

PROCEEDINGS OF THE

GIBRALTAR PARLIAMENT

MORNING SESSION: 10.09 a.m. – 12.50 p.m.

Gibraltar, Thursday, 20th December 2018

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The Gibraltar Parliament

The Parliament met at 10.09 a.m.

[MR SPEAKER: Hon. A J Canepa CMG GMH OBE in the Chair]

[ACTING CLERK TO THE PARLIAMENT: S C Galliano Esq in attendance]

Standing Order 7(1) suspended to proceed with laying of papers

Acting Clerk: Meeting of Parliament, Thursday, 20th December 2018. Order of Proceedings: suspension of Standing Orders. The Hon. the Chief Minister.

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Chief Minister (Hon. F R Picardo): Mr Speaker, before I start, a welcome to Mr Galliano to the chair of the Clerk, on behalf of all Members, standing in for Mr Martinez.

I beg to move, under Standing Order 7(3), to suspend Standing Order 7(1) in order to proceed with the laying of Command Papers on the table.

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Mr Speaker: Those in favour? (Members: Aye.) Those against? Carried.

PAPERS TO BE LAID

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

Chief Minister (Hon. F R Picardo): Mr Speaker, I have the honour to lay on the table the
 Command Paper for a draft Bill to amend the Crimes Act 2011 to permit abortion in certain
 limited cases as required by the jurisprudence of the Supreme Court of the United Kingdom.

Mr Speaker: Ordered to lie.

20 Acting Clerk: The Hon. the Deputy Chief Minister.

Deputy Chief Minister (Hon. Dr J J Garcia): I have the honour to lay on the table: (1) a Command Paper on a draft Bill to provide for Gibraltar's withdrawal from the European Union; and (2) a Command Paper on a draft Bill to amend the provisions of the Parliament Act to provide for an open register of electors.

Mr Speaker: Ordered to lie.

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

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Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, I have the honour to lay on the table a Command Paper on a draft Bill to make provision for offences relating to the sale of energy drinks, and to provide for the enforcement of those offences, and for connected purposes.

Mr Speaker: Ordered to lie.

Acting Clerk: (vii) Reports of Committees; (viii) Answers to Oral Questions (Continued).

Questions for Oral Answer

DEPUTY CHIEF MINISTER

Q467/2018 Car parks – Consideration given to building north of runway

30 Acting Clerk: Question 467. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

Hon. E J Phillips: Mr Speaker, has Government given any further consideration to building car parks north of the runway in the vicinity of the Frontier?

35 Acting Clerk: Answer, the Hon. the Deputy Chief Minister.

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Deputy Chief Minister (Hon. Dr J J Garcia): Mr Speaker, yes, the development of the old air terminal site is envisaged to include car parking.

40 **Hon. E J Phillips:** Just one further question, Mr Speaker: when is it envisaged that those plans will take place or any work will be taking place in relation to that site?

Hon. Deputy Chief Minister: Mr Speaker, the position is that that site went out to expressions of interest a few years ago. The Government had discussions with interested parties
 and it was all put on hold because of the relocations we needed to carry out as a result of the 2011 Lands Agreement between the Gibraltar Government and the MoD. That is why that has not progressed. Once those relocations are all in their permanent sites, we will then be able to progress with that development.

50 **Hon. E J Phillips:** Does the Chief Minister have any view as to how many parking spaces will be provided as a result of such project?

Chief Minister (Hon. F R Picardo): It is not something I was actually dealing with; it was something that the Deputy Chief Minister was dealing with, Mr Speaker, but I think the expressions of interest provided varied amounts depending on the submission of how many parking spaces were to be provided.

I confess, Mr Speaker, I did not quite expect to be pressed in respect of a development project given that hon. Members spend most of their time in press releases telling us that we are doing too much too quickly, but I will assume that this is just the typical say one thing today, do another thing tomorrow.

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Mr Speaker: Next question.

Acting Clerk: Question 468 -

65 **Hon. E J Phillips:** Mr Speaker, we have not had an answer to that specific question that we raised, and we really need an answer after the jibes.

Hon. Chief Minister: To what specific question, Mr Speaker?

70 Hon. E J Phillips: How many spaces are envisaged to be placed at the site in question?

Hon. Chief Minister: Mr Speaker, I recommend an ear syringing to the hon. Gentleman. I started by telling him that different numbers of parking spaces were proposed in the different numbers of projects which were submitted. But he has not given notice of that question; and if he did, he would be asking us a question not about anything that we have done but about

⁷⁵ he did, he would be asking us a question not about anything that we have done but about proposals that have been put to us by third parties, which are not yet Government projects because they have not yet been awarded.

It was the first thing I said when I got up to answer him. I do not know whether he just gets so nervous when he sees me get up to answer him that for the first few moments he is not able to hear what I say, but if he calms down and listens he will not have to ask me to stand up again

to repeat the same thing.

Q468/2018 Four Corners site – Date for handover to MoD

Mr Speaker: Question 468.

Acting Clerk: The Hon. E J Phillips on behalf of the Hon. T N Hammond.

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Hon. E J Phillips: When does Government expect to hand over the Four Corners site currently under construction to the MoD?

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Acting Clerk: Answer, the Hon. the Deputy Chief Minister.

Deputy Chief Minister (Hon. Dr J J Garcia): Mr Speaker, the construction of the accommodation units for the MoD at Four Corners will all be completed by February 2019. The handover will, however, be undertaken in three phases, with the first set of blocks having already been handed over in early November 2018 and the second set handed over in late November 2018. The third and final set of blocks, although programmed for completion by

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already been handed over in early November 2018 and the second set handed over in late November 2018. The third and final set of blocks, although programmed for completion by February 2019, will be handed over once the MoD infrastructure works within Four Corners are completed in April 2019.

Mr Speaker: Next question.

Q469/2018 Nuffield pool – Plans after handover of Four Corners site

100 Acting Clerk: Question 469. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

Hon. E J Phillips: Reference the Nuffield pool, in their 2015 manifesto Government say that on completion and handover of the Four Corners site a pool will be open to the public. Will that be the current Nuffield pool or something else?

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Deputy Chief Minister (Hon. Dr J J Garcia): Mr Speaker, the policy of the Government remains to provide a pool at the site of the Nuffield pool. No decision has yet been taken on whether it will be the existing pool or a new facility. Expressions of interest have been invited in respect of the current facility to allow us to gauge interest in the operation thereof.

Q470/2018 Parliament building – Provision of lift

110 **Acting Clerk:** Question 470. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

Hon. E J Phillips: Is Government still intending to provide a lift for the Parliament building; and if so, when is the project likely to proceed?

115 **Acting Clerk:** Answer, the Hon. the Deputy Chief Minister.

Deputy Chief Minister (Hon. Dr J J Garcia): Mr Speaker, yes. The cost of the project is now being updated before it proceeds.

120 **Mr Speaker:** Next question.

Q471/2018

Bayside, St Anne's and St Martin's Schools – Details of successful developer and premium offered

Acting Clerk: Question 471. The Hon. R M Clinton.

Hon. R M Clinton: Thank you. Mr Speaker, can the Government advise if it has identified a preferred tender for the site of Bayside, St Anne's and St Martin's Schools; and if so, who is the successful developer and what premium has been offered?

Acting Clerk: Answer, the Hon. the Deputy Chief Minister.

Deputy Chief Minister (Hon. Dr J J Garcia): Mr Speaker, the plot at St Martin's will become an open area. No decision has yet been taken in respect of the plots at St Anne's and Bayside. **Hon. R M Clinton:** Mr Speaker, I am grateful to the Minister for his answer. Can he give the House an indication as to when a decision might be made on the award of any tender in respect of Bayside and St Anne's?

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Hon. Deputy Chief Minister: Mr Speaker, it is very difficult to provide an indication as to the timescale. Bear in mind that the schools at St Anne's and Bayside are still under construction, so there is not that degree of urgency at the moment for the Government to arrive at a decision at all on the tender.

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Hon. L F Llamas: Mr Speaker, in 2015 in the Government's manifesto the Government had envisaged relocating possibly St Bernadette's or Dr Giraldi Home to the current St Martin's School once it was vacated. Seeing that is going to become an open area, could the Government provide some details as to what their plans are with regard to St Bernadette's and Dr Giraldi, if any?

Hon. Deputy Chief Minister: Mr Speaker, I can confirm that the Government are looking at a different site for that but I am not in a position to actually say what site that would be.

150 Mr Speaker: Next question.

INFRASTRUCTURE AND PLANNING

Q472/2018 Glacis Road temporary roundabout – Plans to make permanent

Acting Clerk: Question 472. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

Hon. E J Phillips: Mr Speaker, considering the so-called temporary roundabout on Glacis Road has been there for three years, when does the Government foresee that it will be made permanent?

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Acting Clerk: Answer, the Hon. the Minister for Infrastructure and Planning.

Minister for Infrastructure and Planning (Hon. P J Balban): Mr Speaker, the roundabout will be made permanent once Ocean Spa Plaza development is completed, as previously explained to the hon. Member in answer to Question 62/2016.

Q473/2018 Vehicles registered in Gibraltar – Breakdown by fuel type

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Acting Clerk: Question 473. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

Hon. E J Phillips: Mr Speaker, of all vehicles registered in Gibraltar, how many are petrol, diesel, hybrid and fully electric as of 1st June 2017 and 1st June 2018?

Acting Clerk: Answer, the Hon. the Minister for Infrastructure and Planning.

165 **Minister for Infrastructure and Planning (Hon. P J Balban):** Mr Speaker, 1,957 petrol, 779 diesel, 62 hybrids and six electric vehicles have been registered in Gibraltar between 1st June 2017 and 1st June 2018.

Acting Clerk: Question 474.

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Hon. E J Phillips: Mr Speaker, insofar as the answer that we were seeking, of all vehicles registered in Gibraltar how many are petrol, diesel, hybrid and fully electric as of 1st of June, not in relation to those that have just been registered in that year.

- 175 **Mr Speaker:** As I read the question the Hon. Minister has not been asked about how many vehicles have been registered between 1st June 2017 and 1st June 2018. That is not the original question. If he does not have the information because it has been misread, I think the answer is to defer the question and it can be answered subsequently.
- Chief Minister (Hon. F R Picardo): Mr Speaker, I think the Government has interpreted this question as meaning in the period, but I can perfectly see why hon. Members think that they asked up to the period and thereafter in the second period. I think even during the course of this session it should be possible ... I do not know whether the Department has that information easily available, but I think during the course of the session we can come back and indicate whether we can give that figure now as the total number registered as at that date.

Mr Speaker: The information that is required is how many were of each category as of 1st June 2017, because then if you add the numbers given by the Minister to those figures you arrive at 2018. Okay?

190 Let's move on to the next question.

Q474/2018 MoT testing – Emissions testing

Acting Clerk: Question 474. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

Hon. E J Phillips: Mr Speaker, how many vehicles, while undergoing MoT testing, have failed their emissions test since 1st October 2017; and has every vehicle undergoing an MoT test during that same period undergone emissions testing?

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Acting Clerk: Answer, the Hon. the Minister for Infrastructure and Planning.

Minister for Infrastructure and Planning (Hon. P J Balban): Mr Speaker, further to my answer to Question 581/2017, and as already set out in *Hansard*, the Department has never kept statistics of specific vehicle faults which have led to vehicles failing a roadworthiness test. As already set out, it would be a very laborious task to keep these sorts of statistics, requiring further extra human resources. Hence my reply remains the same.

Furthermore, and as previously explained, under the Motor Vehicle Test (Amendment) Regulations 2017 it is compulsory for all vehicles to have their emissions checked when undergoing their roadworthiness tests.

Hon. E J Phillips: Does the Hon. Minister agree with me that we should, and hopefully within the resources we have, be able to monitor those vehicles that are failing emission tests? This

Government has a commitment to the environment and I would have thought that it would be easy just to record the number of vehicles being tested and vehicles failing those emission tests.

Hon. P J Balban: Mr Speaker, no, in fact it is not simple. What happens is when a vehicle fails its roadworthiness test it fails for a number of different reasons. It does not have to necessarily
be one reason; it could be a multitude of reasons. It all goes down on a manual form and that is filed per vehicle, and for us to be able to actually ... The whole system is not computerised, whereby it would be easy to just press a button to see exactly how many cars on that date were failed because of *x* reason, *y* reason or *z* reason. It is literally impossible to go through per file to see exactly whether a vehicle has failed exclusively because of emissions or whether it has failed
its emissions apart from other reasons. Normally, as cars age there are a number of reasons why they could fail, but there have been also cases where a vehicle has just failed because of their emissions and nothing else.

Hon. E J Phillips: So, am I right in concluding then that the Government, your Department,has no idea, effectively, of the number of cars on our roads that are polluting our air with these harmful emissions?

Chief Minister (Hon. F R Picardo): Yes, Mr Speaker, that is absolutely right. The Department that we inherited from them had absolutely no idea of what emissions there were and it still is
 not able to provide at the press of a button the information that they appeared not to be interested in when they were in Government and they are seeking now from Opposition.

Hon. E J Phillips: Therefore, Mr Speaker, my question is: given the fact that the Government has no intention of changing what they say we did badly in the first place, they will continue in the same vein of polluting our streets with these dangerous and harmful emissions?

Hon. Chief Minister: No, Mr Speaker, that is not what we have said. It is not even a logical, fair or clever extrapolation of what I indicated, because what we are talking about is vehicles having to pass their MoT tests in order *not* to be on our roads.

I do not know whether he is just trying to set himself up to be diagnostic in the ability to see vehicles and determine whether they are polluting, because that is apparently what he is suggesting he should be able to do if we were able to give him the answers, but this is not in any way going to assist the environmental objectives. If it did, Mr Speaker, it is very likely that it would have been implemented either by them or by us. This is not a question of, I assume, any of us having a disagreement as to, if something is a worthy measure, not pursuing it. It is just not seen as something which can assist in any material respect.

Mr Speaker: Next question.

Q475/2018 Electric scooters – Clarification of legal status

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Acting Clerk: Question 475. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

Hon. E J Phillips: Mr Speaker, does Government intend to clarify the legal status of electric scooters as may pertain to the Traffic Act 2005 or any other appropriate legislation?

Acting Clerk: Answer, the Hon. the Minister for Infrastructure and Planning.

255 **Minister for Infrastructure and Planning (Hon. P J Balban):** Mr Speaker, as the hon. Member may be aware, Government has been working in consultation with the RGP, HM Customs and Gibraltar Law Officers to see how best to deal with these novel means of personal transportation.

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I would refer the hon. Member to Press Release No. 763/2018 issued last week, which is self-explanatory.

Mr Speaker, as the hon. Gentleman may appreciate, this matter is not one that is unique to Gibraltar. In fact, these novel electric personal transporters have for some time now been increasing in number throughout cities in the UK and other parts of Europe, and therefore we are keeping a watchful eye on how other jurisdictions deal with these with a view to perhaps taking on board their findings and relevant actions.

Hon. E J Phillips: Mr Speaker, whilst I appreciate that the Government is keeping an eye on developments in other jurisdictions in relation to electric scooters, I do receive many comments, sometimes positive ones and others negative, in relation to electric scooters particularly in areas where there is heavy pedestrian traffic and vehicular traffic. The general comment that I get

270 where there is heavy pedestrian traffic and vehicular traffic. The general comment that I get from people who approach me is that they are dangerous insofar as most of the people on these scooters effectively are navigating through quite congested streets. One of the reasons I believe my hon. Friend Mr Hammond asked this question was because of those concerns over public safety on our streets and the volume of pedestrian and vehicular traffic combined with electric scooters.

I would be grateful if the Government could clarify when it intends to complete this analysis of other jurisdictions and their use of electric scooters and legislation, to give us a bit more information so we can communicate that to the public.

280 **Hon. P J Balban:** Mr Speaker, it is for this very reason that we have engaged this consultation process with the RGP and other interested parties, for example Customs, as I have mentioned, and the Law Officers.

It is not necessarily the instrument itself, the transporting device and the way it is being used which is the issue. These scooters have come in by storm. They have hit worldwide, they are causing all sorts of problems and they are starting to result even in fatalities in certain areas. The problem is because these scooters are so new the law has not caught up and there is nothing in most laws throughout the world which covers and caters for these instruments. They are not classified as should they be used on the road or should they be used on the pavements.

The biggest problem is the differential in speed. If a pedestrian is walking at say 4 km/h and if a scooter were in theory to travel at the same speed, then the conflict would be non-existent in that respect. If the same thing happens on the road, if a scooter travels at only 4 km/h and cars go much faster, then obviously the conflict there is greater. So what we are looking at now is to see exactly how we classify these vehicles, and for that we would need to bring things to Parliament as part of the Traffic Act.

In the interim period we are looking at getting rid of the scooters from the pavements initially and seeing whether we can get through regulations. In fact, we have found a mechanism to do that in the interim period until we can see how we proceed. But it is not just the scooter. There is a whole myriad of different things that are coming on to the market, from Segways to hoverboards and scooters. Some of them travel at different speeds, some of them are manufactured to go at 25 km/h, others will do 32 km/h, others, a lot less.

- Every city is responding differently to these scooters. In cities where there is a big open space, where the pavements are very wide and where they have maybe bicycle lanes, they are considering whether they should be put in a bicycle lane only to be used in a bicycle lane, or they should be allowed an area in the pavement. What is happening is that they are everywhere.
- 305 Sometimes they are ridden on the road without lights, but they are not captured under the law. This is why it has been such a difficult task to look at, because if you think about it, are they good

for the environment? These are electrical vehicles and if it takes someone off a car then there could be some use in them. Having said that, there is the other side of the equation, which says they are made of plastic and they have got a lithium battery – how long will they last? If you knock them down, if they fall and they break, spares will not be available so they will end up being thrown out, and they are literally almost disposable items at the price that they sell.

- So there is a whole list of things that need to be considered and this is why this is taking its time – not only in Gibraltar, it is taking its time throughout the world and different cities are grappling to see how they are going to target these things which really do not fall in either one category or another.
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Mr Speaker: I suggest to the Hon. Minister while they are about it he might look into the question of the incident at Gatwick Airport this morning, also an incursion, another danger.

320 Hon. P J Balban: Mr Speaker, we are even seeing now, in Dubai for example, these motorised police vehicles that fly. We do not know what is coming. Technology is changing so quickly that we do not know what is going to come through the Frontier tomorrow.

Mr Speaker: Yes. Next question.

Q476-477/2018 Upper Town escalator -Update re unserviceable periods and recent vandalism

325 Acting Clerk: Question 476. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

Hon. E J Phillips: Can the Government say if the Upper Town escalator has been unserviceable since 1st January 2018; and if so, provide figures for the number of occasions and the length of each occasion that the escalator has been unserviceable, by month, since that date?

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Acting Clerk: Answer, the Hon. the Minister for Infrastructure and Planning.

Minister for Infrastructure and Planning (Hon. P J Balban): Mr Speaker, I will answer this question together with Question 477. 335

Acting Clerk: Question 477. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government provide details on the vandalism inflicted on the escalators to the Upper Town, including (a) the date, (b) the cost of repair and (c) the law 340 enforcement result?

Acting Clerk: Answer, the Hon. the Minister for Infrastructure and Planning.

Hon. P J Balban: Mr Speaker, the answers to Questions 476 and 477 are contained in the 345 schedule I will now hand over.

Answer to Q476/2018

Date Faulty	Escalator Affected	Date repaired	Duration (days)
07/01/2018	DOWN	11/01/2018	5
09/01/2018	UP	11/02/2018	3
20/01/2018	UP	22/01/2018	2
08/02/2018	UP	12/02/2018	4
22/02/2018	DOWN	23/02/2018	1
03/03/2018	DOWN	05/03/2018	2
04/03/2018	UP	06/03/2018	2
16/03/2018	DOWN	16/03/2018	1
19/03/2018	DOWN	21/03/2018	3
31/03/2018	BOTH	03/04/2018	8
12/05/2018	DOWN	15/05/2018	3
29/05/2018	DOWN	01/06/2018	4
02/06/2018	DOWN	10/06/2018	8
04/07/2018	DOWN	04/07/2018	1
15/07/2018	DOWN	18/07/2018	4
19/07/2018	BOTH	19/07/2018	2
25/07/2018	DOWN	26/07/2018	2
26/07/2018	DOWN	26/07/2018	1
15/08/2018	DOWN	29/08/2018	14
29/08/2018	DOWN	29/08/2018	1
30/08/2018	DOWN	29/09/2018	30
31/09/2018	DOWN	04/10/2018	4
31/10/2018	BOTH	ongoing	1
01/11/2018	BOTH	02/11/2018	2
06/11/2018	DOWN	06/11/2018	1
22/11/2018	DOWN	27/11/2018	5
07/12/2018	DOWN	ongoing	3

Answer to Q477/2018

Date	Cause of Breakdown	Amount
21/04/2014	Call out Vandalism - Stop button pressed	£49.94
15/07/2014	Call out Vandalism - Stop button pressed	£34.24
01/02/2015	Call out Vandalism - Stop button pressed	£268.51
04/02/2015	Call out Vandalism - Stop button pressed	£72.64
10/02/2015	Call out Vandalism - Stop button pressed	£79.97
13/09/2015	Call out Vandalism - Stop button pressed	£63.17
10/03/2016	Call out Vandalism - Stop button pressed	£83.15
01/04/2016	Call out Vandalism - Brake burnt out due to	
01/04/2016	someone sitting on the moving banister	£1,053.00
02/12/2016	Call out Vandalism - Stop button pressed	£167.00
15/12/2016	Call out Vandalism - Stop button pressed	£136.18

13/12/2016	Call out Vandalism - Stop button pressed	£136.73
31/12/2016	Call out Vandalism - Stop button pressed	£20.00
07/05/2017	Call out Vandalism - Stop button pressed	£25.54
24/04/2018	Call out Vandalism - Stop button pressed	£15.39
09/05/2018	Call out Vandalism - Stop button pressed	£105.09

The RGP say that pressing the stop button on the escalators is not an offence

Mr Speaker: Let's go on to Question 478 and come back to the other, if necessary.

Q478/2018 Disabled parking – Permit for use outside of Gibraltar

Acting Clerk: Question 478. The Hon. L F Llamas.

- 350 **Hon. L F Llamas:** Mr Speaker, will the Government consider the issuing of an additional disability badge, which would not entitle the holder to parking in Gibraltar but would assist persons in accessing services outside Gibraltar in particular, where persons with similar conditions are entitled?
- 355 **Acting Clerk:** Answer, the Hon. the Minister for Infrastructure and Planning.

Minister for Infrastructure and Planning (Hon. P J Balban): Mr Speaker, at present the Blue Badge model issued in Gibraltar is a European Communities model that is recognised throughout the whole European Union. As the hon. Member may appreciate, any holder of a Gibraltar Blue Badge can take advantage of any concession afforded in an EU member state by displaying their badge.

Mr Speaker: Until 29th March. *(Laughter) [Inaudible]* the *Hansard*. Is there any supplementary arising from that?

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Hon. L F Llamas: Yes, I have got one on Question 477.

Hon. E J Phillips: Yes, I have one.

Q479/2018 Official cars – Use by Ministers

Acting Clerk: Question 479. The Hon. E J Phillips.

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Hon. E J Phillips: Mr Speaker, can the Government state for the last 12 months the use by each Minister of official cars?

Acting Clerk: Answer, the Hon. the Minister for Infrastructure and Planning.

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Minister for Infrastructure and Planning (Hon. P J Balban): Mr Speaker, the information the hon. Member is requesting is available online.

Acting Clerk: Question 480. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government provide details of the contract entered into with Deloitte's in relation to e-services?

Mr Speaker: Is somebody answering on behalf of the Minister for Commerce?

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Hon. L F Llamas: Shall we go back to Question 477?

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Hon. E J Phillips: Mr Speaker, in relation to Question 477 I have one further question. It appears from 2018 the escalators were out of action over 117 days. Does the Minister agree with me that an out-of-action escalator for 117 days out of a year is completely unacceptable and therefore represents a failure of this particular project? Will he agree with that analysis?

Hon. P J Balban: Mr Speaker, I would not say it is a failure of the project at all. The issue with the failures is predominantly vandalism. What can we do with vandals? A lot of the stoppages unfortunately are because the stop button, which is an essential feature of any escalator, is being abused. They are literally just kicking it or pressing the button and it stops. Every time that happens it can be reset again, but if it keeps happening, after a certain number of times the escalator mechanism software assumes that there is something inherently wrong with it, something seriously wrong with it, and it will shut down completely and then you have to call the technical team in to take a look at that. That is when it can take a day to repair.

Because there is constant abuse ... and it is a massive shame because there has been a big investment on something which is extremely positive for the people who live in the Upper Town, which has changed the lives of many people when it is working ... It is very unfortunate that these acts ... Predominantly this is the reason why most of the breakages occur, or the stoppages occur. They should be paying the consequence, the people who are just not looking after the equipment.

Hon. E J Phillips: Mr Speaker, whilst I accept that vandalism is totally unacceptable, what is the Government doing in order to catch these offenders, and what steps are the Police taking to enforce the law in relation to vandalism on this particular site?

Clearly the Government is spending a lot of money on this project – a lot of public money has been spent on this escalator, a lot of public money has been spent on maintaining this escalator – and it is out of action for nearly half a year. Therefore, what attempts are being made by the Government or the Police in trying to prevent vandalism at this particular site?

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Hon. P J Balban: Mr Speaker, there are CCTV cameras on site which do look at the escalator, so it is a matter of policing. If the person who does it cannot be seen or cannot be detected by the cameras ... but I think enough measures are being taken as mitigation. We have CCTV cameras. The only other thing we can have is a security guard at the top of the steps and a security guard at the bottom of the steps to ensure that ... This is just an unfortunate thing that happens in the area. People seek fun, so I think it is all down to policing and looking at the CCTV cameras, and I don't think it is a failure in that respect.

Mr Speaker: We are going to postpone the questions for the Minister for Commerce. Next question.

HEALTH, CARE AND JUSTICE

Q544/2018 PwC review of GHA – Date for publication

Acting Clerk: Question 544. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, will the Government publish the review of the GHA conducted by PwC; and if so, by when?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, I refer the hon. Gentleman to the answer provided to Question 55/2018.

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Mr Speaker: Next question.

Q545/2018 GHA software – Details of programming and maintenance

Acting Clerk: Question 545. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, since December 2011 can the Government provide details on
 what software programming and maintenance has been carried out in the GHA, including by
 whom and at what cost?

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

445 **Minister for Health, Care and Justice (Hon. N F Costa):** Mr Speaker, details and costs of software programming and maintenance carried out at the GHA since December 2011 are contained in the schedule I now hand over to the hon. Gentleman.

Answer to Q545/2018

Program/Maintenance	Provider	Paid
Ambulance software	Priority Dispatch	£77,039.36
Antivirus & Security	Newton Systems	£68,845.00
Appoinment Application	Informatica Systems Ltd	£18,257.00
Asset Management and Inventory	Idox Software Limited	£25,671.20
BNF Medicine Dictionary	First DataBank Europe Ltd	£217,218.00
Bracode Scanning Software	Barcode Technologies Ltd	£1,896.25
Cad Drawings	Cadline Ltd	£11,170.00

Cad Related	Talon Soluions Limited	£6,700.00
Cad Related plugin (UK Gov)	Department of Health	£6,700.00
CCTV Software and services	OSG Ltd	£18,315.10
Complaints Application	Datix	£60,596.84
Database Server Monitoring Tools	Red Gate Software	£14,262.00
Dental Software	Graham Parsons Services	£278.36
Desktop Management Software	Ivanti UK	£16,006.55
Desktop Management software	LANDesk International Ltd	£67,581.15
Desktop Management software	LANDESK UK Limited	E.15,245.30
Development Software	CeTe Software	£1,079.35
Development Tools	Telerik Inc.	£7,922.76
Digital Dictation	Bighand Ltd	£66,970.19
Door Access or CCTV Application	G4S Gibraltar	£10,000.00
Endoscopy	Olympus Keymed	£15,474.58
EPR E H R systems	Cloud 21	£475,486.31
EPR E H R systems	Egton Information Systems Limited	£677,425.00
EPR E H R systems	EMIS Health	£372,029.00
HLC7 Integration	Orion Health	£23,372.82
Hospital Ticket System	Kayako Limited	£5,078.00
Hospital Ticket System Support	Kayako Support Systems Pvt.Ltd.	£697.87
Library Management	Sirsi Ltd	£2,265.79
Mailbox Reports	Promodag	£2,720.96
Mobile Device Server Management	Rove Enterprise Software forE Handhelds	62.33
Morph salaries program	TQS Ltd	£113,333.30
Network Monitoring tools	Nouveau Solutions Ltd.	£47,871.81
P2P	PROACTIS Group Ltd	£173,361.62
Pagersystem	WaveWare Technologies Inc.	£1,210.88
Pathology software	Werfen Espana S.A,U.	£5,569.72

Radiology Imaging	Brainlab Sales GmbH	£3,438.80
Records Software and Tracking software	Micro Business Systems Ltd	£85,521.77
Server Backup Software	Nexstor	£19,650.22
Server Vistualization	Transact Technology Solutions Limited	£8,100.00
Software and hardware for Radiology	Phillips Healthcare	£86,733.15
Windows User Management Tool	Namescape Corporation	£6,676.35

Mr Speaker: We will come back to Question 545, if necessary, arising from the schedule.

Q546/2018 GHA prescription database – Items removed since December 2011

Acting Clerk: Question 546. The Hon. L F Llamas.

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Hon. L F Llamas: Mr Speaker, since December 2011, can the Government provide a list of items removed from the GHA prescription database, detailing: (a) if they have been replaced or not; (b) if replaced, what the saving has been so far; and (c) if not replaced, what the annual cost of supplying the item represented to the taxpayer?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, the GHA has had a brand substitution policy since 1999, which results in the removal of brands from the prescribing system if an exact generic alternative is launched which cost less than the brand.

The list of items removed from the GHA prescription database detailing (a) if they have been replaced or not, (b) if replaced, what the saving has been so far, and (c) if not replaced, what the annual cost of supplying the item represented to the taxpayer is in the schedule I now hand over to the hon. Gentleman.

Answer to Q546/2018

Drug	Date Removed	Replaced yes or No	If Yes, saving to GHA to date	lf No, annual cost
Ibuprofen 600mg tablets	01/02/2018	Yes	*N/A	
Voltarol Gel	01/02/2018	Yes	*N/A	
Traxam Gel	01/12/2017	Yes	*N/A	
Omacor (Omega fish oils)	01/07/2018	No		Saving of £288k per annum
Glucosamine tablets	01/07/2018	No		Saving of £156k per annum

*The items removed were not replaced by one particular item, as a clinician may prescribe a variety of different options, dependant on the case presented. As a result, it is not possible to provide an exact calculation.

Q547/2018 Alzheimer's and dementia patients – Numbers and residential location

465 Acting Clerk: Question 547/2018. The Hon. L F Llamas.

Hon. L F Llamas: Can the Government provide statistics in relation to the number of members in our community who currently suffer from Alzheimer's or dementia, stating (a) how many are living in the community, (b) how many are living in each ERS facility, and (c) how many are at St Bernard's Hospital?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, as at the end of October
 2018, there were 189 persons diagnosed as living with Alzheimer's or dementia within the community, five within St Bernard's Hospital, and in respect of ERS facilities the information is as follows: Mount Alvernia, 68; John Cochrane Ward, 22; Calpe Ward, 10, Hillsides, 48; and John Mackintosh Home, 31.

Q548/2018 Hospital admissions – Excess alcohol and drug overdose diagnoses

Acting Clerk: Question 548. The Hon. L F Llamas.

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Hon. L F Llamas: Mr Speaker, since January 2017, can the Government provide a schedule of patients admitted into A&E who have been diagnosed with excess alcohol consumption or

substance abuse, detailing: (a) the date admitted, (b) the diagnosis, (c) the age, (d) the sex and (e) aftercare provided?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, I now hand over to the hon. Gentleman a schedule of patients admitted into A&E who have been diagnosed with excess alcohol consumption or substance misuse detailing: (a) the date admitted, (b) the diagnosis and (e) aftercare provided.

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Before I hand over the schedule to the hon. Gentleman, I note to the House that I will provide him with the details relating to the month of admission, diagnosis and the aftercare provided; I will not provide the hon. Gentleman with the date of admission nor the age or sex of the person for fear of inadvertently identifying the patient and therefore, again inadvertently, falling foul of our data protection obligations.

Mr Speaker: I am sorry to say that in handing over the schedule we cannot provide the hon. questioner and other Members with magnifying glasses. (Laughter)

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Hon. L F Llamas: (Laughter) Indeed, Mr Speaker.

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Hon. E J Reyes: I understand what the Minister for Health is saying here and I am supportive that we should be cautious so as not to identify particular individuals, but would it be possible perhaps to provide some sort of general guideline in respect of ages, saying how many would be under the age of 25, how many would be age 25-50? At least that gives us a general view of whether we are dealing with people of Dr Cortes's age and mine, who technically are senior citizens, or are we dealing with youngsters like the Hon. Mr Llamas and Mr Costa himself. It does at least bring a certain perspective and the community is able to be aware whether we are dealing with an ageing population that perhaps is the most inclined to cause work for the A&E 510 department.

Hon. N F Costa: Mr Speaker, it is not a question that I have asked my officials, but I am sure that we will be able to bracket the ages and the sexes so we can say so many women, so many men within the ages of 15-20, 20-25, so we can give the hon. Gentlemen opposite a flavour of 515 the details that they seek.

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12/00/2010	b) Diagnosis	e) Discharge Outcome
	Alcohol (ethanol) Intoxication, Gastritis, Social Problem	Referred to Social Services
	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
		Discharged - follow up treatment by GP
	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
	Toxic Effect Of Alcohol	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Referred to CMHT
	Recreational Drug Use	Admitted / Bed Available
		Discharged - follow up treatment by GP Admitted / Bed Available
	Closed Fracture - Ankle, Overdose (see Free Text) Overdose (see Free Text)	Admitted / Bed Available
	Recreational Drug Use	Discharged - no follow up
		Referred to CMHT
	Overdose (see Free Text)	Discharged - no follow up
	Recreational Drug Use	Discharged - follow up treatment by GP
	Alcohol (ethanol) Intoxication	Referred to other Health Care Professional
26/08/2018	Alcohol Withdrawal Syndrome	Admitted / Bed Available
		Discharged - advised return to dept if further problems
	Overdose (see Free Text), Alcohol (ethanol) Intoxication	Left Department - Self Discharge
	Overdose (see Free Text)	Referred to CMHT
	Recreational Drug Use	Discharged - follow up treatment by GP
		Referred to other Health Care Professional
	Overdose (see Free Text)	Discharged - advised return to dept if further problems
	Alcohol Dependence Syndrome	Discharged - follow up treatment by GP
		Discharged - follow up treatment by GP
		Discharged - follow up treatment by GP
		Discharged - no follow up
		Discharged - no follow up Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - no follow up
		Discharged - no follow up Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Toxic Effect Of Alcohol	Discharged - follow up treatment by GP
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - no follow up
05/08/2018	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
	Recreational Drug Use	Discharged - follow up treatment by GP
		Referred to CMHT
		Discharged - no follow up
		Discharged - follow up treatment by GP
	Recreational Drug Use	Discharged - follow up treatment by GP
	Overdose (see Free Text)	Admitted / Bed Available
		Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
		Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Transient Ischaemic Attack, Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Discharged - follow up treatment by GP
	Alcohol Withdrawal Syndrome	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Referred to CMHT
		Discharged - advised return to dept if further problems
		Discharged - no follow up
		Discharged - follow up treatment by GP
	Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
	Alcohol Withdrawal Syndrome	Discharged - advised return to dept if further problems
	Toxic Effect Of Alcohol, Depression	Left Department - Self Discharge
	Overdose (see Free Text), Other Mental Health Disorder (see F	Admitted / Bed Available
10/05/0010	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Admitted / Bed Available
		Discharged - advised return to dept if further problems
		Discharged - no follow up
	Alcohol (ethanol) Intoxication	Admitted / Bed Available Admitted / Bed Available
	Alcohol (ethanol) Intoxication Alcohol Withdrawal Seizure	Admitted / Bed Available Discharged - follow up treatment by GP
	Alconol Withdrawal Selzure Other Drug/alcohol Disorder (see Fr	Discharged - follow up treatment by GP Discharged - follow up treatment by GP
		Discharged - advised return to dept if further problems
	Other Drug/alcohol Disorder (see Fr	Discharged - follow up treatment by GP
	Overdose (see Free Text)	Left Department - Self Discharge
	Toxic Effect Of Alcohol	Discharged - follow up treatment by GP
	Recreational Drug Use	Discharged - advised return to dept if further problems
	Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
	Minor Head Injury (gcs>12), Toxic Effect Of Alcohol, Closed Fracture - Facial Bones/ Man	Left Department - Self Discharge
	Alcohol Dependence Syndrome, Gastro-oesophageal Reflux	Discharged - advised return to dept if further problems
	Recreational Drug Use	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Vasovagal Syncope, Recreational Drug Use	Discharged - advised return to dept if further problems
31/03/2018	Alcohol (ethanol) Intoxication	Discharged - no follow up
		Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - no follow up
30/03/2018		Admitted / Bed Available
30/03/2018 26/03/2018	Overdose (see Free Text)	
30/03/2018 26/03/2018 26/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure	Admitted / Bed Available
30/03/2018 26/03/2018 26/03/2018 17/03/2018	Malignant Turnour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication	Admitted / Bed Available Discharged - advised return to dept if further problems
30/03/2018 26/03/2018 26/03/2018 17/03/2018 17/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
30/03/2018 26/03/2018 26/03/2018 17/03/2018 17/03/2018 11/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face Toxic Effect Of Alcohol	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
30/03/2018 26/03/2018 26/03/2018 17/03/2018 17/03/2018 11/03/2018 09/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face Toxic Effect Of Alcohol Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
30/03/2018 26/03/2018 26/03/2018 17/03/2018 17/03/2018 11/03/2018 09/03/2018 09/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face Toxic Effect Of Alcohol Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12)	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
30/03/2018 26/03/2018 26/03/2018 17/03/2018 17/03/2018 11/03/2018 09/03/2018 09/03/2018 06/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face Toxic Effect Of Alcohol Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12) Urinary Tract Infection, Alcohol (ethanol) Intoxication	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Left Department - Self Discharge
30/03/2018 26/03/2018 26/03/2018 17/03/2018 17/03/2018 11/03/2018 09/03/2018 09/03/2018 06/03/2018 05/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face Toxic Effect Of Alcohol Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12) Urinary Tract Infection, Alcohol (ethanol) Intoxication Toxic Effect Of Alcohol, Overdose (see Free Text)	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
30/03/2018 26/03/2018 26/03/2018 17/03/2018 11/03/2018 11/03/2018 09/03/2018 05/03/2018 05/03/2018 05/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face Toxic Effect Of Alcohol Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12) Urinary Tract Infection, Alcohol (ethanol) Intoxication Toxic Effect Of Alcohol, Overdose (see Free Text) Alcohol (ethanol) Intoxication	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Left Department - Self Discharge Discharged - advised return to dept if further problems Left Department - self Discharge Discharged - no follow up
30/03/2018 26/03/2018 26/03/2018 17/03/2018 17/03/2018 11/03/2018 09/03/2018 09/03/2018 05/03/2018 03/03/2018 03/03/2018	Malignant Tumour, Lower Respiratory Tract Infection, Overdose (see Free Text), Acute Renal Failure Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face Toxic Effect Of Alcohol Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12) Urinary Tract Infection, Alcohol (ethanol) Intoxication Toxic Effect Of Alcohol, Overdose (see Free Text)	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems

	er to Question 548	A Discharge 6 1
) Arrival Date	b) Diagnosis	e) Discharge Outcome
	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use, Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems Referred to CMHT
	Oriel Mental Health Disorder (see P, Recreational Drug Ose, Alconol (ethanol) mitoxication Overdose (see Free Text)	Return for intervention
	Alcohol (ethanol) Intoxication	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Referred to CMHT
	Alcohol Dependence Syndrome	Other
17/02/2018	Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Bruise/ Contusion/ Abrasion - Head	Discharged - advised return to dept if further problems
17/02/2018	Alcohol (ethanol) Intoxication	Discharged - no follow up
16/02/2018	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
16/02/2018	Hypokalaemia, Overdose (see Free Text)	Admitted / Bed Available
	Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
	Muscle Injury Lower Back, Alcohol Dependence Syndrome	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Discharged - advised return to dept if further problems
	Depression, Alcohol (ethanol) Intoxication	Referred to CMHT
	Overdose (see Free Text)	Admitted / Bed Available
	Overdose (see Free Text)	Discharged - no follow up
	Gastritis, Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
	Other Drug/alcohol Disorder (see Fr Overdose (see Free Text)	Discharged - no follow up Left Department - Self Discharge
	Alcohol (ethanol) Intoxication	Referred to other Health Care Professional
	Overdose (see Free Text)	Admitted / Bed Available
	Recreational Drug Use	Left Department - Self Discharge
	Recreational Drug Use	Discharged - advised return to dept if further problems
	Recreational Drug Use	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Referred to CMHT
	Overdose (see Free Text)	Admitted / Bed Available
	Toxic Effect Of Alcohol	Referred to CMHT
01/01/2018	Alcohol (ethanol) Intoxication	Left before Clinician assessment
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Minor Head Injury (gcs>12), Bruise/ Contusion/ Abrasion - Face, Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Other
	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
	Overdose (see Free Text)	Referred to CMHT
	Alcohol Withdrawal Seizure	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Overdose (see Free Text)	Referred to CMHT
	Recreational Drug Use Alcohol Dependence Syndrome	Discharged - no follow up Referred to CMHT
	Overdose (see Free Text)	Discharged - follow up treatment by GP
	Alcohol (ethanol) Intoxication	Admitted / Bed Available
	Overdose (see Free Text)	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head, Alcohol (ethanol) Intoxication	
	Other Drug/alcohol Disorder (see Fr	Left Department - Self Discharge
	Recreational Drug Use	Discharged - follow up treatment by GP
02/12/2017	Anxiety, Alcohol (ethanol) Intoxication	Discharged - no follow up
02/12/2017	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
29/11/2017	Pseudoseizure, Alcohol (ethanol) Intoxication, Overdose (see Free Text)	Left Department - Self Discharge
	Alcohol Withdrawal Syndrome	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Left Department - Self Discharge
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Admitted / Bed Available
	Alcohol (ethanol) Intoxication, Recreational Drug Use	Discharged - no follow up
	Overdose (see Free Text), Other Mental Health Disorder (see F	Admitted / Bed Available
	Minor Head Injury (gcs>12), Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems Referred to other Out-patient Clinic
	Overdose (see Free Text)	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication Gastritis, Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Vasovagal Syncope, Alcohol Dependence Syndrome	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - no follow up
28/10/2017	Overdose (see Free Text)	Admitted / Bed Available
27/10/2017	Alcohol (ethanol) Intoxication, Hypoglycaemia Without Coma	Discharged - advised return to dept if further problems
	Toxic Effect Of Alcohol	Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Overdose (see Free Text), Other Mental Health Disorder (see F	Referred to CMHT
	Toxic Effect Of Alcohol	Referred to other Health Care Professional
	Recreational Drug Use, Social Problem	Referred to CMHT
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems Admitted / Bed Available
	Overdose (see Free Text) Alcohol (ethanol) Intoxication	Admitted / Bed Available Discharged - no follow up
	Alcohol (ethanol) Intoxication	Left before Clinician assessment
	Alcohol (ethanol) Intoxication	Left before Clinician assessment
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
	Upper Respiratory Tract Infection, Other Drug/alcohol Disorder (see Fr	Discharged - advised return to dept if further problems
	Alcohol Dependence Syndrome	Referred to CMHT
	Alcohol Jependence Syndrome	Discharged - advised return to dept if further problems
	Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head, Alcohol (ethanol) Intoxication	
	Alcohol Dependence Syndrome, Social Problem	Other
	Alcohol Dependence Syndrome, Social Problem Alcohol Withdrawal Syndrome	Other
	Alcohol (vitilitatival Synatome	Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
15/09/2017		
	Overdose (see Free Text)	Admitted / Bed Available
13/09/2017	Overdose (see Free Text) Wound: Lac/ Incised/ Bite - Head, Alcohol (ethanol) Intoxication	Admitted / Bed Available Discharged - advised return to dept if further problems

	er to Question 548 b) Diagnosis	e) Discharge Outcome
Arrival Date	Alcohol (ethanol) Intoxication, Muscle Injury - Shoulder	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication, Muscle Injury - Shoulder	
		Other
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Left Department - notification given
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Minor Head Injury (gcs>12), Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Postural Hypotension, Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
07/09/2017	Anxiety, Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
06/09/2017	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
04/09/2017	Alcohol (ethanol) Intoxication	Referred to CMHT
03/09/2017	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
02/09/2017	Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
30/08/2017	Alcohol Dependence Syndrome, Pr Bleeding	Referred to other Health Care Professional
25/08/2017	Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head	
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Other Mental Health Disorder (see F, Recreational Drug Use	Referred to CMHT
	Thrombocytopenia, Chronic Liver Disease, Alcohol Dependence Syndrome	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Depression, Overdose (see Free Text)	Referred to CMHT
	Wound: Lac/ Incised/ Bite - Face, Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication, Depression	Referred to other Health Care Professional
	Overdose (see Free Text)	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems
	Toxic Effect Of Alcohol, Other Mental Health Disorder (see F	Admitted
	Overdose (see Free Text), Alcohol (ethanol) Intoxication	Discharged - no follow up
01/08/2017	Alcohol (ethanol) Intoxication	Left Department - Self Discharge
31/07/2017	Alcohol (ethanol) Intoxication, Recreational Drug Use	Discharged - no follow up
31/07/2017	Alcohol Withdrawal Syndrome, Infectious Gastroenteritis	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Referred to CMHT
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Other Drug/alcohol Disorder (see Fr	Other
	Recreational Drug Use	Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Schizophrenia, Alcohol Dependence Syndrome, Social Problem	Referred to CMHT
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Left Department - no notification given
	Overdose (see Free Text)	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Overdose (see Free Text)	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Other Drug/alcohol Disorder (see Fr, Atrial Fibrillation & Flutter, Lower Respiratory Tract Infection	Discharged - advised return to dept if further problems
	Toxic Effect Of Alcohol, Sprain/ Ligament Injury Foot	Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Toxic Effect Of Alcohol	Discharged - follow up treatment by GP
	Toxic Effect Of Alcohol	Discharged - follow up treatment by GP
	Alcohol (ethanol) Intoxication, Other Mental Health Disorder (see F	Admitted / Bed Available
	Alcohol Dependence Syndrome	Discharged - follow up treatment by GP
07/07/2017	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Referred to other Health Care Professional
	Alcohol (ethanol) Intoxication	Other
	Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication	Referred to CMHT
	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
	Overdose (see Free Text), Other Mental Health Disorder (see F	Admitted / Bed Available
	Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face	Left Department - notification given
	Alcohol (ethanol) Intoxication, Recreational Drug Use	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Alcohol (ethanol) Intoxication, Hypertension	Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - no follow up Discharged - no follow up
	Depression, Alcohol (ethanol) Intoxication	Referred to CMHT
	Other Drug/alcohol Disorder (see Fr	Discharged - no follow up
	Overdose (see Free Text)	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - no follow up
10/06/2017	Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Face	Discharged - advised return to dept if further problems
	Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head, Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
10/06/2017		Discharged - follow up treatment by GP
10/06/2017 08/06/2017	Alcohol (ethanol) Intoxication	
10/06/2017 08/06/2017 08/06/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use	Referred to CMHT
10/06/2017 08/06/2017 08/06/2017 07/06/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text)	Referred to CMHT Admitted / Bed Available
10/06/2017 08/06/2017 08/06/2017 07/06/2017 01/06/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems
10/06/2017 08/06/2017 08/06/2017 07/06/2017 01/06/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text)	Referred to CMHT Admitted / Bed Available
10/06/2017 08/06/2017 08/06/2017 07/06/2017 01/06/2017 28/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems
10/06/2017 08/06/2017 07/06/2017 01/06/2017 28/05/2017 27/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text)	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - follow up treatment by GP
10/06/2017 08/06/2017 08/06/2017 07/06/2017 01/06/2017 28/05/2017 27/05/2017 25/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - follow up treatment by GP Discharged - no follow up Discharged - advised return to dept if further problems
10/06/2017 08/06/2017 07/06/2017 01/06/2017 28/05/2017 27/05/2017 25/05/2017 21/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - follow up treatment by GP Discharged - no follow up Discharged - advised return to dept if further problems Discharged - no follow up
10/06/2017 08/06/2017 07/06/2017 01/06/2017 28/05/2017 27/05/2017 25/05/2017 21/05/2017 19/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - follow up treatment by GP Discharged - no follow up Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
10/06/2017 08/06/2017 07/06/2017 07/06/2017 28/05/2017 27/05/2017 21/05/2017 19/05/2017 19/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - follow up treatment by GP Discharged - no follow up Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Left before Clinician assessment
10/06/2017 08/06/2017 07/06/2017 07/06/2017 28/05/2017 27/05/2017 25/05/2017 19/05/2017 19/05/2017 12/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Toxic Effect Of Alcohol	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - follow up treatment by GP Discharged - no follow up Discharged - advised return to dept if further problems Discharged - no follow up Discharged - no follow up Discharged - no follow up Discharged - advised return to dept if further problems Left before Clinician assessment Discharged - follow up treatment by GP
10/06/2017 08/06/2017 07/06/2017 07/06/2017 01/06/2017 28/05/2017 27/05/2017 21/05/2017 19/05/2017 12/05/2017 12/05/2017 10/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Covic Effect Of Alcohol Overdose (see Free Text)	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - no follow up Discharged - no follow up Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Left before Clinician assessment Discharged - follow up Discharged - no follow up Discharged - no follow up Discharged - no follow up Discharged - no follow up
10/06/2017 08/06/2017 07/06/2017 07/06/2017 07/06/2017 28/05/2017 28/05/2017 25/05/2017 19/05/2017 19/05/2017 10/05/2017 10/05/2017 10/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Cohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Cohol (ethanol) Intoxication Cohol (ethanol) Intoxication Toxic Effect Of Alcohol Diverdose (see Free Text) Toxic Effect Of Alcohol	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - follow up treatment by GP Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - no follow up Discharged - advised return to dept if further problems Left before Clinician assessment Discharged - follow up treatment by GP Discharged - no follow up Other
10/06/2017 08/06/2017 07/06/2017 07/06/2017 28/05/2017 27/05/2017 25/05/2017 19/05/2017 19/05/2017 19/05/2017 10/05/2017 10/05/2017 09/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Toxic Effect Of Alcohol Overdose (see Free Text) Toxic Effect Of Alcohol Overdose (see Free Text), Depression	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - follow up treatment by GP Discharged - no follow up Discharged - advised return to dept if further problems Discharged - no follow up Discharged - advised return to dept if further problems Left before Clinician assessment Discharged - follow up treatment by GP Discharged - no follow up Other Direct to Specialty
10/06/2017 08/06/2017 07/06/2017 07/06/2017 27/05/2017 27/05/2017 25/05/2017 25/05/2017 19/05/2017 19/05/2017 10/05/2017 10/05/2017 09/05/2017 09/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Toxic Effect Of Alcohol Overdose (see Free Text) Toxic Effect Of Alcohol Overdose (see Free Text), Depression Grand Mal Epilepsy, Overdose (see Free Text)	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - no follow up Discharged - no follow up Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Left before Clinician assessment Discharged - follow up treatment by GP Discharged - no follow up Discharged - follow up Discharged - follow up
10/06/2017 08/06/2017 08/06/2017 07/06/2017 27/05/2017 27/05/2017 25/05/2017 19/05/2017 19/05/2017 10/05/2017 10/05/2017 09/05/2017 08/05/2017 08/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Cover (See Free Text) Toxic Effect Of Alcohol Overdose (see Free Text) Toxic Effect Of Alcohol Overdose (see Free Text), Depression Grand Mal Epilepsy, Overdose (see Free Text) Minor Head Injury (gcs>12), Wound: Lac/ Incised/ Bite - Head, Alcohol (ethanol) Intoxication	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - no follow up Discharged - advised return to dept if further problems Left before Clinician assessment Discharged - follow up treatment by GP Discharged - no follow up Other Discharged - follow up Discharged - follow up Discharged - follow up Discharged - follow up Discharged - follow up treatment by GP Discharged - follow up AE dressing clinic
10/06/2017 08/06/2017 07/06/2017 07/06/2017 28/05/2017 28/05/2017 25/05/2017 25/05/2017 19/05/2017 19/05/2017 10/05/2017 09/05/2017 08/05/2017 08/05/2017	Alcohol (ethanol) Intoxication Other Mental Health Disorder (see F, Recreational Drug Use Overdose (see Free Text) Alcohol Dependence Syndