.

There was a separate one for Road to the Lines. I did inform the House as to who was successful – or the preferred bidder, rather – it is that preferred bidder that has pulled out.

1600 **Hon. D J Bossino:** Is one able to extrapolate from the answer that the hon. Member, the Deputy Chief Minister, has given that the reason for that particular bidder departing from the scheme is because he was not willing or able to provide ... undergo the infrastructural costs of the area?

Is that what put off that particular private investor? Is that what, basically, in effect, broke the deal?

1605

Hon. Deputy Chief Minister: Madam Speaker, it is difficult for the Government to say *exactly* what led to the preferred bidder pulling out because there may be a variety of reasons and the Government may not be aware of the full picture.

1610 But the reality is that this is where we are now, where the site has been handed back to the Housing Department and there needs to be a degree of internal discussion as to what the next steps are going to be. I am sure once that has been agreed internally, we will be in a position to make an announcement and to provide more details to the hon. Member.

1615 **Hon. D J Bossino:** Is it still conceivable that this particular project will go to a private investor? And the reason why I am hesitating is because I will have further questions, supplementary questions, in respect of the questions I have posed with the Hon. the Minister for Housing.

1620 But I am still dwelling on the Road to Lines, because I am sure there is a connection. It is clear from the answer that the Hon. the Deputy Chief Minister has given the House. Is it the intention that the infrastructure works and the possibility of building extra dwellings will be privately led?

1620

Hon. Deputy Chief Minister: Madam Speaker, no decision has been taken this is the point I am trying to make to the hon. Member. There will be an internal discussion and we will need to see what emerges after that discussion has taken place.

1625 **Hon. D J Bossino:** If I can turn now to my questions, they have been bunched together.

I think in relation to 453/2024 where the Hon. the Minister says that further details will be provided in relation to Road to the Lines in due course. May I ask, what is the cause of the delay, if I can put it in those terms?

1630 In other words, is it because Government is still looking at the possibility of private investment which is the things that, the issues which are being considered by them, presumably, at cabinet level and certainly between the various Departments? Or is it something else? If she can assist the House?

1635 **Hon. P Orfila:** Madam Speaker, no, there is nothing sinister or ambiguous; nothing. (*Interjection*) It is just that we want to ensure that we all put our thinking caps around the table and really get the best deal for Road to the Lines. You know, there is nothing set in stone as yet and there are much discussions to be had.

1640 **Hon. D J Bossino:** The Hon. Minister is suggesting that I am suggesting, or sees an implication of a sinister motive. Nothing could have been further from my mind when I asked the question. I am simply asking a question based on the reply that the Hon. the Deputy Chief Minister has provided.

1645 For whatever reason, we do not have clarity, the possible private investment in relation to the infrastructure of Road to the Lines has fallen through and now they are entering into discussions among themselves as to what to do. I am just asking whether that is what is the cause of the delay. She just needs to answer yes or no. She can say yes, it has come back to my Department, I am now dealing with it, I am looking at different options.

1650 But the cause of the delay is that this private investor, who was going to be providing new dwellings and providing the infrastructure cost is no longer there. So now it could be that it could be a Government, a direct Government cost. I do not know! I am just postulating ideas and I do not think that her answer, at the moment, has been of particular assistance to the House.

1655 **Hon. A Orfila:** Madam Speaker, again, I am telling him that at the moment there is much to be discussed with Road to the Lines, okay? It is not something that we just want to throw out. I want to think about Road to the Lines, I want to see how best we can go ahead with this; and at the moment it is not because it is delayed for any reason, it is not delayed it came to Housing about a month and a half ago, maybe two months and I am speculating. We are all around the table, we still have to get together and see the best way forward.

1660 **Hon. D J Bossino:** I think the Hon. Minister, without realising, has answered the question. She said it has not been delayed because it came to Housing a month ago. In other words, there was going to be a private investor and now it is going back to the Government, and it is now on her to-do list in her Department.

1665 Now, I need to press her. This is a very specific promise which they made during the course of the election and which she has been making in the debate that she and I had on GBC and across the floor of this House. This is why I need to press her. There had been press reports about meetings that she is having with all and sundry and various Departments and various interest groups. What is she discussing?

1670 Can she provide this House with, at least ... I will not press her beyond this at this stage, with at least the points which she is flagging in her mind needs to be addressed. I cannot rely simply on her woolly words that there is much to discuss. We need more particulars because at the moment, it does not seem, with the greatest respect to the hon. Lady, that she knows what she is doing.

1675 **Chief Minister (Hon. F R Picardo):** Madam Speaker, we have given the hon Gentleman the answer that we have given. That is to say that the project that was going to go ahead is not going ahead, and therefore the Government is considering what to do next. He may wish to ask us more, he may wish to press us more, which he has told you he wants to do. Unfortunately, for him, the answer he is going to get is going to be identical every time.

1680 The Government is considering carefully what to do next in the context of this area, we want to make sure that we get it right given that the private investor is no longer going to go ahead with the project; (*Interjection*) and therefore opening our mind to him so that he can see what we are thinking and how we are thinking, is not going to be conducive to anything other than him seeking to have a window into our thoughts.

1685 **Hon. D J Bossino:** At least we have had a connection between the pulling out of the private investment and this going back to the Government.

Now, when I am asking about details it really goes to the fundamental question as to whether this particular policy of the Government, much vaunted during the course of the election campaign in press conferences and across the floor of this House, is going to happen or not.

1690 So what I am trying to establish at this stage is whether she has any concerns, for example, as to whether ... because one assumes my hon. Friend here asked a question about infrastructure costs. Is that going to be laid at the door of the potential tenant? And if that is the case it is going to amount to an extraordinary expense to that individual. So it is not going to work.

1695 So in other words, what I am trying to drive at is whether there are issues there of concern in *her* such that I would ask her to say, if there are, *which* ones those are – because I do not seem to be getting very far with her – such that it is possible when the Hon. the Chief Minister says we are considering what to do next, that one of those considerations is that this policy may not come to fruition.

1700 **Hon. Chief Minister:** No, Madam Speaker.

Hon. D J Bossino: By the negative response, is the negative response that there are not any issues? Is the negative response that the Government, whatever happens, is going foot the bill and will make sure that this policy will come to fruition?

What is the negative response in relation to?

1705

Hon. Chief Minister: The question that he postulated is to whether or not we felt that it was therefore not going to be possible for this policy to come to fruition, which I think was the first of the many lists of questions he went on to set out. But I thought I should answer the first given that it was negative, none of the others followed.

1710

Hon. D J Bossino: And the Hon. the Minister for Housing, who has responsibility for this area and not the Chief Minister, answer this: is she seriously telling this House that she has no idea whatsoever and is therefore not able to provide an answer to this House in relation to Question 455/2024?

1715

In other words, what are the details or the criteria – at least broad details of the criteria – in respect of the selection of participants in this particular scheme? Is she really telling this House that she is not, at this stage, able to provide answers in relation to that specific question?

Hon. Chief Minister: No, Madam Speaker, that is not what she is saying.

1720

Hon. D J Bossino: So what is she saying? It is not clear.

Hon. Chief Minister: Madam Speaker, what the hon. Lady has said is set out in her first answer to Question 455/2024. It is very clear, it is in writing and I am very happy to read it out to the hon. Gentleman again in case he did not understand it.

1725

On the rent and repair scheme, further information will be available in due course, as explained in greater detail during the course of the last meeting of the House.

– which was less than six months ago, incidentally.

Madam Speaker: Last question on this, there have been many supplementaries. One last one.

1730

Hon. D J Bossino: Yes, Madam Speaker, okay, we are not getting very far, brick wall after brick wall and –

Madam Speaker: Question (*Interjection*) if there is one?

1735

Hon. D J Bossino: Is the Hon. the Minister for Housing, who once again has political responsibility for this area, is she able to state what she means by ‘in due course’? The policy will presumably, or are they simply saying that they will implement it at some point during the lifetime of this Parliament? Are the timings as general and as nebulous as that?

1740

Hon. Chief Minister: Madam Speaker, when the Government enters into a manifesto commitment with the people, or it tells the House that something is going to happen, we can only really say it is going to happen on a particular date, if we *have* a particular date; or if it is our intention to do so then during the lifetime of the Parliament, because we have no life as Ministers, other than during the lifetime of the Parliament.

1745

So, therefore, the hon. Gentleman should know, as he was told last time, that we do not have a particular date in mind that we can give to the House. It would therefore be inaccurate for us to estimate, and therefore the answer that he has is that it will happen during the lifetime of this Parliament.

That cannot, by any stretch of the imagination, Madam Speaker, be referred to as nebulous given there is only 36 months left.

1750

Madam Speaker: Next question.

Q456/2024
New Housing Project designs –
Update

Clerk: Question 456/2024. The Hon. D J Bossino.

1755 **Hon. D J Bossino:** Please provide an update as to when the designs will be ready for the new housing projects the Government committed itself to build at the last General Election.

Clerk: Answer, the Hon. the Minister for Housing and the Gibraltar University.

1760 **Minister for Housing and the University (Hon. P Orfila):** Madam Speaker, the Government is in the process of evaluating options for the delivery of its manifesto commitments in respect of the new housing projects. The Government will make an announcement when it is ready to do so.

Hon. D J Bossino: Is that in due course now?

1765 Madam Speaker, the reason why I asked this question – I mean, there are various reasons – but the main reason is because she may recall that during the course of a press conference, again during the course of the election campaign, there was a very specific promise that designs would be available – I think it was, I need to check my records, I do not have them here with me – during the first half of 2024 and I am pretty sure that that is, in fact, accurate and the case. And I am sure she will recognise it herself.

1770 She is shaking her head but I will show to her that that is, in fact, the case. The first half of 2024.

Given that we are already at the end of May and very close to the first half of 2024, does she not feel that she has failed in delivering this particular electoral promise?

1775 **Hon. P Orfila:** Madam Speaker, absolutely not.

Hon. D J Bossino: Can she provide this House, and I do not hold much hope that she will, but can she provide this House with details and reasons as to what is holding back the provision of these designs?

1780

Hon. P Orfila: At this moment in time, I cannot answer questions because they are so ambiguous that I do not know where to go to with you any more.

1785 **Hon. D J Bossino:** With respect to the Hon. Minister, what is ambiguous is her answers and not my questions. I have asked her very specific and precise questions. Can I try again?

What major issues are preventing her from producing the designs in respect of the housing projects which the Government committed itself during the course of the last election? Because there is already a delay.

1790 **Hon. P Orfila:** Madam Speaker, there is no delay these have not yet been approved.

Hon. D J Bossino: I will go slightly around the houses, but why are they not being approved? What is causing the delay in respect of the lack of approval of these designs? They should have been ready, you have one month more to go.

1795

Chief Minister (Hon. F R Picardo): Madam Speaker, I do not know in what world the hon. Gentleman thinks that we live. Approving designs for housing estates is not, to use the vernacular, to throw an egg to fry. *(Laughter)* It is complex, it requires serious financial consideration, you are not just looking at an artist impression you are looking at a number of other issues, not least that the Government itself has agreed to subject itself to the planning process in respect to any erection that there might be in Gibraltar of housing and buildings.

So, Madam Speaker, these things require careful consideration and those are the things that are delaying approval of designs. I would have thought that that was obvious and that the hon. Gentleman did not have to ask us what it was that was complex about designing a new housing estate.

You know, the reality is that in the 12 years that we have been here we have already delivered more affordable housing than hon. Members delivered in the 16 years that they were in Government. So we have a good track record of approving these things timelessly and showing that the projects are delivered, etc. So he will no doubt want to press us further but there is little that his questioning is going to do to speed up a process that is technical and not simply argumentative.

Hon. D J Bossino: Why is it the case, then, that they promised the electorates in the time of the last election campaign that designs would be available in the first six months of 2024? Given that all the considerations, which the Hon. the Chief Minister has just listed, he would have been aware of those considerations as potential reasons as to why there may have been a delay.

Hon. Chief Minister: Madam Speaker, I have not said that the designs are not going to be available in the first six months of 2024. He has asked me why they are not available yet.

Madam Speaker: Next question.

JUSTICE, TRADE AND INDUSTRY

Q457/2024

Domestic violence and sexual offences – Access to therapeutic services

Clerk: Questions to the Hon. Minister for Justice, Trade and Industry.
Question 457/2024. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, are victims of domestic violence and/or sexual offences currently offered access to any therapeutic services? If not, why? And is the Government intending to address the lacuna in the provision of such services?

Clerk: Answer, the Hon. the Minister for Justice, Trade and Industry.

Minister for Justice, Trade and Industry (Hon. N Feetham): Madam Speaker, the Royal Gibraltar Police provides referrals for counselling through the Care Agency and the GHA, amongst others.

Victims of domestic violence and/or sexual offences are offered an array of therapeutic support under the Care Agency Therapeutic Team.

The therapy is structured under the following accredited programmes as per professional clinical practice with qualified practitioners: the Freedom Programme; the Voice Programme; the

DART Programme for families; the Trauma Based 1:1 Therapy; monthly Domestic Abuse Support Group for all persons having completed the above.

1840 With regard to sexual offences, counsellors from the Care Agency continue to offer one-to-one sessions for those victims.

Hon. J Ladislaus: I am grateful for the comprehensive answer. With what frequency, if the Hon. Minister has the information, are victims seen? So, for example, with what frequency is each of these programmes offered?
1845

Hon. N Feetham: Thank you, Madam Speaker.

I must say, when I received the question I really did not understand where the question was coming from given that the premise of the question seems to be, and it is phrased, that there is a lacuna on the provision of the services provided in this area.
1850

Therefore what I did, Madam Speaker, is I called the CEO of the Care Agency, Carlos Banderas, a man for whom I have a great deal of respect and I am not the only one. (**A Member:** Hear, hear) The man is, certainly everybody that I have spoken to, Madam Speaker, is nothing but full of praise for him and I expressed my concern. I must admit, I expressed concern by the premise upon which the question was tabled in this House.
1855

I met with him for a full hour. He has provided me with a detailed paper in support of the fact that this is a very well-conducted programme. He has told me categorically – and I have even made a note of it and it is annotated here – there are no waiting lists. He has categorically stated that there are no waiting lists. He has given me a table of the number of referrals that are going to the programmes that I have highlighted and just to give you some statistics: for example, in 2021 there were 33 referrals; in 2022, 34; in 2023, 84; and in 2024, 14.
1860

The referrals, I am told, come from families, from the GHA, from the E&A Department in particular, from charities and indeed from the Care Agency. I am comforted by the assurances that I have also received, Madam Speaker, that the programmes, as I have said, are very well conducted, that an assessment is made when referrals are made as to which programme the individuals are referred to, and depending on the assessment made, it may be one programme rather than another.
1865

Indeed, I am also told that somebody can start a particular programme, and for whatever reason maybe that does not suit their personal and family circumstances and they are moved on to another programme. Perhaps for the future, Madam Speaker, I am very happy and delighted, before a question comes to the House, if you want to reach out and perhaps we can have a discussion. It might make the business of this House easier.
1870

Hon. J Ladislaus: I am grateful. It is a very interesting answer and nobody is doubting Mr Banderas's achievements or success in these areas. But I asked the question because it has been brought up with me by constituents and therefore I felt compelled to ask it.
1875

In particular, an area which was highlighted as, should I say, lacking in support was the supports available to families of the individuals and how best they could be supported as a unit, so to speak. So, will the Hon. Minister, look further into that specific area? I would be grateful.
1880

Hon. N Feetham: Yes, indeed, Madam Speaker.

In fact, when I had my discussions with Mr Banderas, because we could not actually pin down where it was that there was a lacuna, because it did seem to us that there was no lacuna given the comprehensive nature of the work that the Care Agency does, and I have written it down here in my own handwriting. He said 'Minister, should the question be specific to an individual case, then perhaps the hon. Member can reach out to you and therefore the Care Agency would happily look into it.'
1885

Madam Speaker: Next question.

Q458/2024

**Criminal convictions under 18 years of age –
Statistics**

1890 **Clerk:** Question 458/2024. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, can the Government provide statistics as to the number of children and young people under the age of 18 who were convicted of crime in: 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024 to date?

1895

Clerk: Answer the Hon. the Minister for Justice, Trade and Industry.

Minister for Justice, Trade and Industry (Hon. N Feetham): Indeed, Madam Speaker.

1900 The following numbers of children and young people under the age of 18 were convicted of crime in the following years, and I am just going give the statistics if I can, Madam Speaker:

2011 – Nil

2012 – 2

2013 – Nil

2014 – Nil

1905

2015 – 2

2016 – 1

2017 – 5

2018 – 10

2019 – 22

1910

2020 – 13

2021 – 18

2022 – 20

2023 – 32

2024 to date – 9

1915

Hon. J Ladislaus: I am grateful for that answer and it does, sadly, confirm what I suspected, which is that we can see a rise in numbers in recent years of under-18's convicted.

Could I ask the Hon. Minister whether he is looking into addressing the issue of a clear rise in crime within the under-18 age group, so to speak?

1920

Hon. N Feetham: Yes, the answer is, Madam Speaker, that yes, we are. It is a complicated subject, Madam Speaker. It is a subject that in many cases relates to the individual circumstances of the child, and therefore what I am proposing to do is to engage with my Ministerial colleagues in relation to care and youth and see whether we can have a multi-agency and Ministerial approach to the subject matter.

1925

Hon. J Ladislaus: I am grateful.

Can the Hon. Minister elaborate as to some of the strategies that are being looked at to be put in place, specifically?

1930

Hon. N Feetham: Madam Speaker, what I have said is that we will engage with our Ministerial colleagues precisely to sit down, and indeed articulate the appropriate strategies. It is a complicated subject, and therefore at this stage I am not in a position to actually say what the specific nature of the strategy will be.

1935

You will find that in terms of some of these offences, Madam Speaker, they relate to a handful of young persons. They also relate to specific areas such as, for example, burglary and serious

assault, and the words that certainly resonate with me when I have these discussions with my Ministerial colleagues within the Justice Ministry, which includes the Police and the Probation Services, that prevention is better than cure. But that is a simple statement to make. It is far more complicated than that, Madam Speaker.

1940

Hon. Dr K Azopardi: Madam Speaker, as someone who has practised in the criminal courts, at least in younger days, there is always problem children, regrettably. I have represented problem children through the criminal courts, people who have had a track record of offending who then become young men or young women. So that has always there.

1945

So I think, perhaps, it is important to try to get to grips with the causes of this and I am sure the Hon. Minister agrees. Can he give us a sense, though, because of the uptake of statistic, there is quite an increase really from 2018 onwards in the numbers he has given, a sense of the offences that we are talking about, so that we perhaps have a bit more information? No?

1950

Hon. N Feetham: Madam Speaker, if the Hon. the Leader of the Opposition tables the question then I am very happy to provide information. I do not have that information at hand right now. Or should the hon. Member opposite wish to email me requesting information, she does not have to wait for the question to be tabled in Parliament, I am very happy to provide that to her.

1955

Madam Speaker: Next question

Q459/2024

Domestic violence conviction – Statistics: number of offenders

Clerk: Question 459/2024. The Hon. J Ladislaus.

1960

Hon. J Ladislaus: Madam Speaker, can the Government provide statistics as to the number of offenders convicted of domestic violence offences for the following years: 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023 and 2024 to date?

Clerk: Answer, the Hon. the Minister for Justice, Trade, and Industry.

1965

Minister for Justice, Trade and Industry (Hon. N Feetham): Madam Speaker, I have been informed by the RGP that they are unable to provide the statistics with regard to offenders convicted of domestic violence offences for the specified years. This is due to the fact that if an offender is convicted of, for example, assault occasioning actual bodily harm upon a current or former partner, the conviction will be recorded as 'Assault occasioning ABH' with no mention of the victim or the victim's status in relation to the offender.

1970

In order to obtain statistics to answer the question the RGP would have to revisit every conviction for assaults from common assault to murder, sexual offences, harassment offences, etc. from 2011 to current day, and check the case docket for each to ascertain the relationship the victim has with the offender and whether it would qualify as 'domestic violence'. I am advised that this task could take months.

1975

Although the question relates solely to convictions and does not refer to 'incidents', I am advised by the RGP that they do keep statistics in relation to domestic violent incidents that they investigate where there may have been arrests but which do not necessarily end up in convictions. Cognisant of the operational independence of the RGP, I have asked the Commissioner of Police to consider if it will be possible to introduce procedures to keep a record of convictions which have come as a result of domestic violence incidents, Madam Speaker.

1980

1985 **Hon. Dr K Azopardi:** Certainly we are grateful for the explanation and we appreciate the enormity of the task given he has explained it, and that it would be impossible; and certainly we welcome, on this side of the House, the tail end of that statement which, hopefully, the RGP takes on board – given their independence – and so that it gives everyone a statistical base to understand the domestic violence convictions going forward.

He did say in his answer that they do keep statistics on *incidents*, but not convictions. Does he have those numbers for some years today?

1990 **Hon. N Feetham:** I do not have that information available to me but, again, I am very happy, if the Hon. Leader of the Opposition reaches out, to provide that information to him. Not a problem at all.

Madam Speaker: Next question.

Q460/2024
Sexual offences convictions –
Numbers

1995 **Clerk:** Question 460/2024. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, can the Government provide statistics as to the number of offenders convicted of sexual offenses for the following years? 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023 and 2024 to date?

2000 **Clerk:** Answer, the Hon. the Minister for Justice, Trade and Industry.

Minister for Justice, Trade and Industry (Hon. N Feetham): Yes, Madam Speaker. The following numbers of offenders were convicted of sexual offences in the following years:

	2011 – 7
2005	2012 – 6
	2013 – 6
	2014 – 2
	2015 – 5
	2016 – 6
2010	2017 – 10
	2018 – 9
	2019 – 7
	2020 – 4
	2021 – 1
2015	2022 – 6
	2023 – 7
	2024 to date – 2

Madam Speaker: Next question.

Q461/2024

**Royal Gibraltar Police Officer training –
Vulnerable witnesses; suspected offenders**

Clerk: Question 461/2024. The Hon. J Ladislaus.

2020

Hon. J Ladislaus: Madam Speaker, how many Royal Gibraltar Police Officers are trained in undertaking Achieving Best Evidence Interviews aimed at dealing with the most vulnerable of witnesses or suspected offenders?

2025

Clerk: Answer, the Hon. the Minister for Justice, Trade and Industry.

Minister for Justice, Trade and Industry (Hon. N Feetham): Madam Speaker, the Royal Gibraltar Police have confirmed that there are 15 officers who are trained in undertaking Achieving Best Evidence Interviews.

2030

Hon. J Ladislaus: Madam Speaker, if I may, why are all our GP officers not trained in AB interview techniques? This is actually an area in, if I may comment, which I have seen significant issues before in private practice, in criminal practice, and it is not the fault of the officers who may not have had an opportunity to train.

2035

So, I ask therefore, why are all officers not trained in such techniques?

Hon. N Feetham: Madam Speaker, when I received the question, given the fact that when the hon. Member opposite asks a question, she appears to be very well informed and given her professional practice, I would expect that to be the case. So, therefore, I reached out to the Commissioner himself and I asked the Commissioner what could be driving the question because the question is very specific and I imagine there will be supplementaries.

2040

The Commissioner assures me, and certainly I have not practised in criminal law as a professional prior to being elected, and I have no knowledge of this myself, but the Commissioner has assured me that the 15 officers are enough to be able to discharge the duties that are required to be discharged in this area.

2045

It is like saying, well is it good to have or is it that there is a lack of resourcing by the Police? I think given the other questions that have been tabled in this House in the past regarding resourcing issues, I think we would welcome the fact that if 15 officers is enough to be able to discharge the duties that are required in this area, but the Police should not be putting more resources into something which is not necessary.

2050

Hon. J Ladislaus: Is the training refreshed? And if so, how frequently?

Hon. N Feetham: Madam Speaker, in the supplementary information that I have available to me I note that all training is sought from external trainers. In 2023 the training to the RGP and officers on the Care Agency was conducted by an individual. This was a basic course for new interviewers and it lasted over five days. It was attended by Police Officers.

2055

Then I am told also that there is continued professional development for officers that are already trained. That is the information, again, that I have in terms of my supplementary information. If you want me to be more specific, again, very happy for you to email me outside this House, and I will endeavour to have the information made available.

2060

Madam Speaker: Next question.

Q462/2024

**Youth detention centre –
Where situated; specialist staff recruited**

Clerk: Question 462/2024. The Hon. J Ladislaus.

2065

Hon. J Ladislaus: Madam Speaker, are there plans for the introduction of a youth detention centre? And, if so, where would it be situated and would specialist staff be recruited?

Clerk: Answer, the Hon. the Minister for Justice, Trade and Industry.

2070

Minister for Justice, Trade and Industry (Hon. N Feetham): Madam Speaker, there are no plans at this stage.

Hon. J Ladislaus: Madam Speaker, given the numbers that we have just given and the fact that youth crime is very obviously on the rise, anecdotally just a few weeks ago there was an incident in the South District where 10-year-olds were held at knife-point by teenagers wanting to steal their money for a disco. So that is how serious things can get.

2075

Is the Government taking any steps to address these issues? Because many would agree that they cannot be left to worsen and if these young offenders are imprisoned, at some point at HMP, it could have a worse impact because it is not made for children? So is there anything in the pipeline, so to speak, to address this issue?

2080

Hon. N Feetham: Yes, Madam Speaker.

This has been the subject of a question in the past in Parliament. We have drawn attention to the fact that there is a manifesto commitment and I will just read out what the commitment is for the avoidance of doubt.

2085

We did say in our manifesto that we will consider, with relevant professionals in the field, the creation of a youth offender institution. So we will consider, with relevant professionals in the field, the creation of such a centre.

2090

I have sat down with my Ministerial staff in relation to this subject matter, because I agree with the hon. Member, it is something that deserves consideration; and the advice that I received and I am very happy to read out the advice, it is advice that was also given to my predecessor, the previous Minister for Justice Miss Sacramento, and this is advice that had been received by a Committee that was set up precisely to consider these very issues, and it reads:

The Committee was of the view that given the number of individuals involved and the projected cost, the creation of a secure juvenile detention centre is not the best fit for Gibraltar or the most effective use of resources.

2095

I have since sat down with the Probation Service, a Probation Officer. Again, I commend the great work which is being done by the individuals, highly professional, and the advice that I have received, certainly in my discussion, is consistent with what was I just read out; and in my discussions with the Probation Service – and indeed I have also sat down and discussed this very same issue with the Commissioner of Police – and I am reminded that it is a very complicated subject that it will be too simplistic to say that because numbers are high, well they could be high one year and they could be low in another. And, for example, if the hon. Member asked me the question, which I think is actually here in the next question, if I am not mistaken, whether there are any young offenders, in other words, below the age of 18, currently serving a prison sentence? The answer is no. There is no inmate below the age of 18.

2100

2105

The point has been made to me, and this is quite interesting, the reverse argument has been put to me that sometimes it is not in the best interest of a young offender to serve time in a youth detention centre and I made notes, again, from my discussions with the relevant professionals

2110 where I am told, for example, that there could be instances where you have a young person in a youth detention centre on his own. In other words, solitary confinement, Madam Speaker, the worst form of punishment for any adult, let alone a young offender.

When I have then asked the question, 'Well, how can that be different to, for example, the prison, being an inmate in the prison?' The answer that I have been given is, 'Well, in the prison you have got an education department, an ex-retired teacher that goes to the prison service to provide educational support to inmates.'

2115 I am told that inmates, including young offenders, if indeed a young offender would be in prison, could also have interaction in the gym. I have been told they can have interaction in the workshop and in the patio, obviously provided it is not with offenders that are there for serious offences.

2120 So I am not sure that the premise of the question *is* the right question. It is a very complicated subject and the advice that I am given by relevant professionals as it stands today is, again, prevention is better than cure. So all I can do, Madam Speaker, is continue to engage with those professionals that are better positioned than I am to be able to take a decision in relation to this.

2125 **Hon. J Ladislaus:** I am very grateful for the comprehensive answer and I do agree that there are some years that there will be more offending than others. Nevertheless, the numbers provided do suggest, from 2011 to 2016 we have 5 years, and between those years there were five convictions.

2130 From 2017 onwards, 2017 itself had 5 convictions, and thereafter the numbers rise exponentially, particularly when we get to 2023 at 32 convictions. Therefore, there is a clear pattern of increase as to the fact that these young offenders maybe on their own; and I take the point that the Hon. Minister is making that they are currently, we can assume, within the adult population because they are obviously in the patio and they are in the gym.

2135 There is evidence to suggest – and I have seen this myself in private practice as well – that these young offenders then learn from older offenders and unfortunately more hardened offenders, and they pick up things that perhaps they would not if they were not subjected to the general population.

Therefore, have any alternative solutions been identified, if a young offenders' institute is not the way forward for Gibraltar, have any other solutions been identified in talks?

2140 **Hon. N Feetham:** Madam Speaker, just to pick up on the statements that the hon. Member has made prior to asking the question. Of course, there has been an increase in numbers but they are still low-digit numbers. So, therefore, the original question that was tabled in this House was whether or not and when we would build the youth detention centre.

2145 That is a massive investment, Madam Speaker, it is a huge investment, not just in infrastructure, not just in construction but also in the maintenance of the detention centre, in the staff, it has to be staffed 24/7, there has to be shifts. So in the context of the numbers, and they are low-digit numbers, the answer is the one that I have given.

2150 You have then said, 'Well, is there an alternative strategy?' That is exactly, Madam Speaker, the sort of discussions and conversations that we will be having. Certainly, we believe that we need to pursue a strategy in relation to this and it may well be that if she tables the same question in the future, the answer might be we will *not* be constructing a youth detention centre.

Madam Speaker: Next question.

Q463/2024

His Majesty's Prison –

Adults, young people, children: convicted, serving sentence, awaiting trial

Clerk: Question 463/2024, the Hon. J Ladislaus.

2155

Hon. J Ladislaus: Madam Speaker, in total, how many individuals were detained at His Majesty's Prison on 13th May 2024? Please provide statistics broken down as follows:

2160

- (i) Number of individuals convicted and serving a prison sentence or awaiting sentencing
- (ii) Number of individuals awaiting trial
- (iii) Number of adults, and
- (iv) Number of children or young people

Clerk: Answer, the Hon. the Minister for Justice, Trade and Industry.

2165

Minister for Justice, Trade and Industry (Hon. N Feetham): Yes, Madam Speaker.

The Prison Service had a total of 30 inmates on 13th May 2024.

There are 17 individuals convicted and serving a prison sentence or awaiting sentencing.

There are 13 individuals awaiting trial.

2170

There are 30 adults over the age of 18.

There are no children under 18 and there are 6 young people under the age of 25.

Hon. J Ladislaus: I am grateful for the answer.

2175

Can the Hon. Minister – and I do not know whether he has this information – confirm what the prison's maximum capacity is?

Hon. N Feetham: Yes, Madam Speaker.

The prison can accommodate up to 98 inmates.

2180

Hon. Dr K Azopardi: It is a small point, but may I just check the numbers the Hon. Minister has given me because I may have misunderstood because they do not tally for me? I think he answered that there is 30 people in prison?

Hon. N Feetham: Yes, 17 plus 13 is 30.

2185

Hon. Dr K Azopardi: Yes, but I thought he said there is 30 adults and 6 young people ...
(*Interjections*) Oh, I see, but they are over 18. I thought he was making a different point, I see.
(*Interjection*) There are no children. I see, I understand, okay.

2190

Madam Speaker: Next question.

Q464-65/2024

Removal from EU grey list –

When secured; what steps taken

Clerk: Question 464/2024. The Hon. the Leader of the Opposition.

2195

Hon. Dr K Azopardi: Madam Speaker, when will Gibraltar's removal from the EU's list of high-risk countries, the so-called EU grey list, be secured?

Clerk: Answer, the Hon. the Minister for Justice, Trade and Industry.

2200 **Minister for Justice, Trade and Industry (Hon. N Feetham):** Madam Speaker, I will answer this question together with Question 465/2024.

Clerk: Question 465/2024. The Hon. the Leader of the Opposition.

2205 **Hon. Dr K Azopardi:** Have the Government been informed what steps will be taken by the European Commission following the European Parliament's vote to refuse to remove Gibraltar from the EU's list of high-risk countries in respect of mechanisms to counter money laundering and terrorist financing, the so called EU grey list?

Clerk: Answer, the Hon. the Minister for Justice, Trade and Industry.

2210

Hon. N Feetham: Madam Speaker, the European Parliament's objection to the European Commission's decision to remove certain jurisdictions, including Gibraltar, from the EU's list was made on the 23rd April. The Government has not yet formally been informed on the steps that the European Commission will take to remove Gibraltar from this list.

2215

The Government has no reason to doubt the Commission's commitment to removing Gibraltar from the list. As to when that might happen, there are elections to the European Parliament taking place on 6th June to 9th June this year.

Since the new legislature's business, this side of the summer recess focuses on constituent aspects of the European Parliament itself and the business related to the formation of a new European Commission. This includes the election of a new president to the European Commission.

2220

The Government would expect that a new decision removing Gibraltar from the list could be sanctioned by the European Parliament at the earliest in the last quarter of 2024.

Madam Speaker, I welcome the question from the hon. Member because this certainly gives us, on this side of the House, an opportunity, Madam Speaker, to read out the letter that we received, for the benefit of *Hansard*, from the European Commission, a letter dated 10th April. A letter on European Commission letterhead, a letter signed by the Commissioner with responsibility for financial services prior to the decision taken by Parliament, Madam Speaker, to block the very decision which the European Commission had taken. And if there are any detractors outside this House that believe that Gibraltar has not done enough in order to merit and justify us coming off the EU list, this should put it beyond any doubt whatsoever.

2225

2230

Under letter to the Government of Gibraltar, that has not been made public, Madam Speaker, that we certainly, on this side of the House, feel that we are obliged to make the hon. Members opposite aware of the content and the people of Gibraltar reads as follows, Madam Speaker:

I have the pleasure to inform you that we consider that Gibraltar has addressed the strategic deficiencies in its regime to fight against money laundering and terrorism financing and will, Madam Speaker, will be removed from the EU list of high risk third country jurisdictions following the necessary regulatory procedures.

2235

The necessary regulatory procedures, obviously the ratification by Parliament which should have been a matter of course and a matter of formality. Then, the letter goes on to describe what happened prior to us coming off the FATF greyList and it carries on saying, Madam Speaker:

My services have taken note that Gibraltar has addressed all, Madam Speaker, all the strategic deficiencies identified by the Financial Action Task Force in its relevant action plan. After a careful assessment, Madam Speaker, my services consider that this removes the strategic deficiencies identified under Article 9 of the fourth Anti Money Laundering Directive.

I take this opportunity to congratulate Gibraltar for the actions taken and commend your jurisdiction, us collectively Gibraltar, Madam Speaker, for its continuous efforts in strengthening its framework for the combat against money laundering and terrorism financing.

I am looking forward to a fruitful and continuous co-operation of these matters.

I wish for this letter to be placed in *Hansard*, Madam Speaker.

2240 **Hon. Dr K Azopardi:** Perhaps the Minister would, apart from reading that letter, if he would perhaps provide us with a copy, that would be helpful as well. He has read it, so I guess the contents are out there now.

Hon D J Bossino: This *Hansard* does not capture his words.

2245 **Hon. Dr K Azopardi:** Does he want me to give way?

Hon. N Feetham: Yes, I am grateful for that.

No, unfortunately, I am not in a position to be able to give you a copy of the letter because I am advised – this is the advice that we have received – that there are ... I disagree with the advice, that this is a letter, the ownership of which does not belong to the Government of Gibraltar.

2250 So, therefore, given the advice that I have received, (*Interjection*) sorry apologies, but given the fact that I wanted to share the contents with the hon. Member, I have done what I have actually done now which is stand up, read it and therefore it forms part of *Hansard* and you can read that from *Hansard* should you wish to do so.

2255

Hon. Dr K Azopardi: Fair enough, but I take by that answer that it may not be addressed to the Government, but I am not going to press him to answer one way or the other, that is fine. (*Interjection*)

2260 **Hon N Feetham:** It is addressed to the Government.

Hon. Dr K Azopardi: Oh, okay, all right. Then perhaps he can tell me behind the Speaker's Chair so that I can understand that point a bit more. (*Interjection*)

2265 Certainly on this side of the House, as I think was the position, certainly, in the reported comments of Ministers, we were dismayed by that politically motivated manoeuvre to ensure that we were not taken off the EU grey list and I am sure the Hon. Minister agrees. With that I give him the opportunity to, once again, make that public as he wishes.

2270 Can I ask him on the issues that he has given us in the discussions, he said he has not been informed yet by the European Commission on what specific steps they can take. I assume, however, though, from what he has been saying that there are ongoing discussions with the Commission via the UK or directly? So perhaps he could answer whether there are ongoing discussions. And he indicated that he was hopeful that there might be a new decision put to the European Parliament, post the parliamentary elections so that there is a second attempt to remove us from the list during the last quarter of 2024.

2275 I am assuming, I have always assumed that it must have European Parliament approval to get us off the list, but has he been advised in his discussions with officials whether there is any other way of removing Gibraltar from the list other than with European Parliament approval should there be a problem second time around?

2280 **Hon. N Feetham:** In answer to that last question, the answer is no. I have asked if there is an appeal system. In other words, can we appeal this very unfair and unsatisfactory state of affairs where the matter is taken at a technical level by the European Commission and then because, procedurally, it requires ratification from parliament whether that means that effectively we are blocked and the answer is there is no appeal system.

2285 Unfortunately it is a difficult position to be in because it now requires the European Commission to be satisfied that if a decision were to be taken again that simply restates what they did previously, as I have read out in that letter, that they will have the majority support of the European Parliament to be able to seek gratification and if the Commission is not satisfied it puts

2290 them in a position where they might not be prepared to do that because it is not a technical assessment.

Also, Gibraltar is not subject to an evaluation by the European Commission with regard to this specific subject matter. In other words, there is no direct evaluation by the European Commission on matters relating to money laundering and terrorism financing, so to that extent the Commission relies on the FATF decision.

2295 Well, the FATF has already taken a decision to remove us. So we are none the wiser, unfortunately, Madam Speaker, on what the next step will be unless we have the full support of the European Commission and the Commission feels that the matter – if the matter comes before the European Parliament – the Parliament will ratify the recommendation or the decision made by the European Commission.

2300 **Hon. Dr K Azopardi:** And finally, can I just ask this, because if the expectation of the Minister is that – because of the ensuing parliamentary elections, and indeed there needs to be a fresh decision put to the European Parliament perhaps during the last quarter of 2024 – all of this will be very disappointing to the financial services industry, of course, because remaining on the list will have practical impacts on businesses and banking services, and so on and so forth, for many persons who are interacting with the financial services industry in Gibraltar.

2305 So, apart from engaging with the Commission will the Government be considering taking legal advice as to any legal routes of recourse that it might have in relation to this matter at European level, in the European Court of Justice, for example?

2310 **Hon. N Feetham:** Madam Speaker, that is an interesting question. Certainly, I will discuss that with the Hon. Chief Minister and see whether or not, through the good offices of Michael Llamas and indeed the Brussels Office, whether or not the matter is one that is justiciable as the Hon. the Leader of the Opposition suggests. But having said that, when I have asked the question, I have been told there is no appeal process. By that, I assume that they took into account whether or not we could appeal the matter to the European Court of Justice.

Madam Speaker: Next question.

DEPUTY CHIEF MINISTER

Q466/2024

Tennis Courts at the Mount – Availability for public use

2320 **Clerk:** Questions to the Deputy Chief Minister.
Question 466/2024. The Hon. D J Bossino.

Hon. D J Bossino: The one sole question. Are the tennis courts situated at the Mount available for public use?

2325 **Clerk:** Answer, the Hon. the Deputy Chief Minister.

Deputy Chief Minister (Hon. Dr J J Garcia): Madam Speaker, yes.
The tennis and padel court situated at the Mount will be available for public use.

2330 **Hon. D J Bossino:** Sorry, the question to the Hon. the Deputy Chief Minister was: are they available? In other words, in the present tense. But his answers *will* be available.

Can he explain further why the distinction? What is going on there?

2335 **Hon. Deputy Chief Minister:** Well, my understanding is that there are works going on. This is part of the master plan for the Mount, which was approved by the DPC in February 2022. That included works to those tennis courts, to have a tennis court, a padel court and some pickle tennis courts as well in an environment where we could change from one to the other.

Those tennis courts are not already yet, so once they are ready the idea is to make them available for public use. That is a policy.

2340

Hon. D J Bossino: If it may assist the Hon. the Deputy Chief Minister, because I am not sure whether the tennis courts which you can see from the Europa Road, in other words by the bus stop, whether those are going to be the tennis courts of the refurbished site. And he is nodding his head.

2345 They seem to be (1) in very good condition; and I am told, indeed, I have seen myself it is being used. So if it is not currently available for public use the first question is: how is it that it is being used? In other words, is it being used privately by private individuals? I have seen that myself and it has been reported to me that that is the case.

2350 Secondly, if I may ask, who is currently responsible for its upkeep because it seems to be in very good nick, in very good condition? I have I have been shown photos of tennis balls which are permanently there in very good condition, so it has all the vestiges and all the hallmarks of it being currently used. And given that it is not open for public use, I simply wanted to investigate that further and whether he has any information in relation to that.

2355 **Hon. Deputy Chief Minister:** Madam Speaker, the intention is this: the details of what will happen with it in the future is a matter for the GSLA and the Minister for Sport which is where this will be firmly housed. My involvement in the Mount is with the development, which includes the provision of the tennis courts, the padel court and the pickle court.

2360 My information from the project director at the Mount is that once those are ready they will be available for public use in the normal course of events as happens with other tennis courts anywhere else through the GSLA. So if people are using them now, it is as much a mystery to me as it is a mystery to him and I am unable to enlighten him on that point.

2365 **Hon. D J Bossino:** Will he be able to, at some point in time, perhaps if I write to him, provide information so that he can investigate the issue? And, therefore, the mystery that it is to him as it is indeed to me no longer is a mystery and we have facts in order to enlighten both of us, and the general public, as to what is happening there at the moment.

2370 Can I also expand on that further? Does he have an answer as to the upkeep of the place? I ask specifically in relation to that, does he have any comment to make in relation to that aspect? I repeat, the tennis courts are in very good condition and they have all the hallmarks of it being currently used.

2375 **Hon. Deputy Chief Minister:** Madam Speaker, I am told now that pending the redevelopment, the tennis courts can be booked through the GSLA and can be used. So the GSLA are responsible for its maintenance. So it may be that the actual refurbished ...

I have not actually seen that particular area of the Mount myself, so it maybe that the refurbishment, the addition of the new courts, has not happened yet. And while that happens, the old one is still in use.

2380 **Hon. D J Bossino:** The old one is the one that I identified before. In other words, it is in the same place, the old one will be the new one. It is just going to form part, okay.

So he is saying now that, I detect in his answer a contradiction. In other words, that whilst he was initially saying they are not currently available to the public, am I right in saying that in fact

2385 they are available to be booked by members of the public if they contact the GSLA, which is also the entity responsible for its upkeep and current refurbishments?
Is that the position?

Hon. Deputy Chief Minister: Madam Speaker, yes. The last part of his answer is correct.

2390 **Hon. D J Bossino:** Only the last part or the entirety of it? So as I identify my own question, it is the booking and the upkeep.

Hon. Deputy Chief Minister: Correct, the entirety of the answer.

2395 **Madam Speaker:** The Hon. Mr Reyes.

Hon. E J Reyes: Thank you, Madam Speaker.

2400 Yes, the Minister in his answers has obviously tried to develop an answer as long as possible because I was going to ask, given that I have sat in that side of the House and had the responsibility for the Ministry for Sport, it may or may not help the Minister, and would he just undertake that he will look into it? I know that originally that tennis court did not fall under the responsibilities of the Gibraltar Sports and Leisure Authority, but that instead it has been handed over to the Gibraltar Tennis Association.

2405 Now that the Minister is talking about what is going to happen in the future, it *could* be that in this present day and age if someone is seen playing there, it is because the Gibraltar Tennis Association, as a key holder, still has that access. But my question is going to be – and if he does not have it now I will pose a question.

2410 In the future, when it is ready would, hopefully, everything fall under the GSLA so that, like other sports facilities, there is a central point of focus, a central location for booking and a central management? Whereas I can vouch for the efficiency of the GSLA and I think that would provide better value for money, if we can call it that, for the taxpayer.

2415 So my question is, would the Minister kindly bear that in mind and take it into account so that when he announces – maybe during his budget speech – whatever the final outcome is going to be, we have taken all the observation and avoids future questions on my part at least, which I know Madam Speaker would welcome the least questions that I ask as possible.

2420 **Hon. Deputy Chief Minister:** Madam Speaker, I am grateful for the hon. Member's constructive comments and suggestions that this matter will be run by the Minister for Sport, who is not here today, he is away on parliamentary business, and by the GSLA. And that is my understanding of the situation as well.

**Adjournment –
Thanks to Prime Minister Rishi Sunak**

2425 **Chief Minister (Hon. F R Picardo):** So, Madam Speaker, I now move that the House should adjourn to tomorrow at 10 a.m. I know that we will also have the opportunity to bid farewell to His Excellency the Governor at approximately 11.15 a.m. here, so I thought it might make sense for us all to convene at 10 a.m. so that we can continue with questions.

In moving the adjournment, Madam Speaker, I note that the Prime Minister, the Rt. Hon. Rishi Sunak, has just called a General Election in the United Kingdom for 4th July.

Madam Speaker, I want to use this opportunity to thank the Prime Minister for the support he has given Gibraltar and indeed that his predecessor have given Gibraltar during the lifetime of this Parliament. It is remarkable, but he has had two predecessors just in the lifetime of this Parliament

2430 in the United Kingdom, and successive Foreign Secretaries who have worked with me and the
Deputy Chief Minister and the whole Government on the work that we have been doing in
negotiating new arrangements with the European Union for Gibraltar's access to the EU, the fluid
access across the frontier work, which is ongoing. Although you would not necessarily be able to
tell that that was the burning issue of the day given the sorts of questions we have been hearing
2435 this afternoon.

Madam Speaker, to reassure everyone in Gibraltar that after the conversations I have had a
moment ago, I can confirm that we will be able to continue the negotiations during the period of
purdah this is an issue that enjoys cross-party support in the United Kingdom and that the work
continues to secure that treaty. And I am sure that whoever is returned to office after 4th July in
2440 the United Kingdom, the Government that I lead will be able to work well and closely together in
the interests of Gibraltar and its people and our continued, exclusive, British Sovereignty.

Thank you very much, Madam Speaker, and I move that the House should now adjourn to
tomorrow at 10 a.m.

2445 **Madam Speaker:** I now propose the question which is that this House do now adjourn to
tomorrow at 10 a.m. I now put the question which is that this House do now adjourn to tomorrow
at 10 a.m.

Those in favour? (**Members:** Aye.) Those against? Passed. This House will now adjourn to
tomorrow at 10 a.m.

The House adjourned at 6.10 p.m.



PROCEEDINGS OF THE GIBRALTAR PARLIAMENT

MORNING SESSION: 10.00 a.m. – 11.00 a.m.

Gibraltar, Thursday, 23rd May 2024

Contents

Questions for Oral Answer	2
Health, Care and Business	2
Q394/2021 Shift patterns for Allied Health Professionals within the GHA – Supplementary questions	2
Q418-19/2024 Seven-point plan for the GHA – Cost of reviews; learning points and changes implemented	3
Q420-21/2024 GHA restructure – Rationale; cost	6
Q422/2024 New post office – Land-to-space ratios.....	7
Q423-24/2024 EV charging – Capacity allowance in new developments; security and equitability of supply	8
Q425-27/2024 Building control approval and granting of planning permission Average times from application to approval	12
Q428-29/2024 Gender identity services for children – Impact of Cass Review; use of puberty blockers.....	16
<i>The House recessed at 11.00 a.m.</i>	18

The Gibraltar Parliament

The Parliament met at 10 a.m.

[MADAM SPEAKER: Hon. Judge K Ramage GMH *in the Chair*]

[CLERK TO THE PARLIAMENT: J B Reyes Esq *in attendance*]

Questions for Oral Answer

HEALTH, CARE AND BUSINESS

Q394/2021

Shift patterns for Allied Health Professionals within the GHA – Supplementary questions

Clerk: Meeting of Parliament, Thursday, 23rd May 2024.

We continue with questions on Health, Care and Business. Question 418, the Hon J. Ladislaus.

5 **Hon. J Ladislaus:** Madam Speaker, if I may have your indulgence: we have not asked the supplementary questions on Question 394 yet, and I wonder whether it is something that we could start with.

10 **Madam Speaker:** You are quite right. I had that before me yesterday and I have lost it now. I think it makes sense to start with that, and then we can move on to the questions proper. Does the Hon. Minister have the question? It is supplementaries on Question 394.

15 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Whatever the hon. Lady wishes to ask.

20 **Hon. J Ladislaus:** I am grateful for the provision of the schedule handed to me a couple of days ago. I note, however, that ... I specifically asked the question as to shift patterns, which, in the ordinary course, would usually mean any work that occurs outside of the usual working hours. Nevertheless, the shift patterns do not appear to be on the actual schedule itself. Would it be possible to be provided with those shift patterns, perhaps via email?

25 **Hon. G Arias-Vasquez:** Madam Speaker, the issue with the shift patterns is that they have on-call rotas which change every single week. We can provide you with a summary of the general patterns of how the shift patterns work but providing you with a rota might be difficult – if that makes sense.

Hon. J Ladislaus: Yes, I can appreciate the difficulties. The shift patterns would be fine and how those work. I am simply interested in the number of hours that are being worked consecutively. I am grateful.

30 **Hon. G Arias-Vasquez:** Madam Speaker, I will endeavour to provide that information to the hon. Lady.

Madam Speaker: Anything else? Next question.

Q418-19/2024
Seven-point plan for the GHA –
Cost of reviews; learning points and changes implemented

Clerk: Question 418. The Hon. J Ladislaus.

35

Hon. J Ladislaus: Madam Speaker, what was the cost of all the reviews undertaken in 2021, broken down by area, which led to the Government's announcement of a seven-point plan to deliver a wide-ranging series of reforms to achieve the Reset, Restart and Recover of the GHA, and were any external costs incurred? If so, please provide a breakdown of internally or externally incurred costs.

40

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 419/2024.

45

Clerk: Question 419. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, what has been learnt from the implementation of the 2021 seven-point plan and what changes have been prompted as a result?

50

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the total cost of reviews undertaken in 2021 broken down by area are as follows: Theatre and Governance Review, £8,400; Mental Health Review, £105,100.

55

The seven-point plan has been instrumental in the recovery of healthcare delivery within Gibraltar post the pandemic. The increasing professionalisation of the GHA, which the seven-point plan promoted, has given us a strong and vibrant health system, which is the GHA. The GHA is now led by an experienced healthcare professional, in the Director General, and has implemented strong clinical and corporate governance at all levels within the organisation.

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What we have learnt is that strong clinical and corporate governance with clear lines of responsibility delivers the best possible healthcare with the resources available. The establishment of the committee structures within the GHA allows non-executive directors oversight of quality, safety, performance, workforce and finances with direct reporting of any issues back to the GHA board. In addition, the new divisional structure, the creation of the Statistics Office and the restructuring of PALs have all strengthened the professionalism of the GHA and its ways of working. The Research, Restart and Recover programme is something that we should all be very proud of and has delivered the likes of the waiting list initiatives in orthopaedics and dental, as well as the new service improvements which we are seeing being delivered with the new infusion centre and the new cath lab and oncology unit.

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The overriding lesson that we have learnt is that healthcare is never static. That is why I am consulting upon further changes to the GHA which will increase its professionalisation and build upon the seven-point plan.

75 **Hon. J Ladislaus:** I am grateful. I do not have any questions on Question 418, so the questions I am asking will be simply in respect of Question 419.

We have heard that the plan has had some successes and I have no doubt that it may well have had some successes. Nevertheless, given that the plan cost the taxpayers, we can see, a significant sum of money – £113,500, if my maths serves me correctly, which it rarely does – if we look at one of the key issues, you have now announced a further restructure and one of the issues is that the Hon. Minister will be sitting on the board within that. I quote from the last restructure something that the Hon. Chief Minister stated, which is very interesting. He stated that they were seeing a future – and this is because they had announced the reconfiguration of the GHA board and they had separated the functions of the GHA and the Ministry of Health and Care and it included the appointment of a new independent chair of the GHA board at the time. The Hon. Chief Minister stated that we could look forward to a future in which politicians can demand accountability from a board that does not include a Minister or other politicians. How does the Hon. Minister reconcile the new changes with that statement, which was a mere three years ago? Is it reconciling from the idea of stepping back from micromanagement of the Health Service?

90 **Hon. G Arias-Vasquez:** Madam Speaker, I am very grateful to the hon. Member for the opportunity to explain the thinking behind this. Indeed, I am perfectly aware of the Chief Minister's statement at the time and, as I have explained in numerous press releases and, indeed, in the interview that I gave to GBC at the time, this is a recalibration. I think it is very clear if you look at the seven-point plan, if you look at the annual review of the GHA, if you look at all the programmes at the time, that health is not a static concept. Health progresses constantly. As I have frequently said, what we are doing is recalibrating the relationship.

We have tried a relationship where the Ministry does not sit on the board and we do feel ... and, indeed, there were interviews Unite gave where they felt that there needed to be a closer integration between the Ministry and the GHA board, that they needed to work more hand in glove. I do agree because ultimately, as I explained the other day in response to another question that the hon. Lady asked, we are here and I am responsible to the taxpayer for every single penny that the GHA spends. There needs to be an integration between policy, accountability and the general running of the GHA board. So, we have tried complete independence and this is merely a recalibration of the relationship. However, as I have also explained, within the accountability agreement there is no intention that the Ministry, myself or any future Minister for Health, will ever interfere in the decisions of clinicians.

100 There needs to be policy oversight and it is felt that with that policy oversight it is best with the Minister sitting on the board so that the general direction moves in the same way, but the clinical decisions will be run by the clinicians, who are best placed to make those decisions. I have a law degree, Madam Speaker. I have, in no way, any medical background, so I have no intention whatsoever of making those choices for the clinicians we pay to make those decisions and choices.

115 **Hon. J Ladislaus:** I am glad to hear that there will be no clinical decisions made by lawyers because certainly none of us are qualified to do so.

I take the point that another strategy was attempted and that it was found that complete independence did not work. Nevertheless, were other strategies explored before the Minister decided to roll back completely on the initial policy to stop the micro-management of the GHA? In other words, could what you are trying to achieve have been achieved without having the Hon. Minister sitting on the board?

125 **Hon. G Arias-Vasquez:** Madam Speaker, just to unpick what the hon. Lady has said there, we have not rowed back completely from any policy. There is a difference in approach in that the Minister will sit on the board, but the approach is a similar one in that the Minister will not sit in the Hospital, the Minister will not be intrinsically involved in the day-to-day running of the

Hospital, the Minister will not be involved in the clinical decisions, and I cannot say that explicitly enough.

130 There will be an accountability agreement which sets out the red lines of what the Ministry should and should not get involved in, but there needs to be an oversight of the general direction and policy of the Hospital and that is exactly what we are doing. So, we are not rowing back; we are just trying to recalibrate the relationship once again in order to facilitate better movement in the same direction. I have described it in interviews previously like clutch control. So, we are just, at the moment, trying to work out what works and what does not, and we think that having a Minister on the board overseeing the policy of the GHA is the way that it should work better.

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Hon. J Ladislaus: Madam Speaker, I am grateful for that. On the subject of accountability, at the time when the seven-point programme was announced there were also new accountability arrangements announced and those included quarterly formal meetings, accountability meetings specifically, between the Ministry and the GHA. Have those meetings taken place to date?

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Hon. G Arias-Vasquez: Madam Speaker, not only have those meetings been taking place but I have bi-monthly meetings with the Director General in which the Director General gives me complete oversight of exactly what is happening in the GHA. So, yes, those meetings have not only been taking place but more meetings that were programmed have been taking place. We do meet on a regular basis and the DG is accountable to the Ministry in that way. However, it is felt, and as I have said, it is not only the Ministry that feels this, Unite the Union has also felt that there needs to be greater union between the Ministry and the GHA executive board.

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Hon. J Ladislaus: We hear that Unite the Union is happy about this move. Are the clinicians themselves happy about this move occurring?

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Hon. G Arias-Vasquez: Madam Speaker, this question or a very similar question was asked last week. The executives are on board with this move and the clinicians are happy with this move as well, we believe.

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Hon. Dr K Azopardi: May I just ask the Minister for information? How often does the GHA itself meet? Where the Minister sits, at the top of the structure, how often does that meet?

Hon. G Arias-Vasquez: As I have announced in the press releases, there was a meeting of the board in March, there is another meeting of the board in June and there is another meeting of the board in September, so it meets once every three months on average.

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Hon. Dr K Azopardi: I am just trying to understand it because I get lost in terminology. From my recollection – I do not have the Act in front of me, but I think the Act talks about a board but also talks about the Authority itself, the board being the management board and it has a different composition and it may have different frequency of meetings. What I am asking is not about the management board but the Health Authority itself. So, how often does the Health Authority meet?

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Hon. G Arias-Vasquez: Madam Speaker, all of this is, in fact, set out very clearly in the Act itself, so if the hon. Member were to pick up the Act it is set out very clearly, but in order to assist the hon. Member, yes, the GHA has an executive board which sits once every three months and then it has a management board. The management board does pretty much what it says on the tin and manages the daily running of the GHA.

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Hon. Dr K Azopardi: But for terminology reasons, so that we are all talking about the same thing, by 'executive board' she means what is called the GHA in the Act – is that right?

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Hon. G Arias-Vasquez: By the 'executive board' I mean what is meant by the executive board and that definition within the Act, yes.

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Madam Speaker: Next question.

**Q420-21/2024
GHA restructure –
Rationale; cost**

Clerk: Question 420. The Hon. J Ladislaus.

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Hon. J Ladislaus: Madam Speaker, specifically, what has occurred to prompt the recently announced restructure of the GHA?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 421.

Clerk: Question 421. The Hon. J Ladislaus.

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Hon. J Ladislaus: Madam Speaker, what are the costs to date of the recently announced restructure of the GHA, and have any external costs been incurred in that regard? If so, please provide a breakdown of the internal and external costs incurred.

Clerk: Answer, the Hon. Minister for Health, Care and Business.

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, what we know is that healthcare delivery never remains static, as I have previously said. New drugs, new technology, patient expectations continuously evolve, and as a consequence the structure in which healthcare is delivered needs to evolve with it. My clear objective in announcing changes to the GHA is to ensure that it continues to improve and that its structure is fit for purpose and supports the evolution of clinical services. No internal or external costs have been incurred to date in regard to the recently announced restructure of the GHA board.

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Hon. J Ladislaus: I have only one question and it is on Question 420; I do not have any questions on Question 421. I am glad to see that there is no cost incurred to date and I hope that that continues to be the case.

We have already seen that £113,000 was spent on the last occasion and we remain of the view that it is an obvious U-turn from the policy three years ago. Is it, therefore, the case that the Government got it wrong last time and is now changing back?

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Hon. G Arias-Vasquez: Madam Speaker, there are two points that I wish to clarify in relation to that question. First and foremost, the costs that were incurred last time were costs that were incurred in relation to specific reviews of specific items within the GHA. For example, the theatre review was a review of the theatre, it was not a review of the structure of the GHA. We are being completely transparent in letting you know the costs incurred to date, but it is important to state that the costs incurred were not costs incurred for the review specifically of the Restart, Reset and Recover programme but were costs incurred to review the theatre, to make the theatre run better, and then separately there was a review of the mental health provisions, which we will

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225 debate in detail when we go to the motion, so I am not going to go into that. We obviously think
that the mental health review was value for money because it significantly improved the services
that were offered, as, indeed, has been reported by the board, but we will go to that separately
when we debate that.

230 In terms of what the Opposition classifies as a U-turn, I have said it again and again, and I will
repeat it – I cannot say it any more clearly: it is not a U-turn, it is a recalibration of the way that
the board works. We are simply making it work differently, so that the relationship between the
parties is a closer relationship. So, no, we do not believe it is a U-turn and we would not classify it
as such.

235 **Hon. Dr K Azopardi:** Can I just go to what I was asking before because it is also relevant to the
restructure. I pulled up the GHA Act and my recollection was not that ‘executive board’ was
defined and, indeed, it is not, so I would just ask again, if I may. My recollection was correct that
there is a GHA and then, of course, there is a board, so when the Minister made reference to what
she calls the ‘executive board’ meeting every three months, she means the Health Authority itself
– what is the Health Authority with a specific composition under section 3. That is what she means,
yes?

240 **Madam Speaker:** I am going to allow the question even though it is going back to the previous
question, from which we have moved on, but I am going to grant the hon. Member that
indulgence.

245 **Hon. Dr K Azopardi:** I am grateful, Madam Speaker. I thought it was relevant also to structure.

Madam Speaker: I am not sure that it is. I think that is stretching it, but nevertheless I will allow
you to ask one more supplementary on the previous question.

250 **Hon. G Arias-Vasquez:** Madam Speaker, the Act is very clear. There are two separate boards
and it has always been called the executive board. So, call it the Health Authority, call it... it has
always been called the executive board. The executive board sits once every three months and
then there is a management board which – again, as it says on the tin – manages the Hospital.

255 **Madam Speaker:** Any supplementaries on this question? We are moving on. If you can tie it
into this question, I will allow it. It is a challenge. Does the hon. Lady have any supplementaries on
this one?

Next question.

Q422/2024
New post office –
Land-to-space ratios

260 **Clerk:** Question 422. The Hon. C Sacarello.

Hon. C Sacarello: Do the plans for the new post office at the site near the rowing clubs adhere
to the 80:20 ratio for land to space as laid out in section 4(1) of the Town Planning (Development
Control) Regulations 2019?

265 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, based on the information provided by the applicant on the application form, the proposed building would cover 90% of the plot.

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Hon. C Sacarello: Madam Speaker, I think that is interesting given that the images shown certainly look as if it is 100%, but we will, of course, accept the 90%, which is, nonetheless, below the 80:20 ratio. I was going to ask the Minister for Justice, who is absent today, who is also in charge of postal services, if they were looking to, ironically, disapply the planning regulations for Government, but –

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Madam Speaker: You have not tabled that question, he is not here, so ask any supplementary

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Hon. C Sacarello: Sorry, Madam Speaker, yes, therefore I am directing my question to the Minister for Business. Is it just being disappplied, this regulation, for government projects and not for commercial ones, or is it the case that the regulation is effectively defunct and that we need a new development plan, which is, after all, only five years late?

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Hon. G Arias-Vasquez: Madam Speaker, I will happily take this question in my capacity as Minister for Town Planning rather than for Business. The Regulations state that the Commission has the power to relax or dispense with the requirement. If you look at Section 3(3) of the Regulations, the Commission does have the power to relax that condition.

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Hon. C Sacarello: Yes, I understand that that is the case. Would the Hon. Minister be able to advance any information as to whether the new development plan is in the offing? Is it almost ready?

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Hon. G Arias-Vasquez: That is quite a stretch for the supplementaries, but I am happy to answer the question, Madam Speaker, in any event. The development plan should be announced in the next few days.

Madam Speaker: Next question.

Q423-24/2024

EV charging –

Capacity allowance in new developments; security and equitability of supply

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Clerk: Question 423. The Hon. C Sacarello.

Hon. C Sacarello: Will developers be advised by the GEA in advance of selling their new properties what the capacity allowance for EV charging their development will be afforded?

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Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 424.

Clerk: Question 424. The Hon. C Sacarello.

310 **Hon. C Sacarello:** How will the GEA manage the security and equitability of supply in line with the increasing demands from privately owned EV chargers?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

315 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, in answer to Question 423, yes, the Gibraltar Electricity Authority is committed to working closely with developers to ensure that they are informed about the capacity allowance for electric vehicles charging in their new developments.

320 Whilst the North Mole power station has sufficient capacity to be able to ramp up to deliver on anticipated demand, certain locations throughout Gibraltar face constraints in terms of grid capacity. These constraints will need to be managed in a way that balances the need of EV users with those of other critical services and which minimises costly infrastructure investments.

325 The Gibraltar Electricity Authority will be assisting in the development of EV charging strategies for different estates and car parks. This will involve an assessment of the existing capacity as well as determining what the maximum demand could be and advising accordingly. The charging strategy for each estate will most likely entail the installation of smart energy management systems that will control how much power a charging vehicle is drawing whilst taking into consideration the number of EVs connected at any given time. Residential estates may decide to allocate certain days to certain users so as to optimise charging times for residents, but in all cases
330 the demands on the electricity network will not exceed the capacity at the location in question.

335 As part of the EV Infrastructure Strategy, Government will be contacting all estate management companies directly to advise them of this policy. Furthermore, the Town Planning Act 2018 requires that all new developments provide a minimum of 20% of all parking spaces with active EV charging – that is with an actual charge point – and the remaining 80% with passive EV charging, i.e. with cabling routes necessary to allow for future EV charging point introduction. In addition, new developments will be required to provide a minimum of one ultrafast charger within the footprint of their development to future-proof EV charging needs. The Gibraltar Electricity Authority will work with developers in advance of selling the properties, allowing developers to plan accordingly and ensure that their developments are equipped to meet the needs of residents
340 with EVs, thereby catering for the future increased power demand.

345 The Gibraltar Electricity Authority is committed to ensuring the security and equitability of electricity supply for all customers, including those with privately owned EV chargers. To meet the increased demand, the Gibraltar Electricity Authority is implementing measures, such as upgrading infrastructure, expanding renewable energy sources and implementing smart grid technologies. Additionally, the Gibraltar Electricity Authority continues to work closely with stakeholders to develop policies and programmes that promote the fair distribution of resources throughout the use of smart energy management systems.

350 Following the publication of the Electric Vehicle Infrastructure Strategy in March of this year, how and when people charge is critical to developing said strategy to ensure this works for both users and the management of the wider electricity system. This strategy will become increasingly important with the rising number of EVs, which will result in an increase in total charging demand. It is undeniable that the daily peaks currently experienced on the electricity network would be exacerbated if a large portion of the EV charging coincided with those peaks. This would no doubt have implications for the electricity network, which would require costly upgrades.

355 In answer to Question 424, the use of smart grid technologies such as smart charging will enable a more effective use of our current network and make better use of our increasing amount of flexible renewable generation. It will enable people to charge their vehicles when it is most efficient for the electricity system. Smart charging will also allow the Government and the Gibraltar Electricity Authority to explore the introduction of time-of-use tariffs to incentivise EV
360 users to charge at times of low demand. Enabling demand-side response will also mean that the

Gibraltar Electricity Authority can optimise EV charging across different sites to safeguard the stability of electricity network.

365 Vehicle to grid technology, where electricity is exported from the vehicle battery to the grid, is already in use at many charging locations in other parts of the world, with this now being considered as part of the strategy. This technology can assist in balancing electricity demand and consequently reduce the related impacts on the electricity system costs.

370 Government will continue to work with the Gibraltar Electricity Authority to maximise the opportunity for flexibility from EVs whilst protecting the electricity grid and customers. Government will, therefore, soon introduce legislation requiring all new charge points to have smart capability.

Hon. C Sacarello: Madam Speaker, I would like to thank the Hon. Minister for her lengthy and informed reply. Much of the information is already in the EV Strategy.

375 There are a couple of areas of where the language is nuanced. With regard to Question 423, I would like to ask... Under the home charging policy, it says – and this paragraph was read out by the hon. Member – that residential estates may then choose to allocate certain days to certain users in order to optimise charging times for residents, but in all cases the demands on the network will not exceed the capacity at the location in question. Does that mean that everyone will be able to charge their cars, assuming a 100% capacity and everyone charges their cars
380 overnight ... that they will be allowed to? Or is it the case, as the next paragraph indicates, that estate management companies might advise about a policy to allocate certain days for charging? Will people not be able to charge their cars on certain days and have to wait till the next day to charge their car, or is it simply a case that it may just be more expensive in that case?

385 **Hon. G Arias-Vasquez:** Madam Speaker, I thought I had addressed that point in the answer. The answer is that it depends on the estate, it depends on the capacity of the estate and it depends on the capacity of the substation at each management estate. I cannot give a generic response because it depends on what the capacity at each individual estate is and what the grid capacity at each individual estate is. So, the specific answer to that question would be that it very much
390 depends on the capacity in the area where the estate is located.

Hon. C Sacarello: Madam Speaker, Question 424 referred directly to new builds, so we are talking about new developments occurring in three years' time or so. Is the Hon. Minister suggesting that for the new builds the strategy does not cater for the rollout of EV chargers for all
395 parking spaces and for all new apartments? Is there doubt in the ability of the GEA to roll this out for all new developments?

400 **Hon. G Arias-Vasquez:** Madam Speaker, once again, I thought this point had been addressed specifically in the answer to the question. The obligation is to provide 20% capacity at the moment but to ensure that all new builds have the capability of the 80% outstanding being met. So, in answer to that question – and I addressed that point specifically in the initial answer – 20% is the obligation that developers have at the moment, but they have an obligation to ensure the future 80% capacity is met.

405 **Hon. C Sacarello:** And that will be met by the GEA accordingly, will it?

Hon. G Arias-Vasquez: Madam Speaker, the way this works – and I am drawing from my previous life on this – is that it is incumbent on the developer to provide the capacity and to request from the GEA the capacity that is required.

410 **Hon. C Sacarello:** Madam Speaker, I would like to thank the hon. Lady for her reply. With regard to Question 424, what is the Government's plan to secure full supply to the estates, and by when would they expect to achieve this?

415 **Hon. G Arias-Vasquez:** Madam Speaker, Question 424 relates to government estates. Are you asking in relation to government estates?

Hon. C Sacarello: Government estates currently built.

420 **Hon. G Arias-Vasquez:** Government estates or private estates?

Hon. C Sacarello: Both.

425 **Hon. G Arias-Vasquez:** Okay. In relation to private estates, the ability is there for the management companies to approach us in order to try and include EV chargers within their development, and that is included in the strategy. Where the capacity is there, the private estates are able to draw on substations to include that capacity within their parking spaces.

430 As I have explained previously in other questions I have been asked, the difficulty that we have in government-owned estates is the number of parking bays that there are in the estates themselves and the interchangeability of the cars in the parking estates themselves, so it is a logistical exercise that provides the difficulty in some government estates to provide EV charging points.

435 **Hon. C Sacarello:** Thank you very much for that answer. As is already the case in some of the private estates, some people have applied and been allowed to install EV chargers and when the rest of the estate has applied they have been refused because there is a lack of capacity, which is probably normal. My question is, therefore, how is this, where private estates are involved, looking to be resolved? Is the onus on the management companies to use their sinking fund to pay for the extra supply through the GEA, or is this something that will be government funded?

440 **Hon. G Arias-Vasquez:** Madam Speaker, the instances that you are referring to are instances which I have already replied to in my answer. The GEA needs to look at the capacity of the grid and balance out the capacity versus the stability of the grid and the ability to provide that additional capacity. The ability to provide additional capacity would be, I presume, incumbent on the management estates. However, I do not know that because that was not specifically referred to in the question. If you want that specific information, I will have to go back and look at it. I suggest to the hon. Member that the question is quite vague and quite open. If he wants specific information as to the capacity of the grid and who has to provide that capacity, I suggest to the hon. Member that he specifically includes it in the question for next time.

450 **Hon. C Sacarello:** Madam Speaker, I think the question very clearly asked about the supply in line with increasing demands from privately owned EV chargers. Nonetheless, I will rephrase it for next time. Is it the case, therefore, that the Government is uncertain of how to deliver their EV strategy, given that there is no obligation for these estates to install such chargers?

455 **Hon. G Arias-Vasquez:** Madam Speaker, once again, we are also lawyers, not mechanical engineers. The level of specificity that the hon. Member is asking me I am more than happy to provide with advanced notice of the question. I do not believe that the question is specific enough for me to be able to answer that question directly.

460 **Hon. C Sacarello:** Finally, Madam Speaker, my last one on this. I fully understand that you are lawyers and not mechanical engineers, but nonetheless, you are Government. Is Government serious about implementing the EV strategy, or not?

465 **Hon. G Arias-Vasquez:** Madam Speaker, because we are Government we need notice of questions, so I strongly suggest that the questions be more specific in order to enable me to provide quite specific answers. I have never held back from providing information where that information is requested and available, so I would strongly suggest that the questions are broken down in a manner where I know exactly what the hon. Member is requiring me to answer and in that instance I will be able to answer fully the questions that the hon. Member is asking me.

470 **Madam Speaker:** Yes, the Hon. Mr Bossino.

475 **Hon. D J Bossino:** If I may, Madam Speaker, at the end of the Hon. Minister's reply to my hon. Friend's Question 424 ... I think it was in the context of smart readers, where I think the Hon. Minister referred to the introduction of legislation. My question is: when is it the Government's intention to introduce a Bill to this House in that respect?

480 **Hon. G Arias-Vasquez:** Madam Speaker, we are looking at the strategy at the moment. As soon as the strategy is put in place and as soon as we have further clarity on some of these issues, the legislation will be introduced. I am unwilling to commit to a timeline at this point in time.

Madam Speaker: Next question.

Q425-27/2024

Building control approval and granting of planning permission Average times from application to approval

Clerk: Question 425. The Hon. D J Bossino.

485 **Hon. D J Bossino:** What is the average time taken from the submission of Building Control application to approval being granted?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

490 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will answer this question together with Question 426 and 427.

Clerk: Question 426. The Hon. D J Bossino.

495 **Hon. D J Bossino:** What is the average time taken from the submission of an online application to permission being granted?

Clerk: Question 427. The Hon. D J Bossino.

500 **Hon. D J Bossino:** What is the average time taken from the submission of a full planning application to permission being granted?

Clerk: Answer, the Hon. the Minister for Health, Care and Business.

505 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, during the period 1st January 2020 to 31st December 2023, the average time taken from the date an application was validated to Building Control approval being issued was 167 days.

During the period 1st January 2020 to 31st December 2023, the average time taken from the date that an application was validated to outline planning permission being issued was 228 days.

510 During the period 1st January 2020 to 31st December 2023, the average time taken from the date an application was validated to full planning permission being issued was a 146 days.

515 **Hon. D J Bossino:** I think the answer to Question 427 was that from submission to full planning application it is 146 days. I am grateful to the Minister for the provision of that, which I will analyse in greater detail and carry out the mathematics, particularly because what I had in my mind was more on a monthly basis; I can more or less gauge it on my feet, but I would rather do it a bit more carefully later on. It strikes me, from my personal point of view, that the process in total can take a fair bit of time. Does she have any comment to make in relation to that? If she were to agree with me in the comment that I just made, could I ask whether the Hon. Minister has any intention, while she holds this office, to improve the turnaround of these separate applications?

520 **Hon. G Arias-Vasquez:** Madam Speaker, I am very grateful for the opportunity to expand on this. First of all, the one thing that I think is necessary to clarify is that these periods do not run separately, they run concurrently. So, it is not a case of it taking 167 days to get Building Control permission and then 228 to get outline planning. The two periods run concurrently. That is the first point to make, so I think that significantly reduces the time period that you need to work out in terms of months.

525 Do I think that it takes a long time? It takes a long time because every single department needs to be consulted on to ensure that, for example, the fire regulations are being met, health and safety is being met, the civil engineers are happy in Building Control, etc. When an application is received, it then goes out to numerous departments, so it is the time taken to consult with the different departments, with the Traffic Commission etc. That is the reason why it takes time and I am sure the hon. Member would agree that it is better that everyone is consulted and that the application is validated ... I hesitate to use the word 'validated' because it has been used in the reply, but that when the application is heard everyone has been consulted appropriately and thoroughly because these are important issues that we are talking about.

530 However, in response to your question as to whether whilst I am in this in this office I am looking at ways to improve that time, I think the answer that the hon. Member will get is that we are always looking at ways to improve, we are always looking at ways to cut down the times and we are fully conscious of the fact that the developers would like that streamlined. However, what I would need to stress is that the consultation process is what takes the longer time.

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Hon. D J Bossino: I understand what the hon. Member ... Minister – what is the formality? I am a bit confused; to be on the safe side, what the Hon. Minister – says. I do not think I caught what the Hon. the Chief Minister said.

545 **Madam Speaker:** You did not need to. Carry on.

550 **Hon. D J Bossino:** Basically, the cumulative time is around – if one takes the longest period that she has quoted, which is in answer to Question 426 – 228 days, which from my rough calculation is slightly in excess of seven months, give or take. She says that the Government will always be looking at ways of improving. One of the ways that the Government can do that, if I can drill down on that comment that the Hon. Minister has made, is by further expenditure on the public purse to, for example, employ more people, more civil servants. Is that what the hon. Member is looking at doing? We are hearing reports, in particular in the context of Building Control, where there is a complaint that they are understaffed, and that could be the reason why it is causing some delay,

555 if I can put it in those terms. Is the hon. Member looking at employing, for example, more staff in
the various departments which could improve the ways, as she put it earlier in her answer?

Hon. G Arias-Vasquez: Madam Speaker, the Building Control and Town Planning departments
560 are at full complement at this moment in time. I think, in the last week, to be perfectly transparent,
there might have been someone handing in their notice and we are already looking at replacing
them. Building Control is at its full complement at this point in time. However, there are many
ways to look at how that efficiency can be improved. I am not going to commit to increasing
complement, I am not going to commit to increasing the budget in that area, but we are looking
565 at different ways in order to make that department, Building Control and Town Planning, work
more efficiently.

Hon. D J Bossino: There is a lot to unpack from what the hon. Member has said. One thing is
to say 'at full complement', but she is not willing to commit to increase the complement. It does
570 not necessarily mean that she will not at some future point in time, if she is persuaded that it
needs a greater complement, is the way I interpret what the hon. Member is saying. But when she
is saying 'increasing efficiency' in her response, how is she proposing to do that? If one takes a
snapshot of where we are now, there are delays. I think we can agree that across the floor of the
House. There is an intention from the Government's policy position to improve the efficiency of
the processes. The Government is not willing, it seems, at this stage, to increase the complement
575 or spend more money on it to improve the efficiency of the system, so my question is: how does
the hon. Member propose to do what she intends to do, which is to improve efficiency?

Hon. G Arias-Vasquez: Madam Speaker, it would make it sound that we agree that there are
580 inordinate delays. The time that is taken is a time taken for consultation and, as I stated at the
outset, I think the hon. Member would agree that different departments have to be consulted.

We are talking about construction here; we are talking about significant projects here. Yes,
there is a time taken to get back to applicants but that time is time taken for consultation. Do we
think that that time could be improved? Absolutely. Do I think that there are different ways that
that could be improved? Absolutely. Are we constantly in discussion with the town planners for
585 that to be improved? Absolutely. Have we improved the number of town planners in the last 11
years? Absolutely. In fact, we have doubled the number of town planners in the last 12 years. Is
there a need to consistently improve the Town Planning and Building Control departments?
Absolutely. Are we looking at them? Yes. Does that mean that we will increase the complement?
Possibly. I am not going to commit to increasing the complement or otherwise. We will first look
590 at streamlining the application process. We are looking at ways that we can make the process
more efficient. For example, one thing that takes time is the communication between Town
Planning and the Traffic Commission. Does that communication need to be made more efficient?
Does the Traffic Commission need to meet more often? What is the role of these different
Commissions in the present day and age? So, when I say we are looking at efficiencies, it is not
595 necessarily only looking at complement, it is looking at where the time is taken to respond to
applicants and looking to see whether that can be improved in different ways. If there is a need,
we will look to increase our complement but it is not necessarily the way that it might need to be
done – if that answers your question.

Hon. D J Bossino: Yes, it has answered the question, but may I ask the hon. Lady whether she
600 is able, now, to give us an indication as to when she thinks those efficiencies and those
improvements, which she says she is looking at, will come into play? I will keep on asking these
questions, when the rules allow, because she has said things which I think are still slightly woolly.
I will ask her and I will make an attempt at pinning her down as to timings: when does she think
605 that she will be able to come to this House and provide answers as to the efficiencies that she
wants to implement?

Hon. G Arias-Vasquez: Madam Speaker, this is an ongoing process, it is an ongoing discussion with Town Planning and Building Control, so no, unfortunately I cannot commit to a date.

610 **Madam Speaker:** One more.

Hon. D J Bossino: In relation to Question 425, specifically with Building Control, and it is a specific question, how many engineers are available in that particular department? I understand that that is one of the causes of delay.

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Hon. G Arias-Vasquez: Madam Speaker, that specific answer can be obtained from the estimates in the Budget Book. However, again, if notice is given of the question, I will bring the Budget Book myself, I will do the research myself and I will provide the hon. Member with the answer.

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Madam Speaker: The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: In relation to Questions 425 and 426 specifically, the hon. Lady mentioned in her answer, to I think it was the first supplementary, that these time limits, the 167 for Building Control and the outline 228, they need to be considered concurrently – it is not additional. I can understand that in relation to Questions 425 and 426, but surely that is not the case in relation to Questions 426 and 427. In Question 426 it is 228 days for outline planning and then 146 days for full planning application. Certainly, from my days chairing the Planning Commission, unless things have changed, while in those days some people would make an application for full planning permission, the vast majority would first do outline. Is it the fact that the answer really is that, insofar as Questions 426 and 427, they are not concurrent, they are consecutive, or that it overlaps in relation to some applicants but not others and that it may be that in the case of some applications the outline application may have taken an average of 200-odd days and then on top of that, obviously, there is then a process to do the full planning application? Or is it that she has defined the ...? I did not quite catch the original answer. I cannot recall it exactly because I do not have it in front of me. Did she define it from submission after the outline was granted? If it was not like that, if it was more generic, can she give us, perhaps, a bit more information about that understanding and how those processes work?

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Hon. G Arias-Vasquez: Madam Speaker, the answer to the question provided is an average of everything. In order to answer that question fully, we have to understand that sometimes applications go straight to full planning and sometimes applications go to outline planning and there is a mix of them both, so when we have given those figures we have given an average and Building Control applications can run concurrently to either outline or full – it depends.

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One thing that I have forgotten to mention in reply to the hon. Member opposite is that these periods include statutory periods for objections, so these periods will also have built into them a statutory period in which notice periods are given to residents, for example, in the area. There is a statutory period built into the application in which people can object and then there is a statutory period in which people can file applications. So, built into this and built into the consultation which I referred to earlier are also statutory periods which allow residents of Gibraltar to object to different parts of the building application.

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So, in answer to the Hon. Leader of the Opposition, it is an average that has been provided and that average can run concurrently with the Building Control application. I understand the premise of your question, but the Building Control application can run either concurrently with outline or with full, or there can be outline and then full, but given that what we have provided is an average that can be either. Obviously, if you go straight to full planning it will take longer because further checks have to be done and the time periods also have to be built in, but if you have an application

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which goes first to outline and then to full, the statutory periods for objectors have to be built into both those applications, oftentimes.

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Hon. Dr K Azopardi: So, when the hon. Lady said that they were concurrent – I understand what she is saying about averages – in fact, just taking an average, if you go to outline first it is possible, indeed probably likely, that it is going to be longer because if you then do the full planning application you have to add that period on. The point about my supplementary is that it seems strange, to me, to have a shorter period as an average for full planning application to the outline, because otherwise, certainly in my experience, if that were the case, everyone would just go to full planning. Some people do, as the hon. Lady does say, but the reality is that, actually, it takes longer sometimes to get the outline, the in-principle approval. Once you get the in-principle, it is quicker to get the full, but because people do the outline first and then do the full, inevitably, does she agree that while these are averages, in reality, if you are first doing the outline, you might be doing it concurrently to the Building Control application but it is not concurrent to the full, so if you are then doing the full it may take longer than the periods she suggests? So the periods in Questions 426 and 427 may, in fact, be consecutive as an average.

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Hon. G Arias-Vasquez: Madam Speaker, in order to break that down, once again, the Hon. Leader of the Opposition is correct in saying that sometimes applications go to full and he is correct in saying that sometimes the outline planning takes longer because, in fact, that is where the meat of the application is often heard. But there are many times when between outline and full the application itself changes. If the application itself changes then that is what feeds in, and it is a very common occurrence that between outline and full the nature of the application changes or the height of the building changes. There are many things that can happen between outline and full that then cause a subsequent period to occur. If we look at the date for Building Control permits to be provided, the Building Control permit has to be provided on the full application. The figure is somewhere in between the two days, so I think that gives you an indication of the average time to hear an application, whether it is going to outline initially or full, but it is difficult to drill down to the level that the hon. Member is asking me for because the figures that we have here are averages and, as I have said, some applications go to outline and some applications go to full, so it is not necessarily an option available to us to drill down on these figures.

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Madam Speaker: Next question.

Q428-29/2024

Gender identity services for children – Impact of Cass Review; use of puberty blockers

Clerk: Question 428. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: Madam Speaker, what impact will the publication of the Cass Review on Gender Identity Services for Children and Young People have on the availability and access to such services to people resident in Gibraltar via the Gibraltar Health Authority?

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Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Hon. Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will ask this question together with Question 429.

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Clerk: Question 429/2024. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: Has the Gibraltar Health Authority taken a decision, like NHS England, to stop the routine use of puberty blockers for gender dysphoria in children?

705 **Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Hon. Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the publication of the Cass Review has served to strengthen the approach that is adopted by the GHA. Even before the application of the Cass Review, the GHA was offering a holistic assessment of
710 children and young people with gender dysphoria to create an individualised care plan. The assessment includes screening for neuro-developmental conditions, including autism spectrum disorder, and a mental health assessment for any allied conditions such as anxiety and depression. The GHA has never used puberty blockers as a routine, or even in exceptional circumstances, to manage gender dysphoria in children.

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Hon. Dr K Azopardi: I am grateful for that very clear answer in relation to Question 429. If I can just pick up on that before I ask about other things, I assume that that policy will continue, that there will not be a routine use of puberty blockers on gender dysphoria. Is that right?

720 **Hon. G Arias-Vasquez:** Yes, Madam Speaker, we can confirm that that will continue to be the policy.

Hon. Dr K Azopardi: So, to that extent there is no real impact of the Cass Review in relation to that. For the purposes of anyone listening who might not be familiar with the Cass Review, can I just say, as a sort of preface to my next question, that the review was commissioned by NHS
725 England to make recommendations on how to improve gender identity services and ensure that children and young people who were questioning their gender identity or experiencing gender dysphoria received a high standard of care. May I just ask the hon. Lady to give us a bit more detail about the approach the GHA would take on the Cass Review conclusions and so on? I appreciate
730 that she said that before the Cass Review had been published the GHA already had an individualised care plan, and, indeed, in previous questions to her immediate predecessor we had a discussion about protocols in this very sensitive area.

This is a notoriously difficult area, but I think the Cass Review is a very extensive and comprehensive report. It would be impossible to do granular supplementaries on it, but I am trying
735 to understand a bit about having that review reported in a fairly detailed way, whether and to what extent the GHA will consider those conclusions in the context of planning its own services in Gibraltar, given that her predecessor did say – to, I think, me – in answer to a previous question, that there was management of the initial care here, but of course any delivery of substantive services would be in the United Kingdom.

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Hon. G Arias-Vasquez: Madam Speaker, I am very pleased to be able to say that a lot of the recommendations of the Cass Review were actually being implemented in Gibraltar before the Cass Review was published, as has been stated by the Hon. Leader of the Opposition. I believe that a lot of the recommendations that are contained in the report and in the more granular detail
745 that has been looked at in the report will actually feed into the services that we provide.

To further answer the question, mental health practitioners are now specialising in this area. We have a consultant from the UK specialising in this area who is coming to Gibraltar to advise us specifically in this area because, as the Leader of the Opposition has rightly said, this is a very important area at the moment which is receiving a lot of attention. The GHA is very much looking
750 to provide care plans to teenagers requiring these services. As I said, we are looking at a slightly broader perspective than simply this. We are looking at other issues which sometimes and often come hand in hand with these issues, as I have alluded to previously, such as autism spectrum

disorder and other conditions, but we are looking to also manage allied difficulties and conditions which are commonly co-morbid with gender dysphoria.

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Madam Speaker: Next question.

Clerk: The Hon. the Chief Minister.

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Chief Minister (Hon. F R Picardo): Madam Speaker, noting the hour, I move that the House should now recess to start the process of saying goodbye to David Steel, who has been Governor of Gibraltar for the past almost four years. I know it will be a sad occasion for many. He has served Gibraltar with distinction in the role that Her Majesty the Queen asked him to discharge among us and I know that today will be a sad day.

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I move that the House should now recess until five o'clock this afternoon. We would usually take my questions at three o'clock in the afternoon, but the jet that is to take Sir David is scheduled for ten past three, so accounting for the usual delays and in order not to keep the House, I would propose that we come back at five o'clock this afternoon.

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Madam Speaker: We will recess until 5 p.m. this afternoon.

The House recessed at 11.00 a.m.



PROCEEDINGS OF THE GIBRALTAR PARLIAMENT

AFTERNOON SESSION: 5.00 p.m. – 5.43 p.m.

Gibraltar, Thursday, 23rd May 2024

Contents

Procedural – Addressing Members through the Chair	2
Questions for Oral Answer	2
Chief Minister	2
Q467/2024 Disability benefit – Applications from 2019 to date.....	2
Q468-71/2024 Customs – Policy re ongoing training processes	3
Q467/2024 Disability benefit applications from 2019 to date – Supplementary questions....	4
Q472/2024 Gibraltar Regiment Act 1988 – Date for reading of Bill to enable amendments ..	5
Q473/2024 Smoking ban for individuals born in or after 2009 – Plans to introduce legislation	5
Q474/2024 Eastside project – Whether going ahead	6
Q475/2024 Senior officer, Housing Department – Whether position opened as a vacancy ...	6
Q476/2024 Former Attorney General Reginald Rhoda QC– Whether currently engaged by Government.....	7
Q477-80/2024 Gibraltarian status – Applications pending; applications granted over last 10 years; policy re length of validation of red ID cards; red cards issued to former holders of civil registration cards.....	8
Q481/2024 Money recovered in state aid – Location.....	10
Q482-83/2024 Treaty on new relationship with the EU – Current state of negotiations; House of Commons European Scrutiny Committee	12
Answers to Written Questions.....	15
Adjournment.....	15
<i>The House adjourned at 5.43 p.m.</i>	15

The Gibraltar Parliament

The Parliament met at 5 p.m.

[MADAM SPEAKER: Hon. Judge K Ramage GMH *in the Chair*]

[CLERK TO THE PARLIAMENT: J B Reyes Esq *in attendance*]

Procedural – Addressing Members through the Chair

Madam Speaker: Before we continue with questions this afternoon, just a gentle reminder that hon. Members should address other hon. Members through the Chair. It is wrong to address another Member as 'you'. In the course of this session, since Tuesday, there have been offenders aplenty on both sides, so with regard to the use of 'you', I ask hon. Members to be aware.

Questions for Oral Answer

CHIEF MINISTER

Q467/2024

Disability benefit – Applications from 2019 to date

Clerk: Chief Minister's questions. Question 467/2024. The Hon. the Leader of the Opposition on behalf of the Hon. A Sanchez.

Hon. Dr K Azopardi: Madam Speaker, with your leave, I am going to ask this question, as my colleague had a family thing at lunchtime and she will be a bit later today. Sorry?

Madam Speaker: I was amused by the family 'thing'. It is a wide-ranging adjective, so I shall not ask for further and betters. Let's carry on.

Hon. Dr K Azopardi: Yes, indeed, it was used deliberately.

Madam Speaker, can the Government provide the following information regarding disability benefit applications for the year 2019 to the present date: (a) the total number of applications; (b) the total number of rejected applications; and (c) the rejection rate as a ratio percentage to the total number of applications made for disability benefit?

Clerk: Answer, the Hon. the Chief Minister.

Chief Minister (Hon. F R Picardo): Madam Speaker, I now hand over a thing with the information request at (a) and (b). The request at (c) simply asks that public servants should do the hon. Member's work for her.

Madam Speaker: Let's move on to the next question and allow supplementaries to follow once the hon. Members have had a look at the schedule.

Q468-71/2024

Customs –

Policy re ongoing training processes

Clerk: Question 468. The Hon. J Ladislaus.

30 **Hon. J Ladislaus:** Madam Speaker, can the Hon. the Chief Minister outline the policy in respect of ongoing training processes to be undertaken by Customs?

Clerk: Answer, the Hon. the Chief Minister.

35 **Hon. Chief Minister (Hon. F R Picardo):** Madam Speaker, I will answer with Questions 469 to 471.

Clerk: Question 469. The Hon. J Ladislaus.

40 **Hon. J Ladislaus:** Madam Speaker, what policies and procedures are in place to deal with individuals who fail ongoing training requirements within Customs?

Clerk: Question 470. The Hon. J Ladislaus.

45 **Hon. J Ladislaus:** Madam Speaker, when will reformation works commence at the Frontier and what has been put in place in the interim to ensure the health and safety of customs officers on shift at the Frontier post?

Clerk: Question 471. The Hon. J Ladislaus.

50 **Hon. J Ladislaus:** Madam Speaker, is the Customs complement currently intact? If not, can the Hon. the Chief Minister provide a breakdown as to the number of customs officers on long-term sick leave and the number of customs officers suspended pending the conclusion of disciplinary proceedings?

55 **Clerk:** Answer, the Hon. the Chief Minister.

60 **Hon. Chief Minister:** Madam Speaker, following a strict selection process during which the applicants are assessed on their performance and only the top-scoring individuals proceed to an interview stage, the successful candidates then embark on a seven-week induction training course into HM Customs, a hugely valued and important Department of His Majesty's Government of Gibraltar that we, on this side of the House, are clear is a law enforcement agency, although the GSD insisted that they were not. This provides core knowledge for the officers to deploy wherever required in a multitude of roles in the enforcement division or the commercial and administrative division of the Department.

65 Officers who do not achieve the required standard will not be allowed to perform a particular task and the opportunity given to someone else. When in the case of specialised work, the officer may be removed from a particular section and lose any allowance, if applicable.

70 Refurbishment works – the Reformation happened many centuries ago – at Four Corners Station will commence at the earliest opportunity. Maintenance work has occurred in order to

ensure that health and safety of all staff working in the building, including BCA, Tourist Board and Taxi Association staff, are well protected. This will continue as and when required before the major project begins.

75 Madam Speaker, there are currently six vacant posts at HM Customs. Additionally, one officer has been on long-term sick leave and there are no officers suspended on disciplinary matters. As hon. Members will know, the complement of HM Customs has increased by 58, from 113 to 171, under this administration.

80 **Madam Speaker:** Next question.

Clerk: Question, 472. The Hon. E J Reyes.

Q467/2024

**Disability benefit applications from 2019 to date –
Supplementary questions**

Hon. Dr K Azopardi: With your leave, Madam Speaker, I am ready to go back to the supplementaries on the previous question, if that is okay.

85 **Madam Speaker:** Although Question 472 has been called, we will revert to Question 467 with supplementaries.

Hon. Dr K Azopardi: I am grateful, Madam Speaker. I am in your hands if you would prefer to go to Question 472.

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Madam Speaker: No, let's finish with Question 467.

Hon. Dr K Azopardi: I note the rather unhelpful answer given by the Chief Minister in relation to (c), which says, 'We are not going to give you that because you can work it out.' Of course, the hon. Lady who posed the question could have worked it out if she had the information, but she did not have the information – that is why she was asking it. Now that we have at least (a) and (b), of course we can work it out, so we are grateful, at least, to that extent.

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100 The column of applications received clearly totals a significantly larger number than the applications disallowed. Does that imply that everything else has been allowed? Does the Chief Minister have a figure, of those applications, how many are still pending?

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Hon. Chief Minister: Madam Speaker, I do not think I have been unhelpful at all because, as the hon. Gentleman has said, once (a) and (b) have been provided, (c) can be worked out. I am sure he will agree with me that it is not in the interest of the taxpayer, that public servants simply be required to work out percentages for hon. Members opposite. They are entitled to information. They have had the information and then they can, with that information, work out the percentages. I, therefore, do not accept that we are being unhelpful.

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Madam Speaker, the information I have suggests that those that have not been disallowed have been allowed.

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Madam Speaker: Next question.

Q472/2024

**Gibraltar Regiment Act 1988 –
Date for reading of Bill to enable amendments**

Clerk: Question 472. The Hon. E J Reyes.

115 **Hon. E J Reyes:** Madam Speaker, when does Government intend to read in Parliament Bill 07/2024 in order to, hopefully, then enact amendments to the Gibraltar Regiment Act 1988?

Clerk: Answer, the Hon. the Chief Minister.

120 **Chief Minister (Hon. F R Picardo):** Madam Speaker, the Bill is on the Order Paper ready to be read. I envisage no delay in it being taken.

125 **Hon. E J Reyes:** I am grateful, Madam Speaker. The deadline for posing questions was actually before the Agenda Notice was issued by the Clerk, so I had to pose this... I did notice on receiving the Agenda Paper, although it is on the Order Paper. Does the Chief Minister have, at least, some inclination whether it will be taken this session or next month? The reason why I ask, if I may explain, is it has sections that affect pensions and so on, and for those who have either just retired or are about to retire the enactment date does have a financial impact on the outcome, hence why I am putting it forward. The members of the Regiment are our constituents and have expressed that concern to me.

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Hon. Chief Minister: Madam Speaker, the hon. Gentleman did not have to wait for the Agenda to be published to calculate when the six weeks since publication had elapsed and that, therefore, the Bill would be on the Order Paper.

135 I have been very concerned to bring this Bill as soon as possible. I have answered questions on it in the past and I have said in the past that as soon as we were able to take it, we would. Nothing has changed.

Madam Speaker: Next question.

Q473/2024

**Smoking ban for individuals born in or after 2009 –
Plans to introduce legislation**

140 **Clerk:** Question 473. The Hon. D J Bossino.

Hon. D J Bossino: Does the Government have any plans to introduce legislation similar to that being pursued in the UK in relation to the smoking ban for those individuals born in or after 2009?

145 **Clerk:** Answer, the Hon. the Chief Minister.

Chief Minister (Hon. F R Picardo): Madam Speaker, as I have already said in this House and outside it, further information will be announced at the Budget debate later this year.

150 **Madam Speaker:** Supplementaries? You don't have to. *(Laughter)*

Hon. D J Bossino: *[Inaudible]* Could the Hon. the Chief Minister – *(Interjection)* Madam Speaker, it is 5 p.m.

Madam Speaker: It is the Speaker's fault.

155 **Hon. D J Bossino:** By way of provision of further information, can he give an indication as to where his or his Government's thinking is in relation to this? Is it more likely to introduce a similar ban to what I think has already been introduced in the UK, or less likely? Is he able to provide any further information?

160 **Hon. Chief Minister:** Madam Speaker, I refer the hon. Gentleman to the answer I gave a few moments ago.

Madam Speaker: Next question.

**Q474/2024
Eastside project –
Whether going ahead**

Clerk: Question 474. The Hon. D J Bossino.

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Hon. D J Bossino: Please advise whether the current Eastside project is going ahead.

Clerk: Answer, the Hon. the Chief Minister.

170 **Chief Minister (Hon. F R Picardo):** Madam Speaker, the Government is not the developer of any aspect of the current Eastside project.

Hon. D J Bossino: This is a matter of public interest and I have had semi-reliable information to the effect that the current investor has pulled out. Does he have any information that he can provide – he is sniggering and laughing, which I think is slightly disrespectful, but never mind – across the floor of the House?

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Hon. Chief Minister: Madam Speaker, I have no such information but it is probably information which is as reliable as most of the information that he seems to rely on these days.

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Madam Speaker: Next question.

**Q475/2024
Senior officer, Housing Department –
Whether position opened as a vacancy**

Clerk: Question 475. The Hon. D J Bossino.

185 **Hon. D J Bossino:** Was the position of senior officer at the Housing Department, which has recently been filled, opened up as a vacancy?

Clerk: Answer, the Hon. the Chief Minister.

Chief Minister (Hon. F R Picardo): Madam Speaker, no.

190 **Hon. D J Bossino:** Why not?

Hon. Chief Minister: Madam Speaker, they never are.

195 **Hon. D J Bossino:** I have never been in Government myself but I thought that positions of this nature are opened up as vacancies in order to give the opportunity to other civil servants to make an application for that post. That is my understanding. Is he telling me that my understanding is incorrect?

200 **Hon. Chief Minister:** Yes, Ma'am.

Madam Speaker: Next question.

Q476/2024

**Former Attorney General Reginald Rhoda QC–
Whether currently engaged by Government**

Clerk: Question 476. The Hon. D J Bossino.

205 **Hon. D J Bossino:** Is the former Attorney General, Mr Rhoda, being employed or otherwise engaged by the Government; and, if so, on what terms?

Clerk: Answer, the Hon. the Chief Minister.

210 **Chief Minister (Hon. F R Picardo):** Madam Speaker, Mr Rhoda is not being employed by the Government. 'Engaged' has no legal meaning in employment law.

215 **Hon. D J Bossino:** The Hon. the Chief Minister says, 'the Government'. Is it possible if one expanded that remit to include the GDC or other possible entities, where somehow Mr Rhoda is walking into government premises and providing a service to the Government in its widest possible terms and receiving remuneration for it?

220 **Hon. Chief Minister:** Madam Speaker, yes, the answer applies to all aspects of the Government, but what the hon. Gentleman has described is not just what happens in the context of employment, which is what his question was about.

Hon. D J Bossino: Is there any other form of contractual relationship which the Government has entered into, or any other agency – GDC and all the rest of it – with Mr Rhoda, such that he is providing services to it?

225 **Hon. Chief Minister:** Yes, Madam Speaker, exactly the same terms as on which we have services provided to us by TSN.

230 **Hon. D J Bossino:** Can he provide any further information as to that contractual relationship – in other words, the duration, what payments he receives and what services Mr Rhoda is providing in exchange?

Hon. Chief Minister: Instructions on a legal matter, Madam Speaker.

235 **Hon. D J Bossino:** Without, of course, divulging the detail of that, can he provide us with information which does not breach any confidentiality but at least provides us with some information as to what that legal matter is?

Hon. Chief Minister: I would have to take advice on that, Madam Speaker.

240 **Madam Speaker:** Next question.

Q477-80/2024

Gibraltarian status –

**Applications pending; applications granted over last 10 years;
policy re length of validation of red ID cards;
red cards issued to former holders of civil registration cards**

Clerk: Question 477. The Hon. the Leader of the Opposition.

245 **Hon. Dr K Azopardi:** Madam Speaker, how many applications for Gibraltarian status were pending on 13th May 2024?

Clerk: Answer, the Hon. the Chief Minister.

Chief Minister (Hon. F R Picardo): Madam Speaker, I will answer with Questions 478 to 480.

250 **Clerk:** Question 478. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: How many people have applied and been granted Gibraltarian status under the Gibraltarian Status Act over the last 10 calendar years, broken down by each calendar year?
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Clerk: Question 479. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: What is the policy on the length of issue and validity of red ID cards?

260 **Clerk:** Question 480. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: Of the red ID cards granted for the first time to persons who had previously held civil registration cards in the years 2016-23, how many were granted to former holders of blue, magenta or green civil registration cards in the years 2016-23, broken down by each calendar year and by the number of former holders of blue, magenta or green civil registration cards by each of those years?
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Clerk: Answer, the Hon. the Chief Minister.

270 **Hon. Chief Minister:** Madam Speaker, as at 13th May 2024 there are no pending applications for Gibraltarian status at the CSRO. The Department is, however, currently processing the following number of applications, which are at various stages of the formal administrative process: section 9 applications – we have 125 in process; section 5 applications – we have 29 in process.

275 With respect to Questions 478 and 480, I now hand over a schedule with the information requested.

Answer to Question 478/2024

	Under Section 5 (Descent)	Under Section 9 (10 years)
2014	618	60
2015	670	113
2016	570	115
2017	497	49
2018	448	111
2019	393	91
2020	219	1
2021	487	117
2022	592	234
2023	302	45
2024	88	0

Answer to Question 480/2024

	Blue to Red	Green to Red	Magenta to Red
2016	243	127	0
2017	247	115	0
2018	197	121	0
2019	193	71	0
2020	202	108	0
2021	361	80	0
2022	701	99	5
2023	569	94	9

Madam Speaker, in relation to Question 479, I can confirm to the House that there is no policy which is relevant.

280 **Hon. Dr K Azopardi:** I see. May I just ask on Question 479, while I get that schedule: if there is no policy that is relevant in relation to the length of issue and validity of red ID cards, can he let me know what is the length of issue and validity? Is it a standard length of issue, or is it not a standard length of issue?

285 **Hon. Chief Minister:** Madam Speaker, hon. Members say that we are unhelpful, but they are expected to know certain basic rules. The EID Card Regulations 2015 provide, in section 10, that an identity card will be valid from the date of issue for a period of 10 years. That is 10(1)(a). It is a legal provision and I never suggest that the hon. Gentleman is anything other than a very competent member of the legal profession.

290 **Hon. Dr K Azopardi:** I am aware of that, but that is why I phrased the question as to whether there was a policy on the length of issue and validity of red ID cards, because I am certainly aware of cases where red ID cards have not been issued for 10 years. I have seen a number. Using a very home example, in my own case, my latest red ID card is for 10 years but the one before that was for three, so I thought that might have been a policy issue and that is why I phrased the question
295 in that way. If there has not been, then I assume that maybe that was just a simple administrative error.

300 **Hon. Chief Minister:** Madam Speaker, I checked and the information that I have is that nobody can point to any red ID card having been granted for any shorter period other than in the context of children, for example, where sometimes those are for different periods, but not in respect of adults.

305 **Hon. Dr K Azopardi:** I have in my hand my expired ID card. I will show it to him behind the Speaker's Chair, if he wishes. It was issued in 2021 and expired a few weeks ago. I have obtained a new one for 10 years, but this one was a three-year card. If the officials are saying there are no examples, I know of several and indeed it happened to me. I am happy to show it to him so that he can check. I am here on my feet in questions and answers, and I have to ask a question. I think what he is saying is that certainly he is not aware that there has been any issue and that certainly if that has happened it is not a deliberate policy of the Government. That is right, I think, isn't it?

310 **Hon. Chief Minister:** Madam Speaker, not a deliberate policy and not something that we recognise. I do wonder whether the hon. Gentleman is confusing aspects of this. I do not know his personal circumstances, but the card that he may have had for three years may be one that he was granted, for example, because he changed address seven years into the validity of another card and he has had it with the new address for the remainder of the three years. But nobody at
315 the CSRO is able to identify any policy whatsoever or the grant of any such shorter-period red ID cards. I will read him the message: 'The team has confirmed that never, even before my time here. Have checked with [X] and he has been here since these Regulations were enacted and can confirm that no card has been given with a different validity.'

320 **Hon. Dr K Azopardi:** I certainly have not changed my address in the last three years. Be that as it may, I have my card and I am happy to show it to him behind the Speaker's Chair. I appreciate that at this stage we are not getting any further. I think at least we have clarified that there has been certainly not a policy change altering what is the regulation which he himself has quoted for me.
325

Madam Speaker: Does the hon. Member require some time to study the schedule before posing a supplementary?

330 **Hon. Dr K Azopardi:** Perhaps just a couple of minutes.

Madam Speaker: We will move on to the next question and revert to this one.

Q481/2024
Money recovered in state aid –
Location

Clerk: Question 481. The Hon. the Leader of the Opposition.

335 **Hon. Dr K Azopardi:** Madam Speaker, can the Government advise what has become of the £24 million recovered in state aid in September 2022 that the Chief Minister stated in his 2023 Budget reply was kept on deposit at the time, and whether it has been used for any purpose wholly or in part, and, if spent or transferred, to what purpose or entity?

Clerk: Answer, the Hon. the Chief Minister.

340 **Chief Minister (Hon. F R Picardo):** Madam Speaker, the £23,454,019.50 received on
30th September 2022 represents funds received in favour of His Majesty's Government of
Gibraltar pursuant to the judgment issued by the European Union's General Court on 6th April
2022 in relation to Commission Decision EU219/700 19th December 2018 on the state aid stated
345 case 349142013/C implemented by the United Kingdom as regards the Gibraltar corporate income
tax regime. As at 31st March 2024, an amount of £9 million has been transferred from the funds
received to revenue on the advice of the Commissioner of Income Tax. The remaining balance will
be held on deposit until the investigation by the EU Commission has concluded.

350 **Hon. Dr K Azopardi:** In his Budget speech, the Hon. the Chief Minister said that it had been
placed on deposit and not taken into revenue because there was, to quote him, some doubt as to
whether this will be challenged. I think what he has indicated in his answer is that the risk of
challenge is not over, because the rest of it has been kept on deposit until that possibility of a
challenge is over, but that they have still, nonetheless, transferred £9 million into revenue. Can I
understand why there has been a change of position there, given what he said in the Budget?

355 **Hon. Chief Minister:** I do not think there has been a change of position, Madam Speaker. What
I said in the Budget related to us not taking the full amount, but I did say that it was very likely
that we will be able to keep the lion's share of that amount. The lion's share would be more than
£12 million. We have been advised to take £9 million into revenue on the basis that the likelihood
360 is that that amount, at least, will not be, ever, the subject of an order that we should pay it over
again. That is the advice of the Commissioner of Income Tax in relation to that case.

365 **Hon. Dr K Azopardi:** And does he have advice also as to the likelihood of the timescale that the
rest of it would need to stay in deposit until the challenge is over? Does he have an expectation
as to when that challenge would be over?

Hon. Chief Minister: Madam Speaker, that is not something which can be the subject of advice.

370 **Hon. Dr K Azopardi:** Not being a subject of advice, is there a challenge in process? Is there a
time limit for that process? Can he help this House with understanding the kind of timescale that
that money will remain where it is pending the challenge?

375 **Hon. Chief Minister:** No, I cannot, Madam Speaker, because matters like this can take a
considerable period of time or they can be resolved through settlement. Therefore, I do not want
to stand here shooting the breeze on how long it might or might not take, which is what it would
amount to.

380 **Hon. Dr K Azopardi:** But would it be fair to say that the rest of it will remain on deposit until
that is over?

Hon. Chief Minister: Madam Speaker, I cannot tell the hon. Gentleman that we might not be
advised by the Commissioner of Income Tax, as the case continues, that the scale of the potential
recovery might be reduced, and that, therefore, we are safe to take other amounts into revenue.
Therefore, I do not want to just hypothesise, because that would be what I would be doing.

385 **Hon. Dr K Azopardi:** And in relation to the £9 million transferred to revenue, is he aware
whether that money has been spent either on recurrent expenditure or somewhere else?

390 **Hon. Chief Minister:** Madam Speaker, the hon. Gentleman has been a Minister. I have told him
it has been taken into revenue. Once it is taken into revenue it goes into the Government's general
account.

Hon. Dr K Azopardi: Yes, I understand that, but he cannot help us, presumably, as to whether that money has been utilised in any way?

395 **Hon. Chief Minister:** Madam Speaker, I do not want to go back into the arguments about
money being fungible, but once the money goes into the Government's general account I can
confidently tell him that since 31st March 2024 we have spent £9 million, so that £9 million is now
part of the revenue of the Government for the period ended 31st March 2024. The hon.
Gentleman has the Budget Book. We cannot debate it until the debate on the Appropriation Bill,
400 but he will know how we ended the year and what revenue we had. This is part of the revenue for
the year.

Hon. Dr K Azopardi: Perhaps it is my fault for not asking a sufficiently precise question. When
the decision was taken to transfer the £9 million, on advice, into the Government general account,
405 was that transfer simply a consequence of that advice, or was there also, behind that transfer, the
idea that it would be used for a specific purpose because the Government needed a specific sum,
or some of that money, for a specific purpose? That is perhaps more precise.

Hon. Chief Minister: Madam Speaker, that, of course, is a completely different question, and
410 it is not what happened. What happened was that we were advised by the Commissioner of
Income Tax that we should, at this stage, take this money into revenue.

Madam Speaker: Next question.

Q482-83/2024

Treaty on new relationship with the EU – Current state of negotiations; House of Commons European Scrutiny Committee

415 **Clerk:** Question 482. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: Madam Speaker, following the recent meeting in Brussels when this
question was drafted, before the second meeting but following the recent first meeting in Brussels
on 12th April 2024 and subsequent discussions with the British Government, will the Chief
Minister update the House in respect of the current state of the negotiations towards the
420 conclusion of a treaty on a new relationship with the EU?

Clerk: Answer, the Hon. of the Chief Minister.

425 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I will answer with Question 483.

Clerk: Question 483. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: Has the Chief Minister had confirmation of a new opportunity to appear
before the House of Commons European Scrutiny Committee following their own letter to the
Parliamentary Under Secretary of State dated 8th May 2024 in respect of the UK-EU negotiations
430 on the treaty for a new relationship for Gibraltar?

Clerk: Answer, the Hon. the Chief Minister.

435 **Hon. Chief Minister:** Madam Speaker, since 12th April 2024 meeting there has been a further
high-level quadrilateral political meeting in Brussels, on 16th May 2024. As a result of these two

meetings, important progress has been made in relation to the issues that remain outstanding between the parties. These are difficult issues and the parties remain fully committed to finding solutions to each one of them. A statement was agreed between the four high-level attendants of the talks and issued at an agreed time thereafter. I also appeared on the national broadcaster to further inform the community.

As the Chairman of the European Scrutiny Committee stated on 20th May 2024 when taking evidence from the Foreign Secretary, Lord Cameron, I was due to appear before the Committee again in the very near future. The session had been set for early July. That will now have to be vacated given that there is a general election currently on foot in the United Kingdom and the dissolution of Parliament. It is not clear if the new Parliament, to be constituted after 4th July, will include the European Scrutiny Committee as one of the Select Committees of the House of Commons given that the UK has now left the European Union. A different remit may be established for a Select Committee to review matters related to the operation of the TCA and the Windsor Framework.

Hon. Dr K Azopardi: Madam Speaker, in relation to Question 483, yes, of course, the calling of the general election in the UK yesterday does have an effect on all that, and I suppose that we will have to await developments on that.

Before I leave Question 483 – because it is now academic, perhaps, for those reasons: first of all, the Chief Minister cannot appear before the ESC in July as had been programmed; and it is unclear whether there will be an ESC going forward, and that will be inevitably impacted by whoever wins the election and so on – can I give him the opportunity to comment? He will have seen the lengthy letter of the European Scrutiny Committee, and I know that he has commented outside of this House in respect of matters relating to the ESC, but I want to give him the opportunity, if he wishes, to comment on that letter, in case he wishes to communicate anything to people listening to this House.

Hon. Chief Minister: Madam Speaker, I think I have been clear in the way that I have responded to the letter that I saw that Sir Bill had sent to the Rt Hon. David Rutley, and I expressed very clearly my views as to why I did not believe that the issues that were being considered by the Committee to be problematic were problematic in the way that the Committee was suggesting.

The United Kingdom left the European Union, as we know, as a result of a vote which was procured, in many instances, with a view as to sovereignty which is not the view that the people of Gibraltar have taken as to sovereignty in the European context. That is to say when the United Kingdom votes to leave the European Union in June 2023, in great measure because of the arguments put by Sir Bill Cash and people who think like Sir Bill – like David Jones etc. – all of whom are great friends of Gibraltar, of course, they look at sovereignty through the filter, for example, of whether the Court of Justice, being the final court that determines the interpretation of European measures, means that because that is not a British court, or not an exclusively British court – it only has, potentially, one English judge – that that is a cession of sovereignty.

The people of Gibraltar did not take that view in relation to membership of the European Union and what it meant: 96% of the people of Gibraltar voted to remain in the European Union. Nobody can pretend to me to be a stauncher guardian of the sovereignty of Gibraltar than the people of Gibraltar themselves. Indeed, as I have been given to recall, there have been instances when Conservative Governments have been less stalwart guardians of the sovereignty of Gibraltar – for example, in the 1984 Brussels Agreement; for example, in the 1987 London Agreement on the Airport – and so I believe that the sovereignty filter of the Gibraltarians is more and better attuned to the issues that matter in relation to the sovereignty of Gibraltar than the sovereignty filters of those who have considered in the past that membership of the European Union, which we were all very happy with, resulted in, somehow, a cession of sovereignty which was unacceptable to them, because it was clearly acceptable to us. That is why I think that it is important that when it comes to the issue of Gibraltar and the issues of Gibraltar, it is Gibraltar's representatives in the

490 negotiation that have to be the ones that determine whether issues are or are not capable of being acceptable to the people of Gibraltar as safe and beneficial for Gibraltar.

Hon. Dr K Azopardi: Madam Speaker, I certainly agree with him and adopt a lot of those remarks, and that the filter for sovereignty should definitely be the people of Gibraltar and not anybody else.

495 In relation to the state of negotiations, obviously the UK elections have been called now and he has made comments that the process will continue, notwithstanding the calling of the election, but in terms of how close things were ... Of course, big expectations were raised when Foreign Secretaries meet. They met twice in short succession with the Chief Minister in Brussels. That increases the tempo and the expectation that things are very close. The Chief Minister himself
500 was quoted as saying that they were within kissing distance the first time they met. In terms of the expectation of closing something, while the discussions will take place, as he has assured people already, and he made remarks in this House yesterday, is it possible to close those discussions even though the UK elections are still pending?

505 **Hon. Chief Minister:** Madam Speaker, it depends whether or not there is political agreement. If there is political agreement, then it is not impossible to close those discussions, in my view. Whether we will reach political agreement or not after the necessary technical work that needs to be done will, of course, depend on the availability of politicians, and with election campaigns on in Europe and in the United Kingdom that is less likely to be possible.

510 **Hon. Dr K Azopardi:** I see. So, he has not had an indication from the UK government that, as they have gone into a caretaker administration, the Ministers are not able, at this stage, to enter into political agreements. Is that right? Is that the indication he has got?

515 **Hon. Chief Minister:** Madam Speaker, the reality is that this is not an agreement for the United Kingdom; it is an agreement for Gibraltar. Gibraltar's election happened, and people made the choice that they made here knowing what we were going to go to negotiate. The reality also is, of course, that there is cross-party support for these arrangements in the United Kingdom. We have ensured that we have kept Labour shadow members of the Cabinet completely in touch with what
520 is happening, so that it is understood that there is that cross-party support for Gibraltar – this is not a controversial issue in the United Kingdom at the level of the two front benches – and so that any counterparty does not, for one moment, believe that there would be a different position that would apply in the event of there being a change of government in the United Kingdom. So, in my view, it is not impossible to see a situation where you could, potentially, have political agreement
525 even during the period of the general election campaign in the United Kingdom.

In the end, this is a treaty and, therefore, it needs ratification by the United Kingdom Parliament. That process of ratification will not start until this Parliament indicates it is satisfied with the agreement. What you could not have in the absence of a Parliament in the United Kingdom is ratification of a treaty, but you could, potentially, have politicians who are relevant to
530 the decision-making process saying, 'We think we have done it; we have reached the stage where we have that agreement and it can be submitted for ratification,' which is all it would be.

When we say that we have agreed, in effect what is happening is that the process of ratification is going to kick off, which is going to bring it to the Cabinet first, as I have said, then to this Parliament, and from this Parliament then seeking ratification from the United Kingdom
535 Parliament. Of course, there would not be a process of each of the 28 parliaments of the member states having to ratify, because it would not be a mixed agreement, but it would require ratification from the European Parliament. So, until you have a European Parliament, you can have whatever political agreement you like but you are not going to ratify the treaty. I think that is why there is no difficulty with continuing with the technical work. It is possible but unlikely that you
540 are going to have all the relevant politicians available in the period of the general elections in

Europe and the United Kingdom which would enable us to declare that agreement, but it is not impossible to do it, and thereafter you would need to have the two ratifying Parliaments back before the treaties themselves can go hard.

545 **Hon. Dr K Azopardi:** I certainly understand the point that, of course, you cannot ratify if there is no UK Parliament and there is not a European Parliament. I had not thought that the UK caretaker government could enter into a treaty, even subject to ratification, being a caretaker administration, but if he has different advice, I suppose that is good, that talks can continue even to that point.

550 May I ask a slightly different point? Are we still, Gibraltar, involved in a process aimed at unblocking the principles and ending up with a political declaration that unblocks the principles, or are we involved in a process, when he talks about being within kissing distance, which is intended to land the treaty as the next step? Or is it a two-stage process still, political declaration and then, perhaps, further drafting towards a treaty which then, in a third phase, gets ratified?

555 **Hon. Chief Minister:** The former, Madam Speaker, still two stages.

Madam Speaker: Does the Hon. the Leader of the Opposition have any supplementaries on Questions 477 or 478?

560 **Hon. Dr K Azopardi:** No, Madam Speaker. I am going to digest the statistics and I may come back at a subsequent House with questions, just to understand those a bit better.

Answers to Written Questions

Clerk: Answers to Written Questions.

565 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I have the honour to table the answers to Written Questions W29/2024 to W70/2024 inclusive.

Adjournment

570 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I move now that the House should adjourn to Tuesday at 4 p.m.

Madam Speaker: I now propose the question, which is that this House do now adjourn to Tuesday at 4 p.m.

575 I now put the question, which is that this House do now adjourn to Tuesday at 4 p.m. Those in favour? (**Members:** Aye.) Those against? Passed.

This House will now adjourn to Tuesday at 4 p.m.

The House adjourned at 5.43 p.m.



PROCEEDINGS OF THE GIBRALTAR PARLIAMENT

AFTERNOON SESSION: 4.00 p.m. – 8.05 p.m.

Gibraltar, Tuesday, 28th May 2024

Contents

Order of the Day	3
Government motion.....	3
Mental Health Board Gibraltar Annual Inspection Report 2023 – Motion carried	3
<i>The House recessed at 7.25 p.m. and resumed its sitting at 7.37 p.m.</i>	<i>41</i>
Bills	42
First and Second Reading	42
Gibraltar Regiment (Amendment) Bill 2024 – First Reading approved.....	42
Gibraltar Regiment (Amendment) Bill 2024 – Second Reading approved	42
Gibraltar Regiment (Amendment) Bill 2024 – Committee Stage and Third Reading to be taken at this sitting	45
Financial Services (Amendment) Bill 2024 – First Reading approved	45
Financial Services (Amendment) Bill 2024 – Second Reading approved.....	45
Financial Services (Amendment) Bill 2024 – Committee Stage and Third Reading to be taken at this sitting	47
Committee Stage and Third Reading.....	48
Gibraltar Regiment (Amendment) Bill 1998 – Clauses considered and approved	48
Financial Services (Amendment) Bill 2024 – Clauses considered and approved	48
Gibraltar Regiment (Amendment) Bill 2024; Financial Services (Amendment) Bill 2024 – Third Reading approved: Bills passed	49
Adjournment.....	49

The House adjourned at 8.05 p.m. 49

The Gibraltar Parliament

The Parliament met at 4 p.m.

[MADAM SPEAKER: Hon. Judge K Ramagge GMH *in the Chair*]

[CLERK TO THE PARLIAMENT: J B Reyes Esq *in attendance*]

Order of the Day

GOVERNMENT MOTION

Mental Health Board Gibraltar Annual Inspection Report 2023 – Motion carried

Clerk: Meeting of Parliament, Tuesday, 28th May 2024.

- 5 (ix) Order of the Day – Government motion. The Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I beg to move the motion standing in my name, which reads as follows:

THIS HOUSE:

WELCOMES the tabling of the Mental Health Board Gibraltar Annual Inspection Report 2023 by the Minister for Health and Care, the Hon Gemma Arias-Vasquez MP.

NOTES the contents and recommendations of the report, as set out therein.

THANKS the Mental Health Board for their work in producing such a detailed report.

BELIEVES the general overarching view of the report when read in full demonstrates a clear and significant improvement of Mental Health Facilities in Gibraltar.

FURTHER BELIEVES that His Majesty's Government of Gibraltar will continue to work tirelessly, to ensure that Mental Health continues to (i) improve and (ii) remain a priority on His Majesty's Government of Gibraltar's agenda.

AND CALLS on His Majesty's Government of Gibraltar to consider implementing any recommendations contained in the report which remain outstanding and are in the interest of mental health service users in Gibraltar.

- 10 Madam Speaker, this is my maiden speech to this House. I am really pleased to be able to bring this motion, for two reasons: (1) it shows a seriousness which this Government gives the issue of mental health: and (2) I am pleased to be able to move a motion in this House which presents a subject matter, warts and-all, in an attempt to improve the service. It is an attempt to show that this is a matter which, to my mind, transcends party politics. It is an attempt to get into the guts
15 of the issue and determine how to improve mental health services in Gibraltar. I will endeavour, as far as possible, to steer clear of party politics in this motion. I believe that this is the manner in which many issues need to be addressed in this Chamber, particularly when it comes to the larger of my portfolios, Health, ERS and the Care Agency.

Unfortunately, this did not get off to a very good start last week, but I hope that the Hon. Leader of the Opposition will be able to confirm that the Report was laid in this House exactly as I said it was. I hope he will confirm that they have had ample opportunity to review it in detail and that I am certainly not trying to self-congratulate or bring a motion prematurely. As I have previously stated, the motion and the Report were filed simultaneously. The order in which this was received by hon. Members opposite was simply procedural. I am hoping, at least, for an acknowledgement from the Leader of the Opposition that this is the case. I will go further: I have a legal obligation, pursuant to the Mental Health Act, to file the Report in Parliament. I do not have an obligation to file a motion in Parliament. I have done so in order to properly ventilate the issues, to highlight what is outstanding and to highlight what we intend to do, not to congratulate myself. I try not to brush things under any carpet, as I have been accused of doing. I address them; it is the only way I know of bettering the system.

The Report by the Independent Mental Health Board contains many positives and negatives. I acknowledge that going through issues of mental health with your children is difficult. I want parents to know that we are committed to try to improve the proposition for their children. I want people to understand that we are fully committed to providing a Community Mental Health service in the centre of town that not only does everything that Coaling Island currently does but goes further with the efficient use of resources. Let me be clear: this is not an attempt at trying to score political points or to throw digs at the Opposition. It is an attempt to show commitment to these issues. It is an attempt to use this motion and the recent Mental Health Awareness Week to raise awareness of mental health issues and, in particular, to highlight where we are with the mental health service provision locally. This is the fifth Annual Report address to Parliament since 2019. This is the opportunity to be publicly held to account on all matters relating to mental health. For the sake of transparency, there is an obligation on me, as the Minister for Health, to publish the Report, which I, of course, am committed to doing, as set out in law. I have done this at the earliest opportunity after meeting the Board to discuss.

I now turn to the Report. The Board states that it is neither a critique of the current mental health system nor a celebration of it; it simply tries to give a snapshot in time of where we are and where we should be heading. It is on this basis, as I have already set out, that I intend to address the House today.

In 2021, the GHA published its Mental Health Strategy, which is in place until 2026. For this, I thank my predecessor, the Hon. Samantha Sacramento, for the work done and the foresight that she had in producing such a strategy. This strategy, in my view, whilst not perfect, has been fundamental in revamping our mental health service provision in Gibraltar. I am pleased that the Board has recognised this, saying that the strategy has given a new impetus, which it says was badly needed. We now have a direction of travel. It is our intention to continue the plan set out in the strategy and to continue to review it beyond 2026, such as is recommended in the strategy.

Mental health, and indeed all health matters, are matters which do not stand still. They need continuous review. I think a matter which cannot, in my view, be of dispute between us and Members opposite is that our Mental Health Service has improved in recent years. Whilst I stand here today and fully accept that there is more that needs to be done and that must be done in this area, I think we must also pause to reflect on how far we have come, and that is a view which I think is clearly set out by the Board in this Report. Again, whilst this may appear party political, I am echoing the Board's view on the subject and taking an opportunity to applaud the work of the professionals in this area who, oftentimes, work in very difficult circumstances.

I am pleased to report that admissions to Ocean Views are at a record low. This, I believe, must be to a very great extent thanks to the brilliant work being done in the community. I would like to take this opportunity to thank the frontline Mental Health Liaison Team who, as recognised by the Board, have built stronger and closer links with other stakeholders such as the Housing Department Outreach Team and the Care Agency, in particular. In this we must go further and, indeed, we will.

70 The new Community Mental Health facility will build on the fantastic multi-disciplinary service currently offered and strengthen the links which currently exist in the community between all departments. I will go into this in greater detail later.

The first ever registered mental health nurse training is due to commence in September 2024, running for three consecutive years. The BSc programme has been developed to meet Gibraltar's
75 local needs and is in line with the Mental Health Strategy, where we emphasise care in the community over in-hospital admissions. This, again, is something highlighted by the Board as a positive development which we must welcome.

Crucially, in my view, the GHA has reorganised its psychological services and I am pleased to report that there is now a full complement of psychologists and psychiatrists in post. This has
80 meant the historical waiting times are now starting to be reduced and every effort will be made going forward to reduce this even further. To quote the report, this in no way underestimates the historical issues of waiting times; however, it does point to the awareness that there is a need for action and everything possible is being done to alleviate the situation, while at the same time deal with the new referrals. We acknowledge the waiting list issue and we are trying to deal with it.
85 The Board calls for the GHA and Government to develop a local succession plan so that many of our future psychiatrists, psychologists and counsellors can be locally sourced. I could not agree more and I am pleased to tell the House that I have asked the GHA Director General to work together with his team on developing a local succession plan, looping in the Department of Education, if necessary, and to report back to me before the end of the year. We are indeed
90 already looking to use locally trained counsellors to fill positions.

The Board consistently addresses smoking amongst patients as a significant issue, especially concerning mental health patients where rates are disproportionately high. Smoking exacerbates health conditions and can alter medication's effectiveness, which in turn may mean patients need
95 higher doses. Whilst this is not an easy issue to tackle, as recognised by the Board itself, I think we can do more to explore ways of trying to reduce the smoking culture that presently exists. Public Health, alongside the Mental Health Team, has set up a coalition of the willing to assist those who wish to quit smoking. There is a specific nurse who has set up a smoking cessation support group in Clubhouse and offers nicotine replacement therapy.

Again, I take this opportunity to recognise the fantastic support which is offered by mental
100 health charities in Gibraltar. Clubhouse, Gibsams, Childline and the Mental Welfare Society, to name but a few, all provide valuable support to our services and this support needs to grow and be encouraged, as it will with the new Community Mental Health facility. Again, we achieve better outcomes when we work collaboratively – the GHA, Public Health and all of our charities.

Moving on, I am absolutely delighted that the Report reflects the incredible work being done
105 by the Ocean Views Activities Co-ordinator. I know this has been an outstanding issue and I am pleased that we have now been able to resolve it, as recognised by the Board. Indeed, they say the new impetus given to the importance of activities to improve self-worth and physical health is now embedded in the system. We will look to the recommendations made by the Board here in terms of job description of the relevant nurse, which is an issue which I was not aware of. I am
110 absolutely committed to ensuring the activities of the kind currently being organised at Ocean Views are continued and that we look into ways of enhancing this provision even further, centrally, at a new Community Mental Health facility. We are of the view that it is through social prescribing that we will keep people out of Ocean Views and ensure that matters are properly dealt with in the community. We will be starting programmes in September under a covenant for health which
115 encourages people to stay healthy. This is similar to the self-care elements of the Mental Health Strategy where the aim, again, is to keep people healthy and in the community. It is all interlinked. I am also very pleased to be able to confirm that one of the issues raised by the Board relating to blinds on the balconies and shading in the garden at Ocean Views has now been addressed and the works are ongoing at Ocean Views.

120 I now turn to the Board's comments regarding dementia patients at Ocean Views. The
Government recognises the vulnerability of all its patients at Ocean Views and, in particular, those
with dementia. Due to the complex needs of patients living with dementia – for example, their
predisposition to become confused, scared or frightened of their surroundings when they are not
125 familiar with them – the Government agrees with the Board that dementia patients are best
placed at ERS facilities, where their needs can be better dealt with. However, due to the large and
growing number of dementia patients in Gibraltar, our capacity at ERS is at a maximum and this
has meant that, at times, there has been an overspill into Ocean Views. We acknowledge that this
is not ideal and the Government does not want to continue this practice for a moment longer than
is necessary. I am pleased to report to this House that the Government is currently exploring ways
130 to significantly enhance its capacity for dementia provision in Gibraltar. Whilst I would love to
make an announcement on this today, we are not there yet, but I am committed, as set out in our
manifesto, to work closely with GADS and our National Dementia Co-ordinator on this and all
dementia-related issues. The Government will, of course, make an announcement as soon as it is
ready to do so, but I ask for a while longer on this front.

135 Moving to the very important comment made by the Board about the lack of second opinion
appointed doctor, I am very pleased to be able to tell this House that the issues set out by the
Board in their Report have now been resolved. A second opinion appointed doctor has now been
appointed to undertake these functions, something I am sure that Members opposite and, indeed,
the whole House will welcome.

140 Similarly, the Code of Practice is now at a very advanced stage. We are waiting for input from
third party stakeholders – the Care Agency, the Police and the Department of Education – prior to
publishing the same. I look forward to this being published in the very near future.

Digitalisation of all records is taking place and progressing, admittedly not at the speed that
any of us want; however, I am pleased to be able to report to this House that the digitalisation of
145 all records at Ocean Views is now occurring.

I now turn to Community Mental Health. The Board found that changes resulting from the
Mental Health Strategy and the managerial restructuring continue to benefit both patients and
staff at the Community Mental Health facility. Compared to 2021 there are fewer cancellations,
clearer objectives and, according to the Board, a greater sense of purpose. A new appointment
150 reminder system has been implemented recently, meaning that the number of patients not
attending their appointments has significantly decreased.

It is clear from the Report that its main concern in this area is the need to relocate the CMHT
from its current premises at Coaling Island. I have already informed this House that we have
already commenced discussions on the relocation of the Community Mental Health Team. A new
155 site has been identified and I was pleased to announce, last week, that the new Community
Mental Health facility will be based in the heart of town. I am hopeful that I will be able to make
an announcement at the Budget on the location and the manner of funding of this new facility.
Discussions on this are progressing and a project board has already been set up to take everyone's
view into account.

160 The Mental Health Team has also decided to assess the current model of care in order to
develop and improve a modern approach on how we can help its service users better integrate
back into our community. The new model of care will encompass mental, physical and social
health in its programme, where the service users will have a wrap-around service which will help
to meet their holistic needs. Programmes to include education and housing will also be facilitated
165 within the same building. Again, the aim is to keep people out of hospital and properly supported
in the community.

I would very much like to take this opportunity to thank the staff at the CMHT for their work in
what, I know, is not the best of working environments. For the reasons I have just explained, we
are absolutely committed to relocating the CMHT as soon as possible.

170 Turning now to Gibraltar Young Minds, the Gibraltar Young Minds Team has undergone a
significant transformation. They now have one registered mental health nurse, two enrolled
nurses, two counsellors, one child psychologist, two psychiatrists and one part-time external child
psychiatrist. I am pleased to inform the House that this restructure has greatly reduced the waiting
list for children to be seen with the service. This year, on average, from time of referral to first
175 contact with the team was two weeks. The Gibraltar Young Minds Team conduct allocation
meetings every week, attended by all professionals within the team together with the Head of
Child Social Services and a representative from the Department of Education. This process
reinforces accountability and governance to all referrals made to the service. I would like to take
this opportunity to thank all the staff of Gibraltar Young Minds for their efforts and dedication to
180 improving our children's mental health services in Gibraltar.

As I have stated on numerous occasions in Parliament, it is very difficult for a population of our
size to have a full-time child psychiatrist, unfortunately. For this reason, we have opted to have
virtual consultations with a child psychiatrist in the UK. We are, however, committed to
improvements in this area. If, once a neurodevelopmental pathway – which I am happy to say I
185 am meeting the hon. Members opposite on tomorrow – is established, there is still a need for a
child psychiatrist, we will review the complement or the composition of the complement to try to
address that need.

The Report deals squarely with the ASD and ADHD pathway. This will be published in the next
fortnight as the neurodevelopmental pathway. A multi-disciplinary team has now agreed the
190 approach which they are able to take for diagnosis and follow-up of children with
neurodevelopmental issues. Prior to publishing this pathway, we agreed to share this with the
Opposition. I am aware that the hon. Member opposite will have knowledge of the subject which
only a parent can have, as she has spoken publicly about this. The Hon. Shadow Minister for Health
has also written publicly about her personal interest in this subject. As such, we have agreed to
195 depoliticise this issue and work together, united on a matter of such interest to our people.
Madam Speaker, throughout this speech I want to make abundantly clear that in all these issues
there is more that unites us than that which divides us, in the infamous words of the late
Jo Cox MP. In these issues, as a mother, I can only (1) apologise to any parent whose child has not
been diagnosed quickly enough, and (2) assure those parents that the pathway will be published,
200 certainly before the public, with, I am optimistic, the approval of the hon. Members opposite, as
well as all the psychiatrists, paediatricians, occupational therapists, educational psychologists,
physiotherapists and speech therapists. This has not been an easy task, but with that pathway we
hope to ensure (1) quicker diagnosis and (2) better follow-up once that diagnosis has been made.

Moving on, the Mental Health Liaison Team started in 2020 with two registered mental health
205 nurses providing a day service. This was later expanded to a 24/7 service with five RMNs. Their
efforts must be acknowledged by the House as, in my view and indeed that of the Board, this
significantly impacted mental health services locally by reducing admissions to Ocean View. As we
have discussed in this House during Question Time recently, the Mental Health Liaison Team
operates near A&E to respond promptly to crisis, both supporting hospital patients and those in
210 crisis situations. Over the next financial year, we will look at ways to further expand this service
which is already proving to be extremely successful.

There is a lot of content in the Mental Health Board Report and it is just not practicable for me
to go through everything. I am, however, in the interest of time, willing to deal with any such
issues that Members opposite wish to raise which I may not have raised in my speech during the
215 course of my right of reply. In closing, therefore, the Government I am proud to form a part of
feels a deep sense of responsibility and commitment to the cause of mental health awareness and
to enhance service provision in our community. Today, I have outlined the progress we have
made, the challenges we face and the path forward. Whilst we acknowledge the huge strides
taken, the work done as part of our Mental Health Strategy which has never previously existed
220 and the dedication of our Mental Health Service workers, we acknowledge that there is a way to

go. We cannot afford complacency, as it is clear that there is still much ground to cover, which this Government fully accepts. We must redouble our efforts to enhance our mental health services, ensuring accessibility, quality and inclusivity for all those who need it. As we move forward, let us all pause a moment to reflect on that fact, that mental health knows no boundaries. 225 It does not recognise politics or partisanship. It is a shared responsibility, a collective endeavour that should, in my view, transcend party lines. In the words of the Mental Health Board, let's continue to aim for a future where our mental health services reflect the compassion, dignity and respect that every individual deserves. Let us aim to destigmatise mental health. This will only be achieved by speaking about mental health issues openly and by addressing them. Together, let us 230 build a Gibraltar where mental health is not just a priority but a fundamental aspect of our collective consciousness.

Before I end I must take the opportunity to thank the Mental Health Board, ably chaired by Mr George Parody, for the way in which they have carried out their work. Their Report is 68 pages. There is a huge amount of detail which I am sure many will want to closely examine, but there can 235 be no doubt that despite many challenges and the need to improve further in many areas, mental health provision in Gibraltar has never been so good.

Madam Speaker, I commend the motion to the House.

Madam Speaker: I now propose the question in terms of the motion moved by the Hon. the 240 Minister for Health, Care and Business.

Would any hon. Member like to speak?

Hon. Dr K Azopardi: Madam Speaker, there is quite a lot, I think, in the contribution by the hon. Member that we can agree with but let me just focus on things that we do not agree with. 245 The hon. Lady opened her contribution saying that this motion reflects the seriousness of the approach of the Government, that this is an attempt to have a warts-and-all approach before Parliament and that it transcends party politics. But, of course, from where we sit, this motion, which at its core says, and I quote from it, that 'the general overarching view of the Report when read in full demonstrates a clear and significant improvement of mental health facilities in Gibraltar' and her closing remark that mental health facilities have never been better in Gibraltar, 250 displays the opposite of what the hon. Lady says she wants to achieve, which is to transcend party politics or put before Parliament, showing the seriousness of the Government's approach, a warts-and-all approach, because if we did adopt a warts-and-all approach the reading of the Report is somewhat different, as I will highlight in my contribution. I will say this about the transcending of party politics, because there were aspects of the hon. Lady's speech which I agree with: that there 255 should be a cross-party approach in the area of mental health. There is no doubt that that is so, and I have said that on occasion, publicly and in this House, but I do regret aspects of the motion that display the opposite and also aspects of the speech that display the opposite. Certainly, I agree that this got off on a bad footing, but I will say that it was not a bad footing of our own 260 making because the Hon. Minister does have to lay the Reports in the House, but she could have given us advance notice of the Report. It is a matter for her because she did have the Report – she does not need to wait – and then, perhaps, adopt a more consensual approach at the end of it.

This Report reflects work that was done, to a very large extent, before her tenure in office. It does not reflect her ministerial time and I certainly think on this side of the House that we had an 265 understanding with her predecessors – her immediate predecessor and the predecessor before her immediate predecessor – because, for reasons that I will explain later in my contribution, I had agreed with both of them that there was a more consensual approach and a requirement for dialogue between the Government and the Opposition on issues of mental health, and indeed we were actively disposed to doing so. Indeed, I remember before the Hon. Samantha Sacramento 270 launched the Mental Health Strategy in response to the criticisms of the 2019 Report of Public Health England, she called me in and we had a discussion about the intended strategy before she

published it – on a confidential basis, which I entirely accepted because we had an understanding. That understanding, I feel, was broken by the way this has been promoted. The hon. Lady is correct that she does not need to bring a motion to the House, but we welcome the fact that there should
275 be a motion. Purely, if it is to note the terms of the Report and provide an opportunity for us to debate the contents of the Report, we certainly welcome that. If there was a desire to have a more consensual motion, it could easily have been, perhaps, obtained by a discussion with us.

I say that as my opening remarks in this debate because I do agree with her to a very large extent that there should be an attempt to transcend party politics. I hope that whatever the
280 outcome of today – because I still do think that today provides us an opportunity to revert to those understandings that I had, certainly with her predecessors, on this issue – it will provide that more consensual approach. Irrespective of the outcome, I certainly think from this side of the House – and I speak for my colleagues as well – that this is an area where it is possible to adopt a cross-party approach. I do so because I feel rather passionately in this area. As I think I have said publicly
285 before, members of my family have encountered the Mental Health Service and I have seen it at close quarters with all its advantages and strengths, but deficiencies too. I think if you are going to provide a warts-and-all approach, then it is important for us to understand that there are warts, that there are also warts displayed in this Report and that we do not have a motion that reflects only one side of the story.

I think that is an important starting point. May I say this on the Report, as I am on that point: I
290 entirely accept that there are improvements noted. I entirely accept that. It would be churlish of me to say otherwise. There have been improvements that are noted by the Mental Health Board, but there are also deficiencies that continue to affect people on the ground significantly. It may be that the Hon. Minister does not hear this in her office, or she hears part of the story but not all
295 of it, but certainly from what we hear from people who are encountering mental health services, and certainly from my own direct experience as someone who, as a constituent of hers, as she is my Minister for Health, I can tell her that, having members of the family dealing with this issue, it is a service that has been deficient as well. This Report does that: it picks up on both sides of it. If we are going to present a warts-and-all approach, then we should do so in this motion. A good
300 starting point in the Report is page 4, which says:

The following report is neither a critique of the current mental health system nor a celebration of it. It simply tries to give a snap shot in time of where we are and where we should be heading.

So, it is not a critique or a celebration of it. What it is not possible to do is to use the words that the hon. Lady said before she sat down: ‘It has never been better,’ – that is a celebration of it, as is her motion as it currently stands – without understanding that the Mental Health Board itself
305 has said we should not be celebrating it. If we want a warts-and-all approach, let us have it, warts and all. I will tell her, right now, I accept that there are some very positive findings in this Report: positive findings about the Gibraltar Young Minds; positive findings about the reorganisation of psychological services, about an attempt, *finally*, to deal with counselling and waiting lists that have been the plague of mental health services in the community; the activity co-ordinator aspects of it; the fact that there have been fewer cancellation of clinics and the effect on the
310 managerial aspects; some of the additional staff recruited in particular areas; the fact that there has been a new referral system; a Mental Health Liaison Team; the work that has been done on counselling, what is now called talking therapy; and the better integration of services. Those are positive aspects of the Report, but may I also say that even on integration of services, it is obvious from the Report itself that there are positive aspects but negative aspects, too, on lack of
315 integration in certain areas. So, if we are going to adopt a warts-and-all approach, let’s look at it warts and all.

There are negative aspects that are noted in the Report. There are some granular issues in relation to catering, the smoking policy and the very important aspects of the digitisation of patient files. There are negative aspects on the placement of dementia patients. There are the

320 negative findings on the second opinion appointed doctor, though I note what the hon. Lady has
said today and I will comment on it a bit later. There are negative findings on the code of practice,
the ward clerks, the junior doctor and the need to relocate the community facility that has been
an ongoing matter for a long time; the lack of either trained staff in certain areas or job
325 descriptions that affect patient delivery. There are aspects of ADHD, the waiting lists and the lack
of a pathway. There are aspects on the waiting lists for children, the structure of facilities, the
historic lists, and the chronic patients; negative findings in relation to the Prison and the vast
amount of medication there is in these areas; the ineffective use of resources and the lack of a
mental health budget. All of those are critical findings, and in a warts-and-all approach, let's say
330 that there are improvements and there are critical findings. That is the reality of the Report
because the language itself does not display anything other than that reality. I am not saying that
there are not improvements – there are – but the language of the Report shows that they are also
making critical findings. It is important to be even-handed about this and, with all due respect to
the hon. Lady, I think she has been insufficiently even-handed although noting negative aspects
and trying to say, 'This is what we are doing.' The point is that this motion is not about what the
335 Government is doing, necessarily; this is about noting what the Report says. She says that this is
an important opportunity to adopt this warts-and-all approach and I am asking her to reflect a bit
further on things like that.

For example, in relation to the digitisation of the files, the Report says, at page 19:

It is very difficult to understand how an electronic system of note taking has not been introduced to improve patient care and reduce unnecessary duplication.

The benefits of such a system would be a game changer for the Service.

The Board recommends very strongly that a feasibility study be undertaken to move to an electronic system.

On the same page:

The Board found the state of the patient files very much as they had found them in previous years.

340 So, very much as it was when they have said previously that things had to be done.

The Board notes, in relation to dementia patients, on page 20:

The subject of how to deal with dementia patients in OV and the suitability of their placement in a mental health facility has been a source of concern for the staff since our first visit in 2019.

The Board then made recommendations about trying to find a workable solution with the minimum of delay.

345 In relation to the second opinion appointed doctor, although I note what the hon. Lady said
and I am going to make a comment on that in a few seconds – this is a doctor that has to give a
second opinion in relation to capacity of mental health patients – the Board said:

is very concerned that this crucial safeguard of the service's most vulnerable patients under the Act has not been resolved. It is an integral part of the Act included to protect both vulnerable patients and medical staff and needs to be resolved as a matter of great urgency.

350 The hon. Lady says it has been resolved, and I welcome that because I was unaware until the hon. Lady gave her speech that this had been resolved, but when we are reflecting what the Report says, warts-and-all, it needs to reflect that the Board was very concerned about the exposition of vulnerable patients under the Act up until resolution. It is not as if it did not happen, and airbrushing that aspect of the Report away because it is simply not convenient... If we are going to have an even-handed approach to this area, let's do it in an even-handed way. The hon. Lady, I hope, does not take these points in a highly personally critical manner, because they are not

intended in that way. They are intended to say, simply, that if we are going to have a neutral
355 approach, let's have a neutral approach.

The Board says, at page 24:

The Code of Practice, which is a requirement under Section 106 of the Act, has still not been delivered to the Service and is now two years behind schedule.

That was when the Board made these comments in October 2023. It is now two and a half years behind schedule – and, by the way, this was a requirement under the 2016 Act. Of course, we understand the complexity of this. The Board itself is aware of the complexity because it says:

The Board is aware of the significant exercise that drafting a bespoke Code that fits the Act and the realities of the service in Gibraltar has required; however, it feels that a concerted effort must be made by all parties involved to take this over the line once and for all.

360 The issue of the code of practice has been the subject of questions in this House before – before the last election – because it was part of the strategy that was published in 2021, three years ago, and has not seen the light of day. While we have asked questions, again I do not raise this in a critical way, I just raise it in a plea that there is an even-handed approach, which is what the hon. Lady says she wants to fulfil, there should be an even-handed approach in this motion.

365 The Board continues by saying, in relation to ward clerks:

The need for Ward Clerks has surfaced previously in our visits and was highlighted in the presentation to the GHA Board in May 2023.

It makes recommendations, in relation to ward clerks, in relation to previous visits.

The Board also talks about the necessary support for psychiatrists and psychologists if you are going to have continuity and says that you are unlikely to hold and retain psychologists and psychiatrists unless you appoint junior doctors in the area. That is all on pages 25 and 26.

370 This Report also acknowledges the desire for there to be ... Madam Speaker, I am focusing on the bigger issues. I could take a much more granular approach and we could be here quoting extracts from the Report at much greater length, but I am trying to do so in a speedy way. Insofar as the bigger issues in this Report and in relation to the community health facility, it does reflect the need for there to be a move of that facility.

375 The Report, in relation to psychiatric nurses or enrolled nurses, talks about there being no job descriptions within the Community Health Team and that this makes, to quote from the Report, 'the establishment of good practices and pathways difficult to implement.' The Report also notes the concerns raised by staff – this is not the Board but the staff – when dealing with a particular place where there are untrained staff who could not manage situations arising from mental health
380 or medication problems.

I have spoken about the digitisation of the records, which the Board considers is something that needs to be done as a matter of urgency. We are glad to hear that the hon. Lady reports to this House that there has been a recommencement of the work on the digitisation, which I welcome, but that postdates the Report. If we are going to be even-handed as to what the Report
385 says, it should reflect the concerns that the Board had at the time.

We certainly welcome the work that has been done on Gibraltar Young Minds. That is an important move forward because if there is an aspect of mental health services which gives us concern, it is the effect on younger people. I am not talking about the facilities themselves; I am talking about the effect on the mental health of young people because of pressures that young
390 people have today that perhaps were not around 20 or 30 years ago because of the lack of social media and so on, and that is causing an acknowledged global concern in this area.

The hon. Lady has talked about the ADHD aspects, and I am not in a position, myself personally, to talk to that issue – my colleague Mrs Ladislaus will – but I will say that one of the things that the Board does reflect is:

The ADHD waiting list is a cause of concern

395 – I am quoting from page 42 –

and has been so now for a number of years.

So, mental health facilities in relation to ADHD are not better than ever before, because this has been so for a number of years now. Referrals continue to be made and there is still not enough clarity as to how it is being tackled. The ADHD pathway that was promised has failed to materialise, a fact that needs addressing as a matter of urgency. Again, I say that because in reflecting an even-handed approach, let's understand that that is what the Report says. We welcome the work that is being done to consummate the aspect of the pathway and we certainly stand ready to discuss with the Members opposite a non-partisan approach on that issue. Let me say that this is not because the hon. Lady has, with her shadow colleague, depoliticise the issue. We do so as the Opposition team because we have, for years, been calling for a cross-party approach on the issue of mental health, as I will, I think, hopefully demonstrate as I go along.

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In relation to the children's waiting lists in particular, the Report says, at page 43:

There is a waiting list of two to three months to see a Psychologist and if your child is suffering meltdowns and has acute problems, it is something you do not wish to hear.

Indeed, as a parent, you do not wish to hear that. The Report says:

Every patient on the Psychologist's list will require between six to eight sessions, so it is understandable that there is a waiting list.

The Report goes on:

Mental health issues requires a very different approach and time input.

The question then arises, of considering the appointment of an extra mental health practitioner in order to improve access to services, especially as the waiting list for ADHD services is far too long.

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Anyone with a child who has encountered issues like that will understand those remarks by the Board and will understand that those are criticisms. It is quite right that the Board makes critical findings. I do not even want to elevate it to criticisms. If I am trying to approach this on a consensual basis, I will at least say that they are critical findings, if not criticisms. But every parent of a child suffering from anxiety or depression, because of whatever reason or cause, who is under medication, will understand those issues and the frustration of not being able to engage properly beyond perhaps the first appointment or the first couple of appointments, where the child falls between two stools without the support of the delivery of the proper support structures that you would get if you had a proper, efficient counselling – or, as it is now called, talking therapy – system.

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I make those remarks because I feel strongly about this area, but I will accept that this is not a Gibraltar issue either. There is a recent report – I do not know if the hon. Lady has seen it – from the House of Commons called Mental Health Statistics Prevalence Services and Funding in England. It talks about different waiting times and you have very different waiting times depending on the particular NHS Authority. I was struck by that because some of the waiting times are quite long but some of the waiting times, in relation to some of these areas within counselling or other services, are down to a few days. I am not making the political point that somehow I have

worked out the averages and Gibraltar falls foul of English averages – it may or may not; that is not the point that I am making – I simply make the point that in noting the Report we also need to understand the criticisms of it, and in this particular area we should be aiming to achieve more and understanding that things are not as rosy on the ground, which is where it matters, where
430 people need the support. That is the issue that I raise. The Report says:

There is some work currently being done on this,

– talking about waiting lists –

but this cannot come soon enough, since the referrals keep on accruing. This needs to be prioritised.

The Report does say there has been an improvement in relation to addressing waiting lists in respect of talking therapies, but what is striking from the Report in dealing with the waiting lists is that the exercise that has been done is to deal with waiting lists from 2019 to December 2022.
435 The Report says:

This is clearly not a perfect system, and the Board hopes that any patients who have not replied, either by choice or inability, should be given an opportunity to latch on to the service, without the need for further referrals.

Unfortunately, if someone has been hanging around that long, it may simply be that they have found support elsewhere or not found the support and given up, which is also the feedback that we get from people who come to see us, that after a while it has not worked. I am not saying it is not going to work in the future, and I commend the efforts if there are improvements that are
440 happening, but certainly in relation to the past, which is what the Board is noting, it is clear that there are also failings and criticisms.

As the Report notes, at page 50:

It is early days yet and the gathering of data and assessing the needs of those on the waiting list, could take some time. It is also evident that, regardless of the transfer of patients from this list to their GPs, there might still be a significant number of patients waiting for counselling or psychological services.

Indeed, that may be.

I have spoken about the premises where the Board identified that there are untrained staff
445 dealing with mental health patients, which gave them concern.

In relation to chronic mental health issues, the Board notes, at page 57:

Much more needs to be done to house and care for these individuals in order to sustain their periods of stable mental health and resulting independence of living for as long as possible.

It then goes on to make a number of recommendations saying, principally at page 58:

A concerted effort must be made to ensure that these patients, whom everyone knows, can get the necessary kind of support that will make their lives that little bit easier and achieve the greatest possible level of independent living during their periods of improved mental health.

Again, not a rosy but a realistic consideration of the particular aspect.

In relation to the Prison, at page 59 the Board notes:

A Counselling Service was available to the HMP service until about 3 years ago when the person responsible retired and his post was not renewed.

450 So, three years ago, 2020 at the time, there was a counselling service but the post was not renewed, so there is no counselling service available to the Prison. The Board notes:

The service has remained without adequate psychological support for all this time.

The Report continues, on the same page:

This gap is doing a great disservice to these individual as well as society generally, which will have to bear the cost of their inability to function in the community and, in the short to long term, bear the financial and social costs of re-offending.

The Board concludes, on the same page:

The Board believes that the Prison Service requires the services of Counsellors and psychological input as a matter of urgency.

455 I do not know if things have happened since then, but insofar as noting what the Board concluded, it is fair to say, in respect of the Prison, that there were critical findings in relation to that.

In relation to medications, the Board says, at page 62:

it appears clear that, in comparison with the rest of the world, there appears to be an over prescription of medications to deal with issues of mental health, even if the exact parameters of that comparison remain unclear. This suggests a potential over-reliance on medication for mental health issues, possibly due to the limited availability of alternative therapies like counselling or CBT; it could be that, were it not for the lengthy waiting lists, GPs would be more willing to refer some of their patients for alternative therapies as the first course of action, exploring medication if counselling/therapy does not have a positive effect.

460 I have to say that that did resonate with me from my experience with my family, and indeed the feedback I get from people: the inability – certainly historic; current, I do not know, I hope not, but certainly the Board’s view that the inability of having access to counselling services leads people, sometimes very young people, to being medicated instead of having access to services and other alternatives that might not require medication. It is a real issue and something that ... In noting the Board’s comments, we note the good and the bad, but let us note the bad.

The Board continues, at page 63:

A comprehensive study to uncover the unique stressors affecting Gibraltar's population could be instrumental in addressing these mental health concerns at their roots.

465 I hope that the hon. Lady takes that on board and that there is more work done, because it also did strike me, in looking at the position in England, that there seems to be much more work in surveying the mental health impacts on young people. I would commend her to reflect on that, finding ways ... I am not an expert and she is not an expert but she has access to officials that I do not. I would ask her to consider better ways of engaging with young people to understand the pressures on young people today, the effects on their mental health and how it can be addressed
470 in different ways so that people do not have as the default entry point medication, unless they need it. Of course, these are clinical decisions, I understand that, but I hear loud and clear what the Board is saying because of their own engagement with mental health patients and they are getting that sense, so it is important for us to understand and hear it.

475 Then, the Board makes this observation under the general heading of ‘Additional Recommendations’:

many of the challenges faced by Mental Health Services do not stem from a lack of resources per se but rather, from their inefficient utilisation.

Again, in noting the warts and all, let’s note that, too.

480 Then it makes a number of comments in respect of budgetary control and its own views in relation to that at pages 65 and 66, which very clearly points to their view that the mental health services should have greater liberty over their budget.

Madam Speaker, seen holistically, the general overarching view of the Report, to use the phrase in the motion, is that there have been improvements, but there have also been critical findings in this Report. That is really the effect of this Report, and if we are to be fair we should reflect that.

485 May I make this observation too: this Mental Health Board Report does not come in a vacuum. The Mental Health Board is duty bound under the Act to undertake an annual report, which it has done over the last few years and we have had access to all of them, and I think I have most of them here: 2020, 2021, 2022. When you read them all, they point to things that are being done and criticism or critical findings; they are all pretty much the same in that respect, they take that
490 tenor. But it has not occurred in a vacuum and I want to explain why: because before the last few years of reports, the Government produced a strategy. In 2021 they produced a strategy, and in itself that National Mental Health Strategy 2021-26, which contains a number of things, was not in a vacuum either. Before that strategy was produced there was a report commissioned from Public Health England, and that report, which was published in November 2020 even though the
495 report was dated April 2019, was received before the 2019 election. We said at the time when it was published that the Government had withheld it for 18 months until after the election and then published. You may not accept the criticism that they withheld it deliberately but the fact is they had received it in April 2019 and did not produce it until November 2020.

That report, which is called Mental Health Situational Analysis Report Gibraltar and was
500 commissioned by the Gibraltar Government and conducted by Public Health England, made some very critical findings. Its main findings were over seven areas. It said in one of the key observations that there was then no overarching government policy or action plan in place to guide the development of the mental health system in Gibraltar and a lack of integration across the mental health system. There was a lack of co-ordinated national plan to improve and support mental
505 health across the board. It made recommendations on suicide prevention. It made recommendations on mental health financing. Even then, Public Health England was noting that no formal mental health budget could be identified. It made a number of recommendations across primary care, specialist mental health services, the Community Health Team, psychological services and so on. In 2019, Public Health England talked about the fact that pathways were
510 unclear for psychological services and local supervision structures were fragmented and underutilised. It was critical about the child and adolescent service at that stage and made a number of recommendations in relation to aspects of the community to see if there could be a way forward. Overall, there were significant recommendations made in this study and the key recommendations were that there should be a development of a comprehensive mental health
515 needs assessment that included problematic substance abuse and suicide; that there was a development of a national policy and plan for mental health that forged and underpinned a joined-up system that included an indicator set of outputs and outcomes for monitoring; and that the data and information systems across the mental health system were improved.

When we take a step back from what the Mental Health Board recommends, what I will say is
520 that the distinction between the work of the Mental Health Board and the Public Health England report seems to me obvious in different respects. Public Health England were asked to come up with a blank canvas set of objectives and recommendations as to what should be done; the Mental Health Board is auditing what has been done and coming up with views and recommendations. It does also suggest things that could be done, but they are doing it from a slightly different, I would
525 suggest, less bird's-eye view than Public Health England, but certainly there are aspects of that report in 2019 where it seems to me, when you read it, ostensibly not clear whether they have been done at all, and certainly there is work in progress in relation to some of them.

Another key recommendation was to clarify the role of the Community Mental Health facility as the central conduit of the wider system – what we hear, years on, is that this is still up for grabs because we are talking about a new site, which we welcome, but those aspects are still there; that there needs to be a gap analysis of training needs across the mental health system – well, we can see, when we put that alongside the Mental Health Board, that those issues still remain, at least in some respects; that there needs to be a mental health literacy campaign in the community, communicating what people can do to look after their own and each other’s mental health – I acknowledge that some work has been done in that respect, but I question whether we are engaging with young people in a sufficiently direct way so as to understand that; the broader quality of service delivery. I do not want to prolong my contribution by dealing with that at great length but that report is out there for people to see. They can access it because it was published by the Government. That 2019 report was the genesis of the work that was then done to enable the strategy before that happened.

So that the hon. Lady, who was not in this House at the time, understands that my statements on trying to achieve a cross-party position on mental health go back some time: I had written to the Chief Minister a few months after that report was published – the report was published in November 2020, as I said, and I had written to him in February 2020 – to say that I proposed that there should be a select committee of this House on mental health. I understand entirely that shortly after that we had the COVID pandemic, and attention was rightly directed to other things, but we did return to this House in May 2020 and continued, to a very large extent, as best we could, and by the end of 2020 there was a lot of government business happening but – I will try to put it in as neutral a way as possible – we had not received a response to our proposal.

On 9th February 2021, I gave notice of a motion to this House that read as follows:

THIS HOUSE:

BELIEVES that there should be a cross-party approach to the issue of mental health;

ESTABLISHES a Select Committee on Mental Health to report to Parliament on such further improvements to mental health service provision in Gibraltar which it considers should be made generally and having regard to the recommendations set out in the Public Health England “*Mental Health Situational Analysis Report*” of April 2019;

RESOLVES that the Select Committee on Mental Health be composed of five members three of whom shall be drawn from the Government benches and two from the Opposition benches, one from each of the parties with representation.

That motion was presented by me in February 2021 with the support of the then Member of the House the Hon. Lady Marlene Hassan-Nahon, and it became clear, in exchanges of press releases after that, that it perhaps would not carry government support. I regret that. I am not going to elevate it to any situation on the granular aspects, but it is clear that after discussions with the hon. Lady’s predecessors at the time, the Hon. Miss Sacramento and the Hon. Mr Isola, we reached an understanding that that motion was carried forward from Parliament to Parliament meeting on the basis that the Government was going to engage with us proactively on the issues that they were doing. While we still feel and felt strongly on this side of the House that there should be a select committee on mental health – we hope to persuade them that there should be one – we were willing to discuss with them in a proactive way. Indeed, I did so because, as I said earlier, when the hon. Lady Miss Sacramento published the National Strategy 2021-2026, she did call me into her office and we had a discussion, with her but also with the senior officials drafting the strategy. The strategy itself, produced by the Government, very clearly tried to address the issues of that report because reference to it appears in the second paragraph of her foreword and deals with the need for strategy and so on. Indeed, the strategy talks about the code of practice that still has not been done, and it is referred to in the Mental Health Board’s Report and so on. It talks about many other things, and I would suggest that when you put the 2019 report alongside the strategy and alongside the Board’s Report of 2023, it is still clear that there are aspects going back from the 2019 report that have not been tackled. If we do want a cross-party approach, I will remind the hon. Lady – I know she was not in this House at that stage, but I would say to her –

that it is possible to have one and that opportunity is there for her. If she wants to take it, she can engage with us in a more proactive way, on a more consensual basis, and we would be willing to do that. There are different ways of doing it, obviously. She is the Minister, so she has to decide, as a member of the executive, how best to achieve that.

575 I do want to say this about the Mental Health Board, and that is why, also, I think it is important to understand this aspect: the Mental Health Board's Report is not in a vacuum, for the reasons I have just given, because it comes also against the backdrop of the 2019 report and the strategy and so on, but it is also important to understand when we put this motion before the House that the Mental Health Board is not commenting on everything. It is commenting on a lot of things but
580 not on everything, and while there are some very knowledgeable people there, because they have been there for a long time, and there are some people who are more specialist in their field, many of the members are not, which is different to the situation of the report of Public Health England, which is done by a body that is staffed by specialist people. We have to understand that as well: they are also addressing the issue from different perspectives. Public Health England were given
585 a brief to advise, and the Mental Health Board are commenting perhaps not with the precise expertise but on a less strategic basis because they are looking at the minutiae of services. It is obvious that they are doing so because they go through – very helpfully, by the way, and I want to thank the Mental Health Board for doing all the work that they have done and continue to do, but they take a fairly granular approach, sometimes, because they go through the patient records
590 of each individual patient, which is something that Public Health England in the 2019 report were not asked to do. It is very useful for them to do it, but it is a different approach. I just raise this by way of preface to say that if we wanted to have an audit of advancements, perhaps we should call Public Health England back and do a second report on where things are today. It may be that Public Health England would note those improvements. I have to say that if that were the case we
595 would welcome it because we do want to see the improvements in mental health services, and the approach that we are taking today is not a party-political approach. I stress that. I may be making comments that the hon. Lady is hearing and does not like because it does not fit into the straitjacket of her speech, but the reality is that I am doing so on a fairly, I hope, neutral basis because mental health is not an issue that affects just this community; mental health is a very
600 serious global issue. The World Health Organisation has noted that one in seven 10- to 19-year-olds experience a mental disorder, accounting for about 13% of the global burden of disease in this age group, and that the most common things that youngsters are dealing with are depression, anxiety and behavioural disorders, and they are among the leading causes of illness and disability among adolescents. Suicide is the fourth leading cause of death among 15- to 29-year-olds. The
605 World Health Organisation has said:

The consequences of failing to address adolescent mental health conditions extend to adulthood, impairing both physical and mental health and limiting opportunities to lead fulfilling lives as adults.

And:

Adolescence is a crucial period for developing social and emotional habits important for mental well-being. These include adopting healthy sleep patterns;

– we have teachers in our midst and they will hear this and it will resonate with them that that is such a developing part of a young person's life –

exercising regularly; developing coping, problem-solving, and interpersonal skills; and learning to manage emotions. Protective and supportive environments in the family, at school and in the wider community are important.

610 It goes on:

Emotional disorders are common among adolescents. Anxiety disorders (which may involve panic or excessive worry) are the most prevalent in this age group ...

615 What struck me when I was doing some work in this area was not just that but the fact that it is noted ... I am not sure I can find it quickly in my notes but it is noted that young people who have mental health issues stand a much higher risk of living less and developing serious illness as a result: cardiovascular illness. Without treading into identities of people, I certainly will say that I am aware of people who are fairly young who, having encountered mental health conditions very young, develop cardiac situations in their 20s. This is not uncommon. There is global research out there. So, when we talk about mental health, it is not just about understanding that we are dealing with the immediate causes but understanding that perhaps the effect of medication from a very young age can bring complications in life as you go forward. That is a problem for the individual because you advance the risks of death earlier, and it is something that will affect the state eventually because of the provision of care that needs to happen.

620 The theme for World Mental Health Day last year was 'Mental health is your universal human right'. This year it is 'My health, my right'. This is not a unique issue for Gibraltar. That is such an obvious thing to say but it is important to see all this in a wider context, not just on the granular aspects of the report itself. That is why, when I have been speaking on this motion, I have been keen to make the case that it is about the detail but it is also about stepping back from the detail and understanding the broad aspects of it. Close to one billion people globally have a mental disorder, and those with severe mental disorders tend to die 10 to 20 years earlier than the general population, with suicide claiming the lives of close to 800,000 people every year: one person every 40 seconds. Those are issues that have touched Gibraltar too, because they are mentioned in the 2019 report, with so many people talking about those failures of the system having an effect on that.

630 I certainly welcome improvements that have been made to deal with all those issues, but it is clear from reading it that the report also notes deficiencies, and if we are going to be even-handed I believe that we should note those flaws also when we come to doing so in the motion.

635 For those reasons, Madam Speaker, we cannot support the motion as drafted, but I will give notice, if I may, of amendments to the motion, so if Madam Clerk comes round, I will hand to her the –

640 **Chief Minister (Hon. F R Picardo):** She is not Madam Clerk; she is the usher.

Hon. Dr K Azopardi: Yes, well, I did not know if she had some kind of title. I did not want to be rude. (*Interjection*) I see.

645 I will wait for Madam Speaker to have the amendment.

Madam Speaker: Had the hon. Member's proposed amendment been circulated prior to now?

650 **Hon. Dr K Azopardi:** Sorry, for the record, I think what I have said for the last two minutes has probably not been recorded – but I hope that it will be audible enough – because my microphone was not on.

What I will say, Madam Speaker, is that I give notice of the following amendments to the motion standing in the hon. Lady's name. I will set out the text of the amendments. I will read it out for the purposes of Hansard, but let me go through the amendments first:

- (1) *The insertion of 'the 2023 MHB Report'.*
- (2) *After the words 'Mental Health Board Gibraltar Annual Inspection', the insertion of '2023 MHB' before 'Report'.*
- (3) *The insertion of 'that the Mental Health Board considers that there have been improvements to' before 'mental health facilities' in the sixth paragraph.*

- (4) *In the sixth paragraph the deletion of 'clear and significant improvement of' in the sixth paragraph.*
- (5) *The insertion of 'but also makes critical findings and recommendations it considers should be actioned.'*
- (6) *The insertion, as a new seventh paragraph, of 'NOTES the Mental Health Situational Analysis Report Gibraltar, prepared by Public Health England for the Government dated April 2019 (the 2019 Report).'*
- (7) *The insertion of a new eighth paragraph: 'NOTES the Gibraltar National Mental Health Strategy 2021-2026'.*
- (8) *The deletion of 'FURTHER BELIEVES THAT' and the insertion in its place of 'CALLS ON' at the front of the ninth paragraph.*
- (9) *The deletion of 'will continue to' after 'Government of Gibraltar' in the ninth paragraph.*
- (10) *The insertion of 'facilities in Gibraltar further' before 'improve' in the ninth paragraph.*
- (11) *The insertion of '2023 MHB' and '2019 report', in the 10th paragraph and the twelfth, and final point, the addition of a new twelfth paragraph as follows "and further agrees to establish a Select Committee of this House in the area of mental health, with such terms as are agreed between the Government and the Opposition".*
- (12) *The addition of a new 12th paragraph as follows: 'AND FURTHER AGREES to establish a select committee of this House in the area of mental health with such terms as are agreed between the Government and the Opposition.'*

655 The effect of those amendments, Madam Speaker, would be that the motion would read, as amended, in this way:

THIS HOUSE:

WELCOMES the tabling of the Mental Health Board Gibraltar Annual Inspection Report 2023, the 2023 MHB Report, by the Minister for Health Care and Business, the Hon Gemma Arias-Vasquez MP.

NOTES the contents and recommendations of the 2023 MHB Report, as set out therein.

THANKS the Mental Health Board for their work in producing such a detailed report.

BELIEVES the general overarching view of the report when read in full demonstrates that the Mental Health Board considers that there have been improvements to mental health facilities in Gibraltar but also make critical findings and recommendations it considers should be actioned.

NOTES the Mental Health Situational Analysis Report Gibraltar prepared by Public Health England for the Government dated April 2019, the 2019 Report.

NOTES the Gibraltar National Mental Health Strategy 2021-26.

CALLS ON His Majesty's Government of Gibraltar to work tirelessly, to ensure that mental health facilities in Gibraltar (i) further improve and (ii) remain a priority on His Majesty's Government of Gibraltar's agenda.

AND CALLS on His Majesty's Government of Gibraltar to consider implementing any recommendations contained in the 2023 MHB report and 2019 report which remain outstanding and are in the interest of mental health service users in Gibraltar.

AND FURTHER AGREES to establish a Select Committee of this House in the area of mental health with such terms as are agreed between the Government and the Opposition.

Madam Speaker, I so move.

660 The amendments that I put forward are intended to be that even-handed presentation, warts and all, to quote from the hon. Lady, in neutral terms without adopting a politically partisan view, because we are going to note the amendments, noting the history of where this comes from and the history of the strategy – the hon. Lady's government strategy – and simply saying, at the end,

that we should have a Select Committee on mental health. Since the election, there have been a number of Select Committees in a number of areas convened, which hopefully will do constructive work on special needs, the environment and parliamentary reform. I would hope, given everything that the hon. Lady has said about the need for a consensual approach, a non-partisan one, she will also agree that there is a need for a Select Committee on mental health so that, truly, we can work together in this area.

Madam Speaker, I commend my amendment. (*Banging on desks*)

Madam Speaker: I now propose the question in terms of the amendment moved by the Hon. the Leader of the Opposition.

Does any hon. Member wish to speak on the amendment?

Chief Minister (Hon. F R Picardo): Madam Speaker, I will rise to address the extraordinary amendment that the Hon. the Leader of the Opposition has proposed; extraordinary because he has proposed it as if he were the one trying to depoliticise the issue. That is extraordinary only insofar as it is constantly the hon. Member's partisan refrain. That is to say he constantly suggests that he is the one who wishes to be even-handed, that he is the one who wishes to ensure that there is not any partisan inflection in anything. Indeed, in rising to respond to the hon. Lady's, in my view, fairly neutral and even-handed motion, he has suggested that it was quite terrible that she did not consult him before moving the motion, in order to ensure that it could be passed, perhaps with unanimity, and yet now he moves an amendment in respect of which he has not consulted the Government. By the same token, given that he has told us that if we had wished, by his barometer, to bring a motion which was non-partisan, we would have checked with them first, undoubtedly he knows that using his own standard this amendment is not one which is moved by a desire to bring an even-handed, non-partisan texture to the motion. Madam Speaker, you will not have been surprised that although in the past hour we have been treated to a rather listless presentation of the hon. Member's arguments, those arguments, though passionless, were nonetheless entirely partisan. If you get up to say that the Board's recommendations have to be looked at warts and all in order to be fair, what you cannot do is look just at the warts. You cannot spend an hour looking at warts – indeed, finding the few warts – and say that you are trying to do a non-partisan presentation of the thing.

In that context, the hon. Gentleman forces my hand in getting up to respond to these amendments – and I am responding only to the amendments at this stage, Madam Speaker – in saying that it is remarkable to hear these things from him. It is absolutely true that he wrote to me proposing a select committee and trying to have a different approach to matters of mental health and that, with my former Ministers, we were seeking to pursue that and we did not move on a motion that he had presented because we were seeking to pursue that. Perhaps I am not surprised that that is what he should want to do.

We operate on the basis of an adversarial system of Government and Opposition, and that adversarial system is one that they enjoy the benefits of on a number of subjects. Why is it that they want a non-partisan approach to matters of mental health: because, as the Minister says, this is an area on which we should be working together, or is it because, as the Hon. the Minister for the Environment will recall, the state of the mental health services in Gibraltar when we took over in 2011 was so ... I am going to not hesitate to use the word 'disgraceful', that they have a record in government, of which he was a Member for 8 out of 16 years, that they wish to bury under consensus. When they were in opposition up to 1996, Ernest Britto used to refer to the mental health services and KGV as the Cinderella of the health services. Well, that Cinderella had the benefit of the kiss of life from Sir Joe Bossano as Chief Minister, the Community Mental Health facility enjoyed the full support of the Government, we changed the way between 1988 and 1996 that mental health services were done, and in 2011 Cinderella was dead. Not even a kiss from John Cortes as Prince Charming could revive her. Her three ugly sisters had moved away. KGV was

worse than a ruin. If you went to KGV today, abandoned as it has been since we finally were able to move to Ocean Views four years later, it is in no better state than it was when we visited on 1st January 2012. They are trying to bury their deep embarrassment at the manner in which they neglected the mental health services of our community between 1996 and 2011 with this apparent attempt at consensus. That is the reality of what they are trying to do, and it must be why speaking the language of consensus and saying that we have to identify, warts and all, the things that the Mental Health Report that the hon. Lady has tabled today has identified, he has spent *an hour* talking just about the warts, to then bring an amendment that seeks to take out, in effect, the 'all' and leave only the warts. So, applying his barometer to the way in which he says we should have moved the motion by consensus with him, he will understand that he fails his own test for support for his amendment.

Madam Speaker, he has said other things during the course of his address which I believe are worth responding to, but they do not relate to his amendment, and as I am speaking only to his amendment at this stage I will say on behalf of the Government that the amendment will not enjoy support and, therefore, will be stillborn.

Madam Speaker: Does any other hon. Member wish to speak on the amendment? Yes.

Hon. J Ladislaus: Madam Speaker, this contribution was one which I agonised over for numerous days since this motion was tabled in Parliament on 13th May, not least because of the fact that we are debating a subject in respect of which the Government failed to disclose the latest report to the Opposition before this meeting of Parliament – I appreciate that the Hon. Minister did not need to do so, but it could have been done simply in the spirit of collaboration – but also because of the significant impact that issues of mental health have on people and the positive difference that adequate treatment and support can have on not just their lives but the lives of those around them. The ripple effect that a decline in mental health has is often underestimated and misunderstood. The hold that such problems take frequently leads individuals and their loved ones to desperation. Too many times, it takes someone tipping over the edge completely before a rope is thrown down, and by that point it is oftentimes too late.

What is needed is not reactivity, it is productivity. I say this appreciating that the Hon. Minister has only been the Minister for Health for the past seven months. Nevertheless, in her public address on 13th May, the Hon. Minister expressed that the topic of mental health is no longer a taboo in Gibraltar. Just because something is not taboo does not mean that the stigma attached to it has been dispelled. The subject of mental health is widely spoken about and many are quick to address it in the third person, but few will admit to personal experiences because of the way they perceive that those difficulties will be interpreted. A taboo is something that is not acceptable to say, mention or do, whereas a stigma is when someone sees you in a negative way because of a particular characteristic or attribute. If mental health is cast aside as one of the least important and crucial areas within a health system, the stigma will continue despite the immense work carried out by the NGOs.

It took until 2021 for there to be a reaction by this Government in respect of mental health, by which point they had already been in power for a period of 10 years. They are quick to point out the perceived failings of previous administrations, but would do well to remember that a day is a long time in politics and there is no need to comment any further as to the 10 years that preceded the announcement of the Gibraltar National Mental Health Strategy 2021-26, lengthy both in name and in the time it has taken for there to be a palpable difference in services that are as crucial to many as, say, dentistry, primary care and A&E.

The strategy does precede the Hon. Minister's time as Minister but it does not precede the current Government. There is no doubt that there have been some changes since the damning 2019 Mental Health Situational Analysis Report prepared by Public Health England, and the suggested amendment to the motion by the Hon. the Leader of the Opposition reflects an

765 acceptance that there have been some changes – it is accepted – but it is difficult to make
comparisons between that report and the subsequent reports prepared locally by the Mental
Health Board, not because the latter is not in a position to prepare them, far from it, but simply
because different approaches will have been applied. That said, and having had sight of the 2023
Report tabled by the Hon. Minister at this session of Parliament only days before this
contribution – which, of course, this side of the House is grateful to the members of the Mental
Health Board for producing and the publication of which we do welcome – there remain to date
770 serious deficiencies in mental health services in Gibraltar which are persistently highlighted by the
public and NGOs.

I must emphasise at this point that I prepared this contribution prior to having had sight of the
Report and I, therefore, refer to issues that have been raised by NGOs and service users time and
time again, as well as to those issues that I am personally aware of, be that through personal or
775 professional experience. Interestingly, a lot of those issues are mentioned within the Report and
I sincerely hope, therefore, that the Government will pay close attention and set out to address
those pressing issues because, whereas the motion tabled sets out that Government will consider
implementing any recommendations contained in the Report, there is no firm commitment to
make any changes. Indeed, I would urge the Hon. Minister to give due consideration to the
780 amendments tabled by the Hon. the Leader of the Opposition regarding the critical findings and
recommendations that the Board, in its Report, considers should be actioned and to make a
commitment to take firm action.

The reality, as expressed by many, is not that there has been a clear and significant
improvement of mental health facilities in Gibraltar as purported in the statement in the Notice
785 of Motion filed by the Hon. Minister for Health; the experience of too many service users is,
indeed, quite the opposite. As a lawyer by profession, I am not one to make a sweeping statement
without providing evidence of the assertion which I am making, and there is ample evidence to
suggest that mental health services are seriously lacking and letting down some of the most
vulnerable.

790 Take the fact that we are still desperately in need of a psychiatrist based in Gibraltar or the
surrounding area, with a specialism in children and adolescents, and the waiting time for a child
to see a psychologist – which, incidentally, we were told on Tuesday of last week was seven weeks
and the report cites is two to three months, so at the minimum it will be around eight weeks, and
that appears to be a best-case scenario. In the November 2023 session of Parliament, the Hon.
795 Minister, in a question as to how many psychiatrists are employed full time by the GHA who are
qualified to treat children and adolescents, responded that for a jurisdiction as small as Gibraltar
it does not make sense to employ a specialist in each of the 11 subspecialties of psychiatry. She
then went on to state:

In Gibraltar, two of the general psychiatrists devote four sessions each week to children and adolescents with
mental health needs. These two psychiatrists and the entire multidisciplinary team in Gibraltar are supported by a
UK-based specialist in child psychiatry. The UK-based specialist works remotely for the GHA for four hours each
week – that is two sessions of two hours each – and he visits Gibraltar for a week once every three months. During
the course of that week, he offers face-to-face consultations to children and their families.

800 The reply last Tuesday was much the same. That approach is quite incredible in light of the
obvious rise in the number of entrants to St Martin's School in recent years and the rise in the
number of children with special needs in our community, a lot of whom require specialist
psychiatric treatment in terms of medication, considering also that we live in an age where social
media and a huge dependence on the use of electronic technology are, in many instances, having
805 a significant detrimental impact on the mental health of children and we have a ticking time bomb
of catastrophic proportions if the issue of a child or adolescent psychiatrist is not urgently
addressed.

It is notable that a report prepared by the Royal College of Psychiatrists outlined the following:

A child and adolescent psychiatrist is a medically trained specialist with skills in the assessment, management and treatment of mental health problems, disorders and illnesses in children and young people under the age of 18. The child and adolescent psychiatrist can also offer expertise in disorders starting in childhood and adolescence to adult mental health services during transition from child and adolescent mental health services (CAMHS) to adult mental health services. Like all psychiatrists, they are trained to integrate biological, psychological and social factors when working with patients (the bio-psychosocial model). Their training takes into account the following key features of working with children and young people:

- developmental changes are most marked during childhood and adolescence
- children have to be viewed in the context of their families on whom they are generally dependent, and definitions and compositions of the families are changing all the time
- the cultural context of the child is highly significant
- more often than in adult cases, the nominated child does not present themselves but is presented
- cultural mismatches between young people and their carers may affect presentations to mental health services and how they are managed (Dogra, 2014)
- children need to be understood in the context of their wider systems: school, local communities, healthcare, etc.

Occasional visits by a locum for a week every three months are quite obviously, I would hazard to suggest, not sufficient to meet the growing demands on the Health Service in this area and the needs of children and young people. Far too many are falling through the cracks. What William Wordsworth expressed in one of his poems comes to mind: the child is father of the man. It is the right of those children to be given every possible opportunity to thrive, and the current system is failing a lot of them and their families. This is certainly not an area to make misplaced attempts to save money, and I would, once again, urge Government to identify and employ a full-time child and adolescent psychiatrist. I do welcome the fact that the Hon. Minister has, today, commented that the complement will be reviewed, if necessary. There is, in fact, already at least one, I can say, ready, willing, available and working within the private sector in Gibraltar, who can take up the role.

But then it is not just the children and young people in our community who are deeply affected by the shortfalls in the services provided in this area of health. In my seven months as Shadow Minister for Health, and even before that, I have encountered many instances where deficiencies in mental health services provision have a serious impact. I think it is of the essence that I do outline some of those where a clear trend has emerged, not for the purpose of scoring political points nor criticising for the sake of doing so, but in order to hold Government accountable and to raise awareness of areas in which services require drastic improvements.

When I left legal practice just three months ago, I was well aware that there was a dire need for counselling and therapeutic services to be provided at His Majesty's Prison. Moreover, that need arose some years ago, about three years ago to be more specific, as outlined at page 59 of the Report, when the counsellor who used to attend at the Prison retired: another example of a lack forward planning and the consequences that this has on service users and on the public at large. I quote from the Report at page 59:

This gap is doing a great disservice to these individual as well as society generally, which will have to bear the cost of their inability to function in the community and, in the short to long term, bear the financial and social costs of re-offending.

An aim to rehabilitate should be at the heart of every penal system, and the lack of provision of therapeutic services in prison only serves to contribute towards the revolving-door effect that is seen with repeat offenders, who are getting younger and younger. Intervention at the earliest possible stage is key to avoid people from becoming hardened offenders. The Prison has waited long enough for this service to resume and it should be reinstated without any further delay. These issues that I raise in respect of the gap at the Prison, where there is not a counsellor, also tie into the issues in respect of the rise in the number of young offenders, which we were talking about last week in Parliament.

840 I have been deeply concerned about the rise in the number of women who are finding themselves without psychological support in instances where they may have had a miscarriage, been informed of potential issues with the health of their unborn child, are suffering from infertility issues, have experienced a traumatic birth or are suffering with post-natal depression. The list is not exhaustive. Pregnancy, childbirth and the first months post birth are some of the
845 most vulnerable times in the life of a woman. I was, therefore, particularly alarmed recently when I was informed by a new mother that it had been suggested to her that her referral to a counsellor would not be worthwhile, on the basis that there was a waiting list of between six and seven months to be seen and by that point her symptoms would likely have improved. When a woman finds herself in that situation, inordinate delays are simply unacceptable.

850 Turning now to Ocean Views and the facilities on offer to some of the most seriously affected by mental health issues, service users are very much in need of something as simple as the cafeteria reopening, and we can see at pages 26 and 27 of the Report that that is the case. At page 27:

The cafeteria is a case in point. It was the heart of OV bringing together patients, staff and relatives. The reason why it has taken so long to be re-opened escapes the Board.

855 It is not just a place where service users can go to have a coffee and a snack. The importance of having a space where service users and their visitors can build a sense of community cannot be understated. Neither can the fact that it could be used to undertake activities that could enrich the lives of long-term patients, such as art therapy, which brings me to another topic which is often overlooked and which has been demonstrated to bring about very positive results in mental health patients: the inclusion of complementary therapies as part of a treatment package. Art
860 therapy, drama therapy, music therapy and dance and movement psychotherapy, to name but a few, keep the mind occupied and help individuals feel engaged and productive. We have the professionals in Gibraltar with the skills to deliver these therapies. It is worthwhile placing more importance on them with a long-term view to reaping the rewards, both for individual service users and the Health Service itself.

865 On the subject of Ocean Views, however, one cannot pass by without commenting as to the fact that many nurses in our mental health facilities are not receiving proper training to deal with service users within this highly specialist area. This is resulting in unsafe working environments both for service users and other nurses and care professionals who are left to deal with the impacts of that lack of training.

870 Another keenly felt shortcoming by service users, which is undoubtedly also felt by clinicians and healthcare professionals at large, is the inadequacies in the communication systems between departments. An integrated approach is necessary to ensure the success of mental health services. This is an issue which is prevalent in many areas of our Health Service but I have been provided with examples of this within the mental health setting.

875 The importance of an adequate care plan when a service user presents at any one of our mental health facilities cannot be underestimated. It is an essential communication tool between health and care professionals and there is a real need for implementation of a strict requirement for these to be kept and regularly updated. Lack of resources seems to be a theme running through a lot of the issues which we, the Opposition, have been made aware of, and even, for my part and
880 some of my colleagues, personally experienced.

I take this opportunity to say that there is no greater way to depoliticise an issue than to speak from a personal angle on it. Either that is the reason behind the answer which I received from the Hon. Minister, namely the lack of resources, in November, as to whether there were pathways within the GHA to diagnose ADHD in adults, or the truth is worse and it reflects an antiquated
885 attitude and approach by Government to mental health thus far. It is somewhat shocking, to put it diplomatically, to have been informed in November:

ADHD affects three to four in 100 adults. A vast majority of these individuals function relatively well in society; they hold down jobs and they are in stable relationships. ADHD in this setting is not generally considered a severe mental illness. In the GHA we assess and treat ADHD only where it is co-morbid with a severe and enduring mental illness such as schizophrenia, bi-polar affective disorder, addictions, etc. The GHA does not currently offer a service for adults who are otherwise well and seeking a diagnosis of ADHD. If individuals receive a diagnosis of ADHD and are established on medication in the private sector, the Mental Health Service in the GHA will review the diagnosis and treatment plan. Where appropriate, these patients will then be offered the same medication through the GHA and then their care will be transferred to primary care physicians in the GHA.

890 I can say that if an adult is seeking a diagnosis of ADHD, they are not considered to be otherwise well. Nevertheless, every cloud has a silver lining and the silver lining here is that Government committed soon after to the creation of pathways to support and detect those with ADHD and ASD and there followed an agreement that the Government and the Opposition would collaborate on the neurodevelopmental strategy and depoliticise the matter. Even though the way I am speaking at the moment may sound harsh and may sound like I am politicising the matter, it is still the aim of this side of the House to collaborate on such issues.

895 It is all, however, well and good to implement new pathways but we must have the professionals to ensure that they can appropriately be put into action without inordinate waiting lists. On Tuesday, the Hon. Minister, when I suggested that we do not have enough mental health professionals to implement the intended pathways and could benefit from a full-time psychiatrist, insisted that we do. Nevertheless, it is notable that at page 43 of the Report, it states:

the Board did have concerns about the waiting lists. It is all good to have a system in place, but is it having an impact on the time that children have to wait to see a professional?

There is a waiting list of two to three months to see a Psychologist and if your child is suffering meltdowns and has acute problems, it is something you do not wish to hear. Every patient on the Psychologist's list will require between six to eight sessions, so it is understandable that there is a waiting list. Mental health issues requires a very different approach and time input.

The question then arises, of considering the appointment of an extra mental health practitioner in order to improve access to services, especially as the waiting list for ADHD services is far too long.

900 We remain keen to depoliticise matters, nevertheless, and the suggestion that the Hon. Leader of the Opposition has been making for some years now and has inserted into the proposed amendments to the motion in respect of the establishment of a Select Committee of this House in this area of mental health demonstrates that willingness, but it must be emphasised that the tabling of the motion, the subject of this contribution, without first having provided copies of the Mental Health Board's Report to Members on this side of the House, appears to be steeped in political strategising, perhaps even a concern about the contents of the Report. Indeed, delays in publishing these reports have been a theme in the past with the 2019 report having been published by Government 18 months after it was tabled and soon after the 2019 election, and the 2023 Report only tabled now, in spite of the Hon. Minister having received it four months ago. The public will make of that what they will. What I will say is that, unfortunately, our ability to provide contributions to this debate with the benefit of the views of the Mental Health Board has been curtailed. It is, I would say, a disservice to Gibraltar that we have been unable to have further conversations with NGOs and service users in light of having received a copy of this Report. It is very much a situation where the cart has been put before the horse, and the horse, I would suggest, has been fitted with blinkers.

915 Again, it may sound like I have attempted to politicise matters but I would not be doing my job if I had not emphasised the issues outlined herein and I do still hope that these lead to cross-party collaboration as outlined once again by the Hon. the Leader of the Opposition in his suggested amendments to the motion and, of course, in the 2021 motion that the Hon. the Leader of the Opposition brought at the time. I hope that the changes noted within the next report of the Mental Health Board provide even more positive findings than this year's as a result of collaboration. We are a small place, but it is for that exact reason that we could lead the way in

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many aspects of mental health services and I hope that is certainly the case in future. I will be here to collaborate on this, as will my colleagues, but I will also hold Government to account when there are failings and shortcomings, albeit I will do so in the spirit of being constructive.

925 Thank you, Madam Speaker. (*Banging on desks*)

Madam Speaker: For the avoidance of doubt, whilst the hon. Member did speak about the amendment, it seemed clear to me that the hon. Member was also speaking about the substance of the motion as a whole. Would the hon. Member agree?

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Hon. J Ladislaus: Yes, Madam Speaker, that is exactly it.

Madam Speaker: Does any other hon. Member wish to speak on the issue of the amendment? No? (*Interjection*) No, I am asking for amendments. What we have before us now is the original motion with the amendment proposed by the Hon. the Leader of the Opposition.

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I now put the question in terms of the amendment – Sorry, yes, I beg your pardon. Does the Hon. the Leader of the Opposition wish to exercise his right of reply on the issue of the amendment?

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Hon. Dr K Azopardi: Madam Speaker, I am replying on the amendment?

Madam Speaker: If the hon. Member wishes to do so, he may, yes. That is what we are talking about now, the amendment.

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Hon. Dr K Azopardi: I do wish to reply on my amendment. The Hon. Chief Minister calls my intervention extraordinary. Well, he will forgive me for thinking that the extraordinary contribution that has been made this afternoon so far, of all the contributions that have been heard, is his. The one that has been partisan is his, and full of contradictions I have to say from the approach. The contradiction is this: it is the hon. Lady sitting next to him who has said that she wants to adopt the approach of warts and all, and that is what the amendment does. I have conceded that there are improvements, but I have also said that there are critical findings, and I have read those extracts so that everyone can hear it. If he wants, I can also read the parts where there are improvements, but that does not affect the substance of the amendments because the improvements and the critical findings are all part of the same motion as amended by me, whereas the one put forward by the hon. Lady only referred to the improvements. So, I was trying to emphasise, in presenting the amendment, that there were critical findings.

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He calls my contribution listless. Well, it is a matter for people to decide how they view my contribution. I considered his contribution blinkered and partisan, and somewhat angry, I have to say, an undertone of anger, and it struck me, given that the amendment is so ostensibly neutral, that I could almost have said anything and I would have got the same response from the hon. Member, almost as if he does not want us to be consensual in our approach. He complained that my intervention was an hour long, with emphasis on the hour. Is the hon. Member suggesting that when we debate the serious matter of mental health it is not deserving of his precious one hour of parliamentary time? I think it is deserving. The hon. Member is scribbling away furiously now, but I remind him that he cannot reply to my points on the amendment when he gets up. (*Interjection*) I am not the Speaker but I am responding to his furious notetaking because I anticipate that he may wish to squeeze it in somehow in a ducking and diving in his contribution – but that is a matter for him. We will see. (*Interjection.*)

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Madam Speaker: I remind hon. Members not to comment from a seated position. Continue.

975 **Hon. Dr K Azopardi:** The warped analysis of the past is also what it is: it is warped. Somehow, I have got up, having written to him 12 months before putting the motion in 2021 ... I wrote to him to try to take a non-partisan approach. I wrote to him to give him time to think about a select committee on mental health. Somehow, that was a convoluted strategy, hoping he would not reply because I wanted to load the decks and bury the past. It is complete nonsense, Madam Speaker. It is a warped analysis of the motivations of the Members on this side, where we have always sought, when I have been here ... and I have got up, to try to broker a consensual approach.

980 The reason we put the motion that we did in 2021 asking for a select committee was because after 12 months he had not replied, and so we put it forward, but I then sat down with the predecessors of the hon. Lady trying to take forward a consensual approach that I thought we were taking forward.

985 Despite his intervention, his warped analysis of the past of what they inherited and all of that, I am not going to go there. Does he really want me to go there as to what we inherited in 1996? *(Interjection)* Do we really want to do that? I will tell him one thing about mental health: the picture of mental health and the pressures on the mental health services in 1996 were completely different to those in 2024. It is almost 30 years ago. Most people did not have mobile phones, there was no social media, Facebook had not been invented, the pressures that young people have on their gadgets, that are almost magnetically attached to their hands, and the effects it has on anxiety and depression and the accessibility of social media bullying to young people did not exist in the 1990s and the explosion of special needs children in our schools did not exist in those days, so he will forgive me for thinking that all of that is smokescreen and nonsense.

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995 The hon. Member has come to this House hearing a consensual and neutral approach and has been intent on saying that he will reject anything that we are putting forward. It is a matter for him, but on an issue as serious as mental health what is disgraceful is his attitude on this issue, which should be consensual. It is a matter for him because the amendment I have put forward, that people have read, recognises in its core that the Report, when read in full, demonstrates that the Mental Health Board considers there have been improvements but also makes critical findings.

1000 For the reasons I have read out, that is neutral; it is not a matter for disagreement. People can read the Report because it is publicly available and they will make their own minds up as to that.

1005 For those reasons, Madam Speaker, we would say that this amendment should be supported because it is the consensual way forward if the hon. Member really wants to adopt a consensual approach on the issue of mental health.

Madam Speaker: I now put the question in terms of the amendment moved by the Hon. the Leader of the Opposition. Those in favour? **(Opposition Members: Aye.)** Those against? **(Government Members: No.)** The amendment is defeated.

What the House has before it now is the original motion as moved by the Hon. the Minister for Health, Care and Business. Does any hon. Member wish to speak on that motion? The Hon. Minister, Mr Cortes.

1010 **Minister for Environment, Sustainability, Climate Change and Education (Hon. Prof. J E Cortes):** Madam Speaker, I feel I have to rise because I was Minister for Health between 2011 and 2016 and responsible for mental health. I think I heard the Hon. Mrs Ladislaus mention that this Government had essentially not done much until 2021, and if that were the case then I did nothing for mental health in the six years that I had the privilege of being Minister for Health, and that is not what the facts reveal.

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Not only does the Hon. Chief Minister recall that day on 1st January 2012, which will be forever marked in our hearts, and how we worked very hard to do away with the worse-than-Victorian conditions of KGV and replace them with Ocean Views, but I also brought the very Mental Health Act that set up the Mental Health Board and led to the Report under discussion today, in 2016, to

1020 repeal an Act that I think went back to 1968 – clearly completely out of date, even more so than
the way that the Hon. Leader of the Opposition has explained the differences now.

Madam speaker, if I may also comment that what we are talking about today is not unrelated
to special educational needs or disabilities or to the report that we published a couple of months
1025 ago, but I think we must be careful that we do not confuse special educational needs and mental
health. There is a lot of overlap and there are a lot of things in common, but the terms are not
interchangeable because there are differences between the two, although, as I say, there is a lot
of overlap.

The discussion today is not unrelated either to the review of mental health in schools, which
we produced, probably around 2018-19, which led to the creation of school counsellor posts for
1030 the first time ever and the excellent work that the school counsellors do. I also have to comment
on the excellent counselling course that is being run by the Gibraltar College, which has, in fact,
been praised by the accrediting body as being one of the best anywhere where these courses are
held.

Finally, I think it is also relevant to note that the mental health of young people, which has
1035 been referred to constantly today, is constantly reviewed by the Department of Education and I
have no doubt that the current pupil-centred education that we are providing in our schools
provides a support mechanism for children and young people's mental health. Again, I have little
doubt that this change in the way we teach in our schools will be reflected in improvements in the
mental health of young people as they grow older.

1040 Thank you, Madam Speaker. (*Banging on desks*)

Madam Speaker: The Hon. Mrs Sanchez wanted to speak.

Hon. A Sanchez: Thank you. Madam Speaker, I would like to start off by taking this opportunity
1045 to express my gratitude to all the hardworking NGOs and stakeholders involved in mental health
and well-being within our community. Their tireless efforts throughout the year significantly
improve services and raise awareness and acceptance.

Cross-party collaboration on this issue is, indeed, imperative. To foster such collaboration and
prepare for a productive debate on this motion, I wrote to the Hon. Minister on 21st May upon
1050 receipt of the Parliament Agenda. After learning that the Mental Health Board Annual Inspection
Report 2023 would be laid before Parliament this session and noting that she would also be
moving a motion, I sought clarification on the timing of the motion given that we had not received
the Report at the time of my email. I am still awaiting a response to said email. In an effort to
foster cross-party collaboration, I humbly ask the Hon. Minister to consider being more
1055 communicative with her Opposition colleagues.

Hon. G Arias-Vasquez: If the hon. Lady can give way –

Hon. D J Bossino: You need to say yes or no. She can respond.
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Hon. A Sanchez: Yes. (*Interjection*)

Madam Speaker: The Hon. Minister is asking you to give way because, I presume, she has a
point to make on something you have just said, but it is a matter for the hon. Member whether
1065 you choose to give way or not.

Hon. A Sanchez: Yes, I will give way.

Hon. G Arias-Vasquez: I do not believe I have received such an email, Madam Speaker. If the
1070 hon. Member has ... I apologise, but I have not received such an email.

Hon. A Sanchez: I can show her later, if she wishes to see it. (*Interjection*)

1075 Unfortunately, as my colleagues have stated, we received a copy of this Report only after the
Minister issued a press release on a self-congratulatory motion about a report that Opposition
MPs had not yet seen and on which we had not yet voted. As my colleague has stated, we would
have welcomed the opportunity to discuss the report with NGOs and affected members of the
community in preparation for this motion. We can say that we want cross-party collaboration but
I do not see how this is conducive to cross-party collaboration. As the Hon. Minister has pointed
out on social media and here today, there needs to be cross-party collaboration on crucial matters
like this. The Hon. Minister cannot be so eager to commend herself on such a critical issue. It is
1080 perplexing why the Minister would table such a self-congratulatory motion on a report that
specifically stresses that it is neither a critique nor a celebration of the current mental health
system. It emphasises that platitudes get us nowhere and neither does negative criticism, but in
her eagerness to congratulate herself and the Government, the Minister seems to overlook the
critical findings in the Report. If the Hon. Minister was keen to commend herself, she could have
1085 at least waited until all Members of Parliament had voted on the motion.

Madam Speaker, turning to the Report, it is essential to thank the Mental Health Board for
their continued hard work and dedication in preparing this detailed Report. It would be useful for
the Government to, at some point in the future, commission another independent mental health
situational analysis report, perhaps again carried out by Public Health England, to have an exact
1090 idea of where improvements have been made and where further work is needed.

I, once again, stress the need for the independent regulation and monitoring of services
provided. This is crucial. I, once again, urge the Government to implement the local equivalent of
the Care Quality Commission to oversee the independent regulation and monitoring of care and
services for those needing mental health provisions, as well as the wider provision of health and
1095 social care in general. This should extend to the regulation and monitoring of all health and care
services, whether provided by the Government or private entities. On this note, I direct the Hon.
Minister to page 36 of the Report, where it states:

Concerns were also raised by the staff when dealing with Sandpits House and untrained [Medoc] staff who could not
manage situations arising from mental health or medication problems

I urge the Hon. Minister to address these concerns to prevent any preventable mistakes from
occurring. Lessons must be learnt. There should not be untrained staff, especially in these crucial
1100 areas. If the Government subcontracts these services from any private company it must ensure
that all staff are fully trained. I further highlight the point that independent regulation and
monitoring would ensure that standards and quality of services are maintained and, indeed,
always enhanced and improved.

Furthermore, the Report also stresses that the code of practice, which is a requirement under
1105 section 106 of the Mental Health Act 2016, has still not been delivered and is now two years
behind schedule. It is imperative that this is completed and delivered without any further delays.
Notwithstanding, the improvements in mental health services are noted, as is the hard work of
the dedicated professionals in this field. These professionals and their dedication deserve praise;
they are the ones who deserve congratulations.

1110 The introduction of the three-year undergraduate degree from the University of Gibraltar in
mental health nursing is a very positive step and we hope it marks the beginning of more courses
and degrees in this and similar fields for our youth. In the area of social care, I urge the
Government to develop training and educational opportunities for young people in this field; we
certainly do need the local expertise.

1115 The report highlights how community support for those needing mental health services has
been strengthened and improved. This signals a positive move away from institutionalisation
following global trends. However, there are still too many individuals who fall through the cracks,
who struggle to cope and who do not receive the necessary services and support. Many rely

1120 heavily on the overwhelming support of family members, who are often at breaking point. I have
to agree with the Report when it states that much more needs to be done to house and care for
individuals with chronic health issues to sustain periods of stable mental health, and without the
right support during the better periods of an individual's journey a cycle ensues where individuals
find themselves sectioned or admitted once again.

1125 Individuals with substance abuse who may also require mental health support continue to face
delays in accessing the detox programme at Ocean Views, and some lack adequate supervision
and support after completing the Bruce's Farm programme. These individuals require significant
support to make their recovery journey a successful one. We still receive too many concerns in
relation to this. There are still too many families that are concerned about this. Furthermore,
1130 page 26 of the Report suggests the need for a clearer pathway for emergencies arising from
alcohol withdrawal. This matter is of grave concern due to its potentially fatal consequences and
I urge the Government to heed the Board's recommendation on this.

Although community integration is desirable, there are situations where supported living
within designated accommodation is deemed most suitable by professionals and families.
Specifically in relation to this, section 11 of the Report, 'Supported accommodation', notes
1135 concern regarding the knowledge and training of the staff at Sandpits House in relation to mental
health. While it is reported that the whole model of care is being addressed, no timeframe has
been provided. The Government subcontracts services for this site and I urge the Hon. Minister to
ensure the provision of suitably trained staff when subcontracting any services for health and care
delivery to the service users of the Care Agency, ERS, mental health services and the GHA.
1140 Anything less is unacceptable and can lead to preventable and unwanted situations that might
have otherwise been avoided.

Regarding Kent House, the Board's recommendations highlight the Government's obligation
to maintain and quality control these facilities if the aim is to treat more patients within the
community. It is surprising that issues with Kent House have been documented since 2019 and
1145 appear to still remain unresolved. It is also disheartening that the Board notes a reliance on
charities and donations for basic furniture for these flats. (**A Member:** Hear, hear.) This issue is
replicated across other care services as well.

I will not delve deeply into Health's specific details but I find it disheartening to read that the
activity co-ordinator at Ocean Views lacks an official job description or an operational policy and
1150 that the role is filled by a part-time enrolled nurse with additional duties. The need for ward clerks
and junior doctors is also noted on pages 24 and 25. I note this not to appear to be partisan or not
to want to collaborate with the Government, but it is disheartening because when you note that
the Government can find resources to appoint advisers but it cannot find resources to value the
work of an activity co-ordinator, or it cannot find resources for ward clerks or junior doctors or
1155 furnishing flats for supported living but it can somehow find resources for unadvertised
appointments and remunerations within the Care Agency and the GHA, it beggars belief.

I also acknowledge the significant improvements made under the National Dementia Strategy
and the hard work of the Gibraltar Alzheimer's and Dementia Society. However, we must ensure
that older adults, both within the ERS facilities and our community, are adequately covered by our
1160 mental health services. Their mental well-being is imperative. We continue to receive concerns
about older adults in need of mental health support who do not receive the necessary care.
Additionally, there must be a clear pathway for older adults suffering from dementia or
Alzheimer's who need to be admitted to Ocean Views. The Report highlights the need to address
and provide proper placements for patients requiring specialist treatment not available at Ocean
1165 Views and this is a matter that needs urgent attention.

Finally, section 7 of the report, 'Gibraltar Young Minds', notes that the ADHD waiting list
remains a significant concern with referrals continuing to be made without clarity on the handling.
The promised ASD and ADHD pathway has yet to materialise. While the Minister has mentioned
developing these pathways, we await their development and implementation anxiously. I note

1170 the Hon. Minister's comments that these are not interchangeable, but they are linked, so I would
like to mention the recent government-commissioned report on the increased prevalence of
special educational needs in Gibraltar that indicates an upward trend, from 20% in 2014-15 to 30%
1175 in 2022-23, compared to 17% in the UK in 2023, driven largely by ASD, ADHD, mental health and
behavioural problems. The Mental Health Board Annual Inspection Report 2023 highlights the lack
of local behavioural specialists, a child psychiatrist, clarity in the ADHD referral process and the
need for the ASD and ADHD pathways. It also notes waiting lists for children to see a psychologist
and the need to review protocols when a child is in crisis. While some of these issues may have
1180 been addressed since the Report's completion, many remain unresolved and have remained
unresolved for far too long. These issues continue to have an impact on children, young people
and adults, who are all in need of pathways and clearer protocols. I welcome the Hon. Minister's
confirmation that issues are being dealt with and that we can expect the publication of these
pathways imminently, but I am certain that the Minister will agree that we cannot afford any
further delays.

1185 Madam Speaker, for the reasons I have given in my contribution, I hope that the Government
will not rest on its laurels and will focus on the critical areas that I and my colleagues have
highlighted, and indeed on the critical findings of the Report, urging the Hon. Ministers to give
consideration to the amendment introduced by the Hon. the Leader of the Opposition to the
motion being discussed today.

Thank you. (*Banging on desks*)

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Madam Speaker: Does any other hon. Member wish to speak on the motion? Yes.

1195 **Hon. Chief Minister:** Madam Speaker, now on the motion as unamended and as a whole, I
want to rise by thanking the hon. Lady for the way that she has ended her intervention because
by telling us not to rest on our laurels, she has recognised, perhaps for the first time during the
course of the two and a half hours that we have had the pleasure of being here to debate this
motion, that there are laurels to rest on. That is the reality, and I guess that is what they have not
1200 liked about the Report that we are debating: the 'and all' after the 'warts' that the Hon. the Leader
of the Opposition spent an hour exfoliating out of the detail of the Report. It is not that I, for one
moment, felt that debating this issue for two and a half hours or for five and a half hours would
not be a good use of the Government's time. He should know that. Government motions are not
moved without the consent of the Leader of the House. The Leader of the House believed it was
a good idea that there should be such a motion. Once such a motion is on the Order Paper, the
only control on how long each Member can speak is in ... Madam Speaker's hands. 'Your Majesty'
1205 was about to roll off! (*Laughter*)

Madam Speaker: It would not be the first time I have been referred to as that, but perhaps
best to avoid.

1210 **Hon. Chief Minister:** [*Inaudible*] ... the only person who could have taken Marlon Brando's role
in *The Last Tango in Paris* and turned that passionate movie into a PG certificate, let's face it. It
was really quite remarkable to have to stay awake during the intervention. That is not to say that
the issue is not without importance, just that the contribution was without colour, passion and
was unengaging. But he should not be concerned about my views about that because he knows
1215 that I have never voted for him and never will; he has to be concerned about other people's views
in that respect.

This is a serious subject. That is why the motion is before the House, that is why the Minister
is talking about continuing commitment and that is why we have to recognise where we have
come in the time that we have been in office, taking the point of genesis for us as December 2011.
1220 We have to take that point of genesis but we can go back to 1988 and see the progress that the

1225 GSLP, when it was first in government, delivered in respect of mental health services and measure
that parameter of eight years with the 16 years that they were in government. That is actually not
something that any of us should eschew doing. It is to measure the political commitment of the
party on this side of the House, now with the Liberal Party, and compare it to the political
1230 commitment of Members opposite. As we have been reminded in the context of their allegedly
non-partisan partisan interventions, that is what they are trying to do to us. Under the guise of
consensus, what they are trying to do is serious adversarial politics. Well, look, no problem,
Madam Speaker. They are supposed to be an alternative government. It is not very often that they
get up here to do the politics of being an alternative government, and indeed, today, all they have
1240 done is to seek to criticise and to ask that we should work with them when they have shown no
sign of wanting to work with us.

Okay, but in this area he might be surprised to hear that it was not just John Cortes and I who
remembered that fateful day on 1st January 2012. Whilst I was on my feet I received a message
from somebody who was there on that day: 'I am so glad you remembered and brought up
1235 1st January 2012. It was a shared moment between yourself, John and me, when we were all
moved to tears.' *'Y van hablar ellos'*, she says, referring to them. *'vergüenza os debería dar'*.
Shame they should have. Those poor souls forgotten for years. Thank you.' I responded shortly:
'Thank you for remembering this as vividly as we do.' She replied immediately: 'I also remember
the promise you made that morning and which you honoured.' That was to confine KGV to this
1240 community's history books before we finished an airport or a new prison, to take the steps we
had to take to look after those who were suffering acutely in mental health crisis. This is not us
remembering something which is convenient from a partisan position. This is the reality of what
was being lived by people in the time that *they* were in office. It is ever the case with the parties
of the right wing that they remember these causes when they are in opposition. They talk about
1245 the Cinderella of the mental health services when they are in opposition and when you get elected
you find that they have let Cinderella die, and as I said before, even her ugly sisters had packed up
and left. That is the reality of what we were dealing with when we were returned to office. So, I
am delighted that now, back in opposition, they have this newfound concern for the mental health
services. I do hope it continues for many years, because it will only continue whilst they are in
1250 opposition.

Madam Speaker, I will forgive the hon. Lady Mrs Ladislaus's intervention in saying that it took
us until 2021 to do anything about mental health services as the error of somebody who has just
been elected and takes the point of genesis as the point of her election and is not seriously telling
us and telling members of this community, who would otherwise regard her contributions to this
1255 House as serious, that nothing was done in the context of the mental health services offered to
this community until 2021, because it is not serious politics to say that. If there is one thing that
has characterised her interventions to date in this House it is the serious nature of the
interventions that she makes, which are credible and which we want to work with, but when you
get up and say something like this, everything else starts to look suspect too, and it is a pity
1260 because of all the subjects that we are dealing with, this is probably the most serious. So, it is not
that I do not want to work on a consensus basis, it is that it is very difficult to see how anything
that they have done this afternoon is actually designed to do anything other than to break the
consensus that was proposed by the Hon. the Minister.

Their deepest complaint seems to be that she moved a motion at the same time as she was
1265 tabling a report upon which that motion was based, and she had read the motion and they had
not. Well, they had time to read the Report before they had to reply on the motion, but before
they replied to the press release on the motion, did they say, 'Let's read that Report and then give
an informed view'? No, they responded immediately, without reading the Report, saying that they
were not going to support the motion: really quite remarkable. The Hon. the Leader of the
1270 Opposition, from a sedentary position, says that is not what they said. I recall saying to the Hon.
Minister, the minute I read their press release, 'They are not going to support the motion.' Perhaps

I am too good at reading even between their own lines to see exactly what they were doing and where they were going.

1275 The leopard never changes its spots. The leopard on the other side of this House is always
wants to work constructively and in a non-partisan manner around their positions. It always
wants to work constructively and in a non-partisan manner when they are in government. It is
really quite remarkable. This he said in the course of his main speech, not just in the context of his
1280 response to my response to the amendment. Of course, it is true that the pressures that social
media has brought to adolescents – and not just adolescents – were not there in the 1990s, but
substance abuse was there. Of course it was. Other pressures were there. It is not that the world
of pressure started with Twitter, TikTok and Facebook; there were other pressures, other social
pressures, other peer pressures. Are they saying that, therefore, they were okay to ignore and
abandon mental health services in our community? That is what came across. He was almost
1285 seeking to exonerate himself and his party from their failures between 1996 and at least 2003,
when he was there, on the basis that TikTok was not around then. You might call it the TikTok
defence that he was trying to deploy: utterly nonsensical.

That we did not have the explosion of special needs children is not because those issues did
not exist. (*Interjection*) The hon. Lady Mrs Sanchez referred to this issue as well, so if he does not
want me to refer to him saying it, I am very happy to say that she said it.

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Hon. Dr K Azopardi: I know he does not want to sit down, but on a point of order, what I said
earlier ... The Standing Orders prescribe a very clear order. I replied on my amendment. I made
certain points on my amendment. He does not, in getting up to speak on the original motion, have
a right to reply to things that I said in my reply on the amendment. It is very simple. He knows
1295 that. He knows he is ducking and diving to get his points in, like he always does.

Hon. Chief Minister: Madam Speaker, I do not accept that. The point about special needs
children has been made in the debate not just by him, it has been made by others. (*Interjection*)
If he does not like the fact that I am referring to it in his reply and doing him the courtesy of dealing
1300 with it, I will not; I will deal with it in the context of exactly the same point being made by
Mrs Sanchez. Of course, it is true that there are more special needs children today diagnosed, but
it is not, in my view, necessarily true that there are more special needs children today. The key is
the 'diagnosed'. That is to say we have identified more people who need special assistance. Or
does he forget that we were all sometimes lumped together with people of varying needs and
1305 abilities, many of whom were cruelly discarded by our community and our society and today are
embraced as requiring those special needs? If we went back and applied the same standard of
diagnosis to those who were in school... The hon. Lady Mrs Sanchez apparently finds it hilarious
that I am saying this when it is one of the most serious points I am going to make this afternoon.
If we went back now and applied today's standard of diagnosis to a year, for example, our intake
1310 to comprehensive in 1984, are they sure that there would be not exactly the same ratio of children
needing special needs education? Are they sure of that? I am not so sure of that. We have changed
the way that we do diagnosis, we are better at diagnosing this and we are giving more help. That,
which they use in the context of the arguments that they put to damn us, in my view is actually
what they should be saying demonstrates our commitment, because we have been committed to
1315 diagnosing those with special needs. It seems to me that they are getting the wrong end of their
own sticks.

The hon. Lady talks about one of the things that is positive which has nothing to do with the
Government, the three-year undergraduate degree at the University of Gibraltar. I suppose that
is because this Government had nothing to do with the establishment of the University of Gibraltar
and this Government had nothing to do with approving the course that the hon. Lady is proposing
1320 and, indeed, advancing it. So that which in her view, or at least in her presentation right now, has
nothing to do with the Government – another source of great hilarity for the hon. Lady – is what

1325 she is prepared to say is a good thing. Well, perhaps she might take a different view now that I
remind her that actually it is the doing of the Government that brings that about. So, I thank her
for those backhanded compliments that she has given us, perhaps without even realising it
because she has not thought through, logically, the things that she was saying were the things
that were damning of the Government. This motion, unamended as it is, talks about *continuing* to
improve the service and talks about it having to *remain* a priority. Which part of that did the hon.
1330 Lady not understand when she told us that we should not sleep on our laurels? That is exactly
what our motion tells us not to do. Hon. Members opposite will forgive us, or not, for not being
prepared to take their advice on how to act in a manner that is consensual and non-partisan,
especially given what we have seen of their approach in the context of the last piece of legislation
that this House passed before the adjournment on the Inquiries Act and what little regard they
had for the consequences of their comments to the international reputation of Gibraltar. We will
1335 not take any lessons from them on how to act in a consensual manner and in a manner that is
non-partisan.

What we will do is thank Clubhouse for the incredible work that they do and how that has
developed the picture of community mental health provision in our community, something which
we greatly encouraged, that we spent money on supporting and populated in order to ensure that
1340 it can provide the magnificent – and I do not use that word without appreciating the full value of
its meaning – work that Clubhouse do in our community, supporting the Community Mental
Health facility of the Government which, by the way, they are saying we need to rehouse without
adding ‘because we sold Coaling Island’. In other words, when they come here to talk to us about
rehousing the Community Mental Health facility, they appear to want the community to forget
1345 that the reason that we have to rehouse the Community Mental Health facility is because they
sold Coaling Island to a developer, the self-same developer that he gets up and says to me before
the General Election are the rich developers on whose side I am when he is trying to garner votes –
except, of course, the only reason I had to do the Victoria Keys deal was because they had done
the Coaling Island deal. Everything is linked and the hon. Member hates it when I join the dots for
1350 him; I realise that. I do realise that they do not like to be reminded of the fact that the Community
Mental Health facility has to be moved because they sold Coaling Island to a developer. I realise
their nervous whispering is rising in crescendo as I remind them of that, but I have no difficulty in
joining the dots for them.

It is true that in this Report there is reference to progress and improvements and there are
1355 findings which relate to critical issues. That is what the Report says, that is what the Hon. Minister
said, but he did not want to hear it. I suppose that after four failed attempts at becoming Chief
Minister, twice leading two different political parties to failure, you end up having to come to this
place to, in effect, parrot what the rookie Member of the Parliament has said and pretend that
you are the one saying it. She has had the ability to come here and reflect both on the good and
1360 the bad in a Report, and that shows such transparency on the part of the Government and on the
part of the new Minister that the Leader of the Opposition, the four-time Chief Minister-proposed-
but-failed candidate comes here to repeat what she has said and to admonish her for not having
said it.

I was delighted to see the Hon. the Minister for Health wrongfoot the Leader of the Opposition
1365 so effectively in her maiden intervention and I am delighted to see that just as he has failed in his
four attempts to become Chief Minister, he has failed in his attempt to amend this motion and he
has failed to persuade the Government to do anything other than to continue in its support for
the motion as drafted. In doing so, and having heard the hon. Lady, even before she replies I am
delighted to see that her performance in the past eight or nine months just goes to demonstrate
1370 that the people were right to entrust us once again with government and I was right to entrust
her with this portfolio, not least with the aspects that deal with the mental health services.
Therefore, Madam Speaker, I will be delighted to follow her lead and support this motion when it
is put.

Madam Speaker: Does any other hon. Member wish to speak?

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Hon. D J Bossino: Madam Speaker, this is what we have been treated to. Certainly, one of the interventions from the Hon. the Chief Minister leaves me deflated, but I have perked up slightly given the final comments that he has made. The hon. the mover of the motion, the Hon. Minister, said that she wished to steer away from party politics. Those were her words. That is what we were treated to when she presented this motion, but what we have been subjected to, particularly by the Hon. the Chief Minister in his last intervention, has been nothing other than party politics because he cannot help himself. If there was ever an indication, ever evidence that the hon. Member opposite has lost his steam, that he is at the end of his career, as he himself has said, there could not have been a better example of that this evening.

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The Hon. the Chief Minister says that we seek to criticise. In fact, I think the interventions that we have heard from my hon. Friends here, all three of them, have been nothing other than an attempt ... and almost an element of deference to the hon. Member opposite because, actually, what they want to do is to come to a consensus position. In response to the Hon. the Minister, there is nothing in the amendments which have been proposed by the Hon. the Leader of the Opposition which can be described as being party political or partisan in any way, on any objective analysis. It is they who are seeking to make this into a party-political issue and it is a sad day for them but also for all of us. We are treating viewers to a spectacle, but it is inevitable, when the Hon. the Chief Minister speaks, that we have to rise and respond to the things that he says. He is responsible for that; he is the one who creates this atmosphere in this House and he cannot see it in any other way. For goodness sake, he says that he does not want to introduce party politics and he gives us a rather childish history lesson, where he says that everything between 1988 and 1996, when there is the horrible GSD Government in the middle for four terms, returned to this House on four occasions ... I know my political history as well. We nearly made it a fifth time but for a mere handful of votes; I think it was about 250, the difference by which we did not secure a fifth term in 2011. Everything was bad in those years until the new dawn arrived in 2011, and since then everything has been hunky-dory. This is simply childish politics and it is nothing other than a disservice to this very sensitive and very important issue in respect of which there ought to be a consensus approach. That is what the Hon. the Leader of the Opposition was trying to do by introducing the amendment to this motion, and that is what my other learned friends were doing when they made their interventions. There was some criticism, but that is not exclusive to us. There is criticism in the Board's own findings. It is not all perfect, and I hope that the hon. Member opposite, when she responds, acknowledges that the things that we have said are all in this written document's 60-odd pages.

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The hon. Member, like a scratched record, refers to the KGV. I was here in their first term in office between 2011 and 2015 and they made a song and dance of it. They got all emotional. Of course there were improvements, but the reality is that the Royal Naval Hospital project was the GSD's project. If he wants to get silly and party political about it, it was a GSD project. They may have improved it by a reconfiguration of the rooms and all the rest of it, presumably on advice from the relevant experts because I think the criticism was that the rooms were too small. There was an improvement – and there have been members of my own family who have benefited from that – and we are happy to concede that, but that was a GSD project. I feel obliged to get silly, childish and party political about this because he does so. This is a partisan Chamber, it is an adversarial Chamber and we have to defend our record and criticise the hon. Member when he makes those, quite frankly, absurd political points. To leave Cinderella to die, really? Is that what he has to say? Is that what he has to come down to, that we are the party of the right wing? I may have right-of-centre views on certain things. It does not mean that conservative parties around the world do not do good things, of course they do. Certainly I have no issue with that label, but why does he try to create that type of ideological division? Are all the Members opposite really

1425 socialists? I have a question mark about that. Are those members of the Liberal Party really liberals? I am not so sure about that either.

1430 He says that we did not read the Report, that we were very quick to criticise. Well, what did the Hon. the Chief Minister do this afternoon? He did not even read or consider what the Hon. the Leader of the Opposition was suggesting by way of amendment to the motion. He simply knew that he had to vote against it and speak against it, because that is the way he is. He did not properly
1435 consider our amendment. If this House is going to properly work, if this House is properly going to be the subject of positive comments from people out there, this is precisely the thing that Parliaments around the world do: they offer amendments, and it is not an issue. If it were a bigger House it may be that we could have persuaded backbenchers on the other side to vote with us in respect of our motion. We could have changed our own amendments as well. That is how you reach a consensus position, but you do not do so by saying that everything that we offer is wrong and that everything that they offer is right – we are not going to get anywhere and, quite frankly, it would be a disservice, I think, to the people who voted us in here only about seven months ago.

1440 The Hon. the Chief Minister, in one of the poorest moments in his intervention, offers what I think is a rather rudimentary, not facts-based and certainly not science-based comment in relation to why we have more children – some of them now not children – with special needs. He says it – and I give the hon. the mover of the motion the opportunity to correct what the Chief Minister says – without any evidence whatsoever. It is a view that people have. I certainly have a different view and I think that any right-thinking person ought to have a different view. It is not just a question of diagnosis; it is the fact that there are more individuals who are impacted with special
1445 needs. He refers to people in our school year who maybe would have been diagnosed with this, that or the other. There may be an element of truth in that, but how many of the people in our year were non-verbal, I ask him: zero. And how many people suffer that unfortunate condition nowadays? It has grown. So, he does not have the complete answer there, and given that he cannot reply, I would give the Hon. the Minister who moved this motion the opportunity to correct that, something which is so obviously wrong, and it is so obviously sad, quite frankly, that he is using it to make a party-political and partisan point. He says that it is not the same ratio, but irrespective of the reason why we have higher numbers and of what the underlying cause is, the fact is that we have more numbers. The fact is that we have more people who need help. That is a basic fact, which is the point that the Hon. the Leader of the Opposition was making. This is a moving thing. Therefore, the point that he makes about what happened in 1988 is totally
1455 irrelevant. We need to deal with the facts as they are now and the reality on the ground as it is now.

1460 The rest, actually, does not add anything to the debate and less so what he says at the end of his intervention about the Hon. the Leader of the Opposition's political history. What on earth is he talking about? How does that assist? That may be relevant in a different context, in a different debate, but not this one, not when we are debating mental health, for goodness sake. In his usual immature way, it is clear what he is trying to do: he is trying to make us all get accustomed to the fact that he has already anointed his successor when he talks about the mover of the motion as leading the way in relation to this. If the mover of the motion – and I have told her this before in
1465 respect of a different debate – wants to show clear, robust leadership skills, this is her opportunity now, and I would urge her to take a different view. She has already voted in relation to the amendment, but maybe she can move amendments of her own so that we can get to a point where both sides of the House can come out of this House this evening with a unanimous position in relation to this issue. It is possible. She can do it. She has the ability to do it here and now,
1470 another opportunity to show her leadership skills and that she is capable of leading the party on the opposite side and this place more widely. I doubt that she will, because the reality is they have taken a position. In fact, the Hon. the Chief Minister says that he commented to his friend to his left that the Opposition were going to be voting against the motion. Well, we took the same view: 'They are going to be voting against our amendments.' This is how sad all of this is because, quite

1475 frankly, the amendments are totally and utterly innocuous, nothing partisan, nothing aggressively party political in nature at all.

Madam Speaker, I think I have dealt with the points that we wanted to deal with in relation to the Hon. the Chief Minister's intervention and I wanted to move swiftly on to, very briefly, the Hon. the Minister for the Environment's intervention. I make two points. The first one is, once again, it is not about him; it is not about his ego. Who cares whether he was the Minister for this or the Minister for that? It is not about him. It is always about the Hon. the Minister: me, me, me. Who cares? This is much more important than Mr Cortes or his ego. It is nothing to do with that. If he is critical of what was happening before – I do not know when, presumably 2011 – when he talks about the more-than-Victorian conditions, the hon. Gentleman was the Hospital Manager at the time: he could have done something about it. He did not have political leadership but he could have done something about it. Once again, it is not about him. It is a similar point to the one I made earlier about the greater diagnosis point that the Hon. the Chief Minister was talking about, when he says, 'We introduced a new Act in 2018.' That is old news. Why can't he realise that is old news? We had a massive influx only two years ago, which took him by surprise as the Minister for Education, of children with special needs in St Martin's. It rose from an average of six or seven to 20-something, and it continues. I can tell you it is not to do with better diagnosis. Are we seriously saying that there has been better diagnosis between 2020 and 2021? No, there are more kids with problems. That is the reality that this place is facing. I am assuming, because I would not want to think that it is anything other than that, that it is across the board, that it is beyond our shores that this is happening, but it caught him by surprise. Therefore, we need to deal with the situation as we face it now, not patting himself on the back that he introduced a new law in 2018.

In relation to the one comment that the hon. mover of the motion made – I think it was at the end of her contribution – where she says, in her more approachable, consensual moments, that she is willing to consider any points that we raise which are not wholly positive and arise from the subject matter of this motion, which is the Annual Inspection Report of the Mental Health Board, I pull from that string and I would ask her what comment she makes in relation to what the Board says at the end of their Report, under 14(d) Budgets, where they call for, basically, greater autonomy to be given to mental health services. It says and I quote:

Those at the helm of Mental Health Services would be given the autonomy

– this is what they asked for –

to determine how their budget is spent ...

1505 – because, they say –

it is crucial that the decision-makers heed the advice and recommendations of Mental Health staff ...

I would ask her to comment in relation to that and if she has a view in respect of that specific point that the Board members make in their report.

Also, there is a reference to identifying and addressing wastage within the GHA generally, where they say it is the efficacy of resource utilisation that is of concern. I think that is a very serious point which the members of the Board make.

Finally, they make, I think, what is a very interesting and important point, where they talk about ... from a very superficial level, in the sense that I only draw from my personal experience, but I do not have the full picture; the Hon. the Minister will. They say, in 14(e):

Not only is it important to reassess the structural relationship between Mental Health Services and the wider GHA, but it is also worth considering whether there should be greater integration between Mental Health and other care services in the community, such as social care.

I think they make a very valid point, and I would ask her to comment in relation to that.

1515 Thank you. (*Banging on desks*)

Madam Speaker: Does any other hon. Member wish to speak? If no other hon. Member wishes to speak, I call upon the mover to reply.

1520 **Hon. G Arias-Vasquez:** Madam Speaker, you will be glad to know that I intend to be brief in my reply to this motion. You will also be glad to know that I have no intention of going back to 2011, 1988, 1996 or anything of that nature; I am merely going to look forward.

I disagree with the analysis of the report as a snapshot. It is an opportunity for us to look at what is being done in terms of mental health and it is an opportunity for us to account to the public. That is the reason that I have brought the motion today. That is the reason that I thought it was fundamental for this to be debated today, so that we can be responsible to the public for what is happening in mental health. The report is an opportunity to analyse the issues and I will attempt to continue to be constructive on this basis. I am not saying and I have not said in my speech at any point in time that the mental health service provision in Gibraltar is perfect. I have acknowledged throughout that we need to do more for mental health services and I have gone through the report point by point in order to demonstrate what we are trying to do in each of the areas that have been criticised. I have not shied away at any point from the criticisms that the Mental Health Board has raised.

I will only address one political point which has been raised in this debate and that is the question of when the Report was tabled and when the motion was tabled. The Report was given to the Members of the Opposition on Tuesday, 21st May. That is last Tuesday, when we sat in this Chamber. I remember perfectly because it was my birthday. So, on Tuesday, 21st May, the hon. Members were given the Report. They have had a week to read a 68-page Report. I will go further and say that it was given to them at that point in time because that was the approach that was agreed with the Mental Health Board. They told me that they wanted to give the Report first to the senior management of the GHA and then they wanted me to table it in Parliament. I agreed that approach with the Mental Health Board and that is the approach I took. However, I gave a week for them to read the Report because a motion has been presented today. I do not think under any circumstances that it is unreasonable to give a period of a week to read the Report. That is the only political point that I will deal with. Therefore, I will leave the majority of the hon. Member Mr Bossino's discussions to one side because they are largely political in nature, and I will address the other points that have been made.

I am very glad that the Leader of the Opposition has acknowledged that there have been improvements and I appreciate that approach. I have no issue whatsoever in reaching out in future to the Shadow Minister for Health – or to the Leader of the Opposition, if he indeed wishes to be part of these debates – to inform them, prior to coming to Parliament, of what we intend to do. In fact, I have taken that approach with the neurodevelopmental pathway, and we are happy to do so in future on matters of such importance. I will say that and I will reiterate that because we are happy to have that approach. We committed not to publish in the pathways until such time as the hon. Members opposite saw the pathways and we will continue to do so. I will address the pathways in more detail in a second.

I am somewhat disappointed that the hon. Member opposite sought to make the debate apolitical and yet tries to reinstate some political points in that. In fact, we are accused of largely ignoring the 2019 report, but I think it is very important, for the record and for *Hansard*, for me to read the conclusion of that report. I read from the report itself, which says:

There are many positive aspects of the mental health system in Gibraltar. For a small community it has done very well. It has many of the necessary components of a thriving system recognised in the World Health Organisation's framework for mental health interventions. For instance, Gibraltar has some specialist services and residential

facilities. It has a functioning Hospital and a CMHT and primary care delivers a reasonable level of mental health services. The challenge for these components of the system is the lack of strategy, co-ordination and integration.

We took that report and developed a strategy. In fact, from that report, the Mental Health Strategy was developed. So, we took the conclusions of the report and converted it into the very strategy which is now praised. There is a 2021 Mental Health Strategy which is in place for five years and we intend to follow that through. Is the system perfect in terms of mental health? No. Do we pretend it is perfect? Not at all; however, it is better than what we had.

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The Board is auditing what could be done, yes, and we are responding to that audit, and we are responding to the hon. Members opposite and to the public in terms of what we are doing. We have followed the recommendations of the Board and, indeed, we went through, aspect by aspect, the Board's recommendations telling them, where we were failing, what we intended to do, and the ones that we have not addressed yet we actually said that we were parking for now – for example, the dementia strategy, but we had begun to discuss what it was possible to do. So, we are holding ourselves accountable and it is very important to make this point. Since 2019 the Ministry for Health and, indeed, the GHA, has held itself accountable. It created a board which reported on matters of mental health, which held the GHA and the Ministry of Health to account. That is what we are doing and that is why it is important to ventilate these issues.

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I am further very encouraged to see that there seems to be consensus from the Members opposite for us to engage in a study to see what further can be done in terms of mental health. I note the Hon. Leader of the Opposition said that he was happy to get Public Health England involved, or such a body, in order to review the services that are currently provided. I note that I was chastised – and this has been alluded to by the hon. Member Mrs Sanchez – in Parliament for going to experts to seek opinions on these matters, but I note that not only the Leader of the Opposition but Mrs Sanchez thinks that there should be an independent review of the services, and indeed that might be one way of trying to address the issues that have been raised in terms of the job descriptions etc. that the report goes into.

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If we look at the Report – and we are going to look at it very summarily, just to go through some of the points that have been raised – I was accused of being insufficiently even-handed about some aspects of the report. In fact, the speech seems to have been prepared before I delivered my speech, which is slightly sad. I spoke about the digitisation of the files and I said that we looked to have this completed; I will report to Parliament when that is done. Dementia patients: I dealt with dementia patients. Second opinion doctors: we dealt with second opinion doctors. The code of Practice: I am not happy that we do not have a code of practice but we have committed to having that code of practice in place and we have said that the reason that the code of practice is not in place is because we are engaging with stakeholders. Again, engaging with stakeholders is something that the Report tells us to do and it is something that we are doing across the spectrum. So, we are engaging with the Care Agency, we are engaging with the Department of Education, we are engaging with all the stakeholders involved in order to provide a holistic approach to mental health.

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In order to address a point that was made by the Leader of the Opposition and the hon. Member Mrs Ladislaus, we have accepted that the waiting lists need to be addressed. We have noted the criticisms in the Report and we have given an apology to parents who have been waiting, because it is not acceptable to have waiting times. We are looking at ways to address those issues. We said in Parliament that whilst you are waiting for a psychiatrist or a psychologist, there are other professionals who will see you. So, they will see counsellors; they will see other therapists able to assist. We accept that we need to look at the waiting times and we have fully acknowledged that. I fully acknowledged it in my speech and I fully acknowledge it now. The waiting times are being prioritised and I am not seeking to make any excuses about the waiting times. We are saying that we need to do more. We are saying that we need to keep people out of hospitals and we are saying that we need to look at different facilities in order to do that. In order to do that, we need to better improve the Community Mental Health facilities that are available

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1610 to people. We need a better support system, and that is, indeed, what we will endeavour to do. We have taken that aspect of the Board's Report and we will seek to deliver that.

I acknowledge that His Majesty's Prison is a section of the Report which I did not deal with in my initial speech. That is something which, again, the Report says is lacking. We are looking to install counsellors there, and the FMEs, the doctors and the GPs, as the Report says, are picking up a lot of the issues there. But I do acknowledge that that is something which needs to be looked into. I am working very closely with my colleague Minister Santos on different initiatives for the rehabilitation of prisoners back into society, and we hope that we will be able to announce that very soon.

1620 One of the points that was raised was medication. I completely and wholeheartedly agree with what was stated by the Hon. the Leader of the Opposition, saying that alternative therapies are needed in order to keep people away from medication. Social prescribing, for example, is something which I already addressed in my initial speech – social prescribing, the covenant for health. Public Health and the GHA are working together in order to try to maximise those strategies to keep people away from the Hospital, away from institutions and, indeed, away from medication. How do we engage with young people? Again, I agree the default should not be medication; we do agree on this.

1630 I am not going to readdress the points in terms of what each hon. Member said, and I think that the points that I have raised so far deal with some of the points that the hon. Member Mrs Ladislaus has raised. One of the points that I have not picked up yet is the fact that the Report does acknowledge that maternity care is being addressed now and that there are counsellors there to deal with postpartum issues, with bereavement issues in maternity. Again, does more need to be done? Probably. We are looking to assess the needs in that area, but the Report does acknowledge that there have been steps done in that area.

1635 In respect of the cafeteria, the cafeteria has been tendered out and we are currently in the procurement process. Again, we would wish for the cafeteria to have already been in place, but that is already in motion.

1640 The final point to address in the hon. Member opposite's contribution is that the Report is quite clear and the clinicians have been quite clear in stating that the lack of resources is not the issue. The clinicians confirm to us that the resources are there. Do we need to look at how those resources are used? Possibly, but the Report seems to make quite clear that the resources are there, and every time we have addressed these issues with clinicians, clinicians seem to be quite comfortable in that the complement is now a full complement of psychologists and psychiatrists and that they can deal with the current needs of the community.

1645 The comments made in relation to ADHD: we will be addressing this in the neurodevelopmental strategy. The neurodevelopmental strategy deals with ASD and ADHD. I appreciate that the hon. Members opposite have not yet had sight of the strategy, but I will bring them up to speed tomorrow in terms of this. We are going further and we are also looking at screentime initiatives for children. This is a matter which we are not only looking at from a mental health angle; we are also looking at it from a public health angle. It is a public health drive to try to reduce screentime in children, so we are coming at this from a multi-disciplinary perspective.

1650 I am very glad that the hon. Lady opposite addressed the issue of alcohol withdrawal. That was something that I did not address in my speech, but a pathway has already been drawn up for co-operation between the GHA and the Care Agency because, again, when a person has been through that sort of therapy it is a procedure which starts in the GHA and then goes on to a Care Agency body, which is Bruce's Farm. So, the two bodies have to work together to ensure that the pathway is in place, and I am pleased to report to the House that the pathway is already in place.

1660 Finally, Madam Speaker, I will deal with some of the points raised by the hon. Member Mr Bossino – particularly the non-political points, Mr Bossino; the political points I will seek to ignore in their entirety. The mental health budget: you are right, they do address that point directly. The budget is currently within the GHA budget and it is very difficult to divorce that from

1665 the general GHA budget. The mental health team is ultimately responsible to the Director General and the executive team of the Hospital and it is a way of ensuring accountability. So, the divorce of the budget – even though it is something which is squarely addressed within the Report – from the general GHA budget is very difficult, and I think the hon. Member will understand the reasons for that.

The hon. Member spoke to the resources issue, and we are very happy to look into an independent review of the resources as the hon. Member and the Leader of the Opposition have requested.

1670 His final point is something which I am actually very happy to address because he asked for greater integration, and yet when we suggest that the Care Agency and the GHA board should be closer or should be merged, we get some sort of resistance from the Members opposite. One of the things that we are looking at and one of the points which has come out very strongly from the six months that I have been in office, is that there needs to be greater integration between the Care Agency and the GHA, particularly because of points such as the ones raised by the Board.
1675 There needs to be greater integration or a greater multi-disciplinary approach between the Care Agency and the GHA because they deal with a lot of the same issues, and as I pointed out in respect of the pathway for the withdrawal of alcohol, it is a procedure which starts in the GHA, it is a medicalised procedure, which then ends up in the Care Agency, and there are numerous examples that we can give of such procedures. So, we do believe that there needs to be greater integration
1680 of the services, greater communication between the Care Agency and the GHA, and greater communication between the mental health services, Education, Housing, etc., so that there is a holistic approach offered to these procedures.

In conclusion, Madam Speaker, once again, I did not have to bring a motion to Parliament; I had to table the Report. I wanted there to be a debate for it to be seen how seriously this
1685 Government takes issues of mental health and how seriously we are taking the recommendations of the Board in order to better the procedures. At no point have I ever said that the mental health services provided are flawless or that there is no need for improvement of the mental health services, but I did think it was important to air the issues because of their seriousness. I am happy to have brought this motion and I am happy to accept criticism on this, not only from the Mental Health Board but from the general public, and indeed from the hon. Members, if it means that there will be corrections and betterment of the services. I am happy to engage with the Opposition on what further needs to be addressed, and for this reason we will continue to work and to engage as necessary. Most importantly, I am happy to commit to working to implement the recommendations of the Board and continue to be happy to persevere, to work with the hon.
1690 Member and the Leader of the Opposition to discuss such matters.

1695 Thank you. (*Banging on desks*)

Madam Speaker: I now put the question in the terms of the motion proposed by the Hon. the Minister for Health, Care and Business. Those in favour? (**Members:** Aye.) Those against? Carried.
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Hon. Chief Minister: Madam Speaker, I move that the House should now recess for 10 minutes and then return to deal with legislation.

Madam Speaker: We will recess for 10 minutes and come back at 7.35pm. Thank you.

The House recessed at 7.25 p.m. and resumed its sitting at 7.37 p.m.

BILLS

FIRST AND SECOND READING

**Gibraltar Regiment (Amendment) Bill 2024 –
First Reading approved**

1705 **Clerk:** A Bill for an Act to amend the Gibraltar Regiment Act 1998 to make further provision for the establishment, application and variation of arrangements for the payment of pensions and other benefits in respect of a person's service in the Gibraltar Regiment.

The Hon. the Chief Minister.

1710 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I have the honour to move that a Bill for an Act to amend the Gibraltar Regiment Act 1998 to make further provision for the establishment, application and variation of arrangements for the payment of pensions and other benefits in respect of a person's service in the Gibraltar Regiment be read a first time.

1715 **Madam Speaker:** I now put the question, which is that a Bill for an Act to amend the Gibraltar Regiment Act 1998 to make further provision for the establishment, application and variation of arrangements for the payment of pensions and other benefits in respect of a person's service in the Gibraltar Regiment be read a first time. Those in favour? (**Members:** Aye.) Those against? Carried.

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Clerk: The Gibraltar Regiment (Amendment) Act 2024.

**Gibraltar Regiment (Amendment) Bill 2024 –
Second Reading approved**

Chief Minister (Hon. F R Picardo): Madam Speaker, I have the honour to move that the Bill be now read a second time.

1725 Madam Speaker, the Royal Gibraltar Regiment is part of His Majesty's Armed Forces and is financed annually from the United Kingdom's defence budget. Royal Gibraltar Regiment pensions contributions are financed in a similar way to those of all other members of the Armed Forces. For those reasons, because this Bill relates to defence, I would not have been able to move this Bill without the consent of His Excellency the Governor, which consent was given at the time that the Bill was published.

1730 From 1971 to 2015, Royal Gibraltar Regiment pensions were provided under the Gibraltar Regiment Pension Scheme. The scheme, which is known as the RGPS75, is broadly analogous to the UK's Armed Forces Pension Scheme 1975, which is known as the AFPS75, which derives its legal basis from the Army Pensions Warrant 1977, and that was issued under section 2 of the Pensions and Yeomanry Pay Act 1884. The RGPS75, in turn, derives its legal basis from the application of the 1977 warrant to the Royal Gibraltar Regiment by a combination of the Secretary of State's powers, promulgation under section 15 of the Gibraltar Regiment Act 1998, and the Gibraltar Regiment Direction 1998, although prior to 1998 its legal basis derived from statutory instruments which have now been repealed. Both the AFPS75 and the RGPS75 are administered by Defence Business Services, a business unit within the MoD.

1740 Although both schemes are based on the 1977 warrant that I have just referred to, as amended, a divergence in their provisions results in less favourable terms being paid out under the Gibraltar scheme. The Royal Gibraltar Regiment and His Majesty's Government of Gibraltar

1745 have, for some time, been engaged in discussions to remedy this disparity, and in 2013 the MoD
advised the Regiment that its personnel should become members of the new Armed Forces
Pension Scheme 2015, which is known as AFPS15, along with all other members of the Tri-Service
Armed Forces with effect from 1st April 2015. The new AFPS15 was established by the UK Armed
Forces Pensions Regulations 2014, made pursuant to section 1 of the UK's Private Sector Pensions
Act 2013, an Act which sought to reform private sector pensions in the UK. The Royal Gibraltar
Regiment terms and conditions of service which are known as the 'TACOS' were subsequently
1750 amended to accommodate the required periods of service to qualify for the new AFPS15 schemes.
These include the Early Departure Payment Scheme, which is also made under the PSPA13, as well
as the AFPS15. The Regiment were purportedly moved to AFPS15 and were recorded and treated
as having been transferred from RGPS75 to AFPS15 with effect from 1st April 2015.

1755 In January 2018, the MoD cast doubt on the legal basis of Regiment members' membership of
AFPS15. Upon further analysis, it emerged that although the MoD had operated on the basis that
the same mechanisms which had applied the 1977 warrant to the RG would apply the AFPS15
regulation to the RG, the 2013 Act actually prohibited the application of its provisions, including
the provisions of subsidiary legislation made under it to locally constituted overseas forces. As a
result, in 2018 the application of AFPS15 provision to the Regiment was paused whilst the legal
1760 position was regularised. On 14th September 2018 I raised the RG pensions and allowance issues
with the Secretary of State for Defence. A report was commissioned by my Government to look
at the Regiment's pension, tax and allowance issues. The report, dated 2nd November 2018,
formed the basis of my letter to the Minister for the Armed Forces, the Rt Hon. Mark Lancaster MP
then, ahead of his visit to Gibraltar on 18th November that year. In my executive summary to the
1765 Minister, I listed a number of issues on pensions, pay and allowances, and in 2019, in November,
exactly a year later, I made the Regiment and its members an election manifesto commitment to
engage with the UK MoD to obtain equality of status and conditions of service, including bringing
the Royal Gibraltar Regiment pensions benefits into alignment with their UK counterparts. His
Majesty's Government of Gibraltar has since been working closely with Headquarters British
1770 Forces and the MoD to regularise the position regarding the application of AFPS15 to the RG.

The recommendation from the MoD is to establish Gibraltar law regulations which replicate,
as closely as possible, the Armed Forces Pensions Regulations 2014 and the Early Departure
Payments Regulations 2014, which respectively established the AFPS15 and the EDP15. The MoD's
1775 further recommendation is to amend RGPS75 to include transitional provisions applicable to
members migrating from RGPS75 to AFPS15. In order to replicate the UK position and to regularise
the position retrospectively, these regulations must be given effect from 1st April 2015. The
Gibraltar Regiment Act 1998 does not contain a retrospective regulation-making power. As a
result, we are proposing to amend it to include one for that purpose. The main operative provision
of the Gibraltar Regiment (Amendment) Bill 2024 is really in clause 5, which introduces a new
1780 section 15A into the Gibraltar Regiment Act 1998. The new section 15A will give the Chief Minister
the power, with the consent of the Governor and the Secretary of State for Defence, to make
regulations, first of all, to establish a scheme or arrangement for the payment of pensions or other
benefits in respect of a person's service in the Regiment, or secondly, to vary all or any part of any
existing arrangement set or promulgated by the Secretary of State pursuant to section 15, where
1785 those arrangements relate to the payment of pensions or other benefits in respect of a person's
service to the Regiment. Subsection (2) allows the Chief Minister to give such regulations
retrospective effect, for the reasons I have already provided. These provisions are required to
establish Gibraltar schemes equivalent to AFPS15 and EDP15 and to give them effect from 1st April
2015. These would be named RGPS15 and RGEDP15 respectively. Ultimately, the objective is to
1790 rectify a legal error and thus align the legal reality with the expectations of those participating in
and administering the scheme as from 1st April 2015. The expectation of regiment members was
that the RGPS15 would apply as from 1st April 2015 and the MoD has consistently maintained this

expectation in its communications with its members. The new legislation is designed to place the RGPS15 on a sound legal footing.

1795 With the introduction of this Act and the regulations that we propose to make pursuant to it,
we will have brought the RG's pension arrangements into alignment with their UK counterparts
and thereby meet our commitment to the Regiment and its members to obtain for them equality
of status and conditions of service regarding those arrangements. This is self-evidently in the
interests of members and of the Ministry of Defence itself and I, therefore, commend the Bill to
1800 the House.

Madam Speaker: Before I put the question, does any hon. Member wish to speak on the general principles or merits of the Bill? Yes.

1805 **Hon. Dr K Azopardi:** Madam Speaker, I am grateful for the Chief Minister's lengthy explanation
of the detail, which helps us understand the process and the chronology. We were aware of some
of that detail but I think it is helpful, for the purposes of *Hansard*, to record all that detail in relation
to the scheme, how it worked, how it did not work and then what the purpose of the legislation
is. We support this objective and, indeed, I think it was in answer to questions fielded by my hon.
1810 colleague Mr Reyes, that the Chief Minister confirmed earlier in this meeting or in another
meeting that the Regiment had been consulted on the legislation every step of the way, so we
welcome that.

May I just ask him to confirm – which I assume is the case from what he just closed on – that
with the passage of the legislation and the introduction of the regulations, this will now deal with
1815 all historical issues in relation to pensions that Gibraltar Regiment members had, which we would
welcome if that is the case. And can he, perhaps, give us a bit of information as to the timescale
for the regulations? If they are going to, in effect, replicate English regulations, I assume that it
will be relatively quick in the making, but perhaps he can confirm.

1820 **Madam Speaker:** Does any other hon. Member wish to speak? Yes, the mover wants to reply.

Hon. Chief Minister: Madam Speaker, from my conversations with members of the Regiment,
I do understand that there are other issues relating to pensions that are not addressed in the
context of this matter, but this does not relate to those issues which they have been raising
1825 historically. This relates to a new pension scheme which applied to parts of what we might call the
British Armed Forces, but which did not apply to the Regiment for the reasons I have already
explained.

The regulations will not be delayed once they hit my desk. They are not yet on my desk, but
when they are, they will be signed on the day that I receive them.

1830 **Madam Speaker:** I now put the question, which is that a Bill for an Act to amend the Gibraltar
Regiment Act 1998 to make further provision for the establishment, application and variation of
arrangements for the payment of pensions and other benefits in respect of a person's service in
the Gibraltar Regiment be read a second time. Those in favour? (**Members:** Aye.) Those against?
1835 Carried.

Clerk: The Gibraltar Regiment (Amendment) Act 2024.

**Gibraltar Regiment (Amendment) Bill 2024 –
Committee Stage and Third Reading to be taken at this sitting**

Chief Minister (Hon. F R Picardo): Madam Speaker, I beg to give notice that the Committee Stage and Third Reading of the Bill be taken today, if all hon. Members agree.

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Madam Speaker: Do all hon. Members agree that the Committee Stage and the Third Reading of the Bill will be taken today?

Members: Aye.

**Financial Services (Amendment) Bill 2024 –
First Reading approved**

Clerk: A Bill for an Act to amend the Financial Services Act 2019 and the Financial Services (Insurance Companies) Regulations 2020.

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The Hon. the Minister for Justice, Trade and Industry.

Minister for Justice, Trade and Industry (Hon. N Feetham): Madam Speaker, I have the honour to move that Bill for an Act to amend the Financial Services Act 2019 and the Financial Services (Insurance Companies) Regulations 2020 be read a first time.

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Madam Speaker: I now put the question, which is that a Bill for an Act to amend the Financial Services Act 2019 and the Financial Services (Insurance Companies) Regulations 2020 be read a first time. Those in favour? (**Members:** Aye.) Those against? Carried.

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Clerk: The Financial Services (Amendment) Act 2024.

**Financial Services (Amendment) Bill 2024 –
Second Reading approved**

Minister for Justice, Trade and Industry (Hon. N Feetham): Madam Speaker, I have the honour to move that the Bill be read a second time.

This short Bill has only two operative provisions, which are broadly related. They are *[Inaudible]* ... the Government's responsibility for macro-economic policy in relation to financial services. This measure is far from novel. It builds upon what was described in 2007 and 2009, respectively, in this Parliament by the then Chief Minister Sir Peter Caruana as 'the macro-economic interest' of Gibraltar in introducing the Financial Services Act 2007 and as the 'dual key' approach when he introduced the Financial Services Banking (Amendment) Bill. In the latter case, the Government was introducing amendments which required the GFSC to obtain ministerial consent before licensing certain credit institutions, in order to protect Gibraltar's macro-economic interests. This Bill is more limited in that it provides for the GFSC to be given directions on matters of macro-economic or other public interest and for the GFSC to consult the Minister on certain matters which have macro-economic significance.

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Clause 3 of the Bill adds a new section 23A to the Financial Services Act 2019, which enables the Minister with responsibility for financial services to give the GFSC directions on government policy in respect of macro-economic or other public interest matters, particularly financial

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1875 stability, to which the GFSC must have regard in exercising its functions. The new section requires
the GFSC to be consulted before a direction is issued and provides that a direction can only relate
to regulated persons generally, or for those of a specified class or description. It does not allow
the Minister to give a direction in respect of a particular regulated person, nor in respect of a
particular matter which the GFSC is considering for the purposes of taking enforcement or
sanctioning action. The Financial Services Act already addresses macro-economic considerations
to some extent. These provisions are contained in section 23(1)(b)(vii) and (viii) of the Act. The
1880 purpose of this new section 23A is to enable the GFSC to be given more detailed and focused
directions on macro-economic or other public interest matters and for it to be done in a clear and
transparent manner. The new section is modelled on the UK Financial Policy Committee's power
to give directions on macro-prudential measures to the UK financial services regulators.

1885 Clause 4 of the Bill adds a new regulation 13A to the Financial Services (Insurance Companies)
Regulations 2020. It requires the GFSC to consult the Minister before giving an insurer permission
to provide Gibraltar compulsory motor insurance and before determining the application to take
account of any response from the Minister regarding matters of macro-economic or other public
interest. The new regulation only affects the provision of domestic motor insurance for third-party
risks under Gibraltar's Insurance (Motor Vehicles) (Third Party Risk) Act 1986. Given the size and
1890 the nature of the domestic motor insurance market, the Government has a close interest in the
macro-economic stability of this market. The amendment will not affect the large Gibraltar
insurers which operate in the UK, most of whom do not provide local third-party cover in any
event, and specifically excludes any UK insurer exercising market access rights which, until the
new Gibraltar authorisation regime is in place, are, for now, expressed by references to the
1895 continuing passporting arrangements.

Madam Speaker, in conclusion, the Government is accountable to Parliament and ultimately
the people for safeguarding Gibraltar's economic stability, and an important part of that role is
ensuring that macro-economic risks are identified and addressed appropriately. These
amendments provide for ministerial involvement of a limited nature which is focused on macro-
economic interests and builds upon what already exists in legislation. In the financial services
1900 sector, we are fortunate to have a very capable regulator. I have the highest regard for the GFSC
and in my short time in office have established an excellent working relationship with them. This
Bill will help me to work in tandem with the GFSC and ensure that they receive appropriate input
on those macro-economic issues for which the Government is responsible.

1905 Madam speaker, I commend the Bill to the House.

Madam Speaker: Before I put the question, does any hon. Member wish to speak on the
general principles and merits of the Bill? Yes.

1910 **Hon. R M Clinton:** Thank you, Madam Speaker.

The object of this Bill may seem, perhaps, a bit academic to Members, but I can tell Members,
because I lived through it in 2008, in my former life as a banker ... I was heavily involved with the
Gibraltar Banking Association, and just to give Members ... There will be Members in the room
who may already know the narrative about the double lock in banking, but I was actually in the
1915 room as matters unfolded. The reason why the Government at the time felt the need to
legislate was, as the Hon. Minister has mentioned, about the question of who is in charge of the
macro-economic policy of Gibraltar. The issue was really quite simple: should banks be allowed to
set up in Gibraltar if they do not have a bank parent, i.e. should we allow banks in Gibraltar to be
freestanding incorporated banks in Gibraltar without the recourse to a parent bank and their
1920 subsequent head regulators and central banks outside Gibraltar? Of course, we do not have a
central bank. If we had a bank in Gibraltar or a branch of another bank, it would have access to
central bank support and facilities, which a homegrown bank just will not have. The financial crisis
of 2008 did not seem to happen in Gibraltar. Why? Because, following the Government's view

1925 that we should only have banks in Gibraltar that have parents outside Gibraltar that can support them, we were not really affected in the way that other jurisdictions were. We did not have to bail out our banks, because the banks that we had in Gibraltar were bailed out by their parents – or not so much their parents but their parents’ governments bailed them out – and we were not in that predicament, thankfully.

1930 There was a suggestion that that policy – and really, it was a regulatory policy – should be relaxed. I remember that at the time we were advised by the regulator that this was a change of policy. I remember the meeting; it was sometime around Christmas. We were told, ‘No, this is just a change in policy; you will just see a change on our website.’ Being banks and being heavily regulated, we thought, ‘Well, that is a matter for the regulator,’ and we thought nothing further, other than expressing our individual views, because it was a regulatory matter, not for us to say.

1935 But when we subsequently had a Finance Centre Council Meeting with the Chief Minister of the day and he told us, ‘I understand the banks have been consulted,’ and we said, ‘No, Chief Minister, we have been informed of a change in regulation,’ the Chief Minister of the day – I could use some colourful description – was not too pleased. This is where the origin of this double lock on banking was, because, as the Minister said, ultimately the Government is responsible for the macro-economic policy that is put into place in Gibraltar and answerable to this Parliament, and it is not for the regulator to determine macro-economic policy; it is for us in this place to set down those parameters.

1940 That is just to give Members a flavour, a real-life example of what actually happened at the time and why this particular Bill is perhaps still pertinent. There may be other scenarios in which the Government may feel, ‘Actually, we do not want Gibraltar to have exposure to X or Y or Z,’ even though others may be doing it and it may be pertinent to the size of Gibraltar or the lack of a central bank. These are matters which, as a Parliament, we need to take seriously, and as a consequence, and given that I have experienced a scenario where this very matter did arise, we will, of course, support the Bill.

1950 Thank you.

Madam Speaker: Does any other hon. Member wish to speak? I will call on the mover to reply, if he so wishes.

1955 **Hon. N Feetham:** I am extremely grateful. I will keep my intervention very short. I came well prepared with all pages of *Hansard* (*Laughter*) and capable of citing Peter Caruana’s very articulate submissions in relation to this. Absolutely not necessary. Thank you very much indeed. The trust placed by this Parliament in relation to these provisions will not be misplaced.

Thank you.

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Madam Speaker: I now put the question, which is that a Bill for an Act to amend the Financial Services Act 2019 and the Financial Services (Insurance Companies) Regulations 2020 be read a second time. Those in favour? (**Members:** Aye.) Those against? Carried.

1965 **Clerk:** The Financial Services (Amendment) Act 2024.

**Financial Services (Amendment) Bill 2024 –
Committee Stage and Third Reading to be taken at this sitting**

Minister for Justice, Trade and Industry (Hon. N Feetham): I beg to give notice that the Committee Stage and Third Reading of the Bill be taken today, if all Members agree.

1970 **Madam Speaker:** Do all hon. Members agree that the Committee Stage and Third reading of the Bill be taken today?

Members: Aye.

COMMITTEE STAGE AND THIRD READING

Clerk: The Hon. the Chief Minister.

1975 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I have the honour to move that the House should resolve itself into Committee to consider the following Bills clause by clause, namely the Gibraltar Regiment (Amendment) Bill 2024 and the Financial Services (Amendment) Bill 2024.

In Committee of the whole House

Gibraltar Regiment (Amendment) Bill 1998 – Clauses considered and approved

Clerk: A Bill for an Act to amend the Gibraltar Regiment Act 1998 to make further provision for the establishment, application and variation of arrangements for the payment of pensions and other benefits in respect of a person's service in the Gibraltar Regiment.

1980 Part 1, clauses 1 and 2.

Madam Speaker: Clauses 1 and 2 to stand part of the Bill.

Clerk: Part 2, clauses 3 to 5.

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Madam Speaker: Part 2, clauses 3 to 5 to stand part of the Bill.

Clerk: The Long Title.

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Madam Speaker: The Long Title to stand part of the Bill.

Financial Services (Amendment) Bill 2024 – Clauses considered and approved

Clerk: A Bill for an Act to amend the Financial Services Act 2019 and the Financial Services (Insurance Companies) Regulations 2020.
Clauses 1 and 2.

1995 **Madam Speaker:** Clauses 1 and 2 to stand part of the Bill.

Clerk: Clauses 3 and 4.

Madam Speaker: Clauses 3 and 4 to stand part of the Bill.

2000 **Clerk:** The Long Title.

Madam Speaker: The Long Title to stand part of the Bill.

**Gibraltar Regiment (Amendment) Bill 2024;
Financial Services (Amendment) Bill 2024 –
Third Reading approved: Bills passed**

Clerk: The Hon. the Chief Minister.

2005 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I have the honour to report that the Gibraltar Regiment (Amendment) Bill 2024 and the Financial Services (Amendment) Bill 2024 have been considered in Committee and agreed to without amendments. I move that they be read a third time and passed.

2010 **Madam Speaker:** I now put the question, which is that the Gibraltar Regiment (Amendment) Bill 2024 and the Financial Services (Amendment) Bill 2024 be read a third time and passed.

Those in favour of the Gibraltar Regiment (Amendment) Bill 2024? **(Members: Aye.)** Those against? Carried.

2015 Those in favour of the Financial Services (Amendment) Bill 2024? **(Members: Aye.)** Those against? Carried.

Adjournment

Chief Minister (Hon. F R Picardo): Madam Speaker, I now move that the House should adjourn *sine die*.

2020 **Madam Speaker:** I now propose the question, which is that this House should now adjourn *sine die*.

I now put the question, which is that this House do now adjourn *sine die*. Those in favour? **(Members: Aye.)** Those against? Passed.

This House will now adjourn *sine die*.

The House adjourned at 8.05 p.m.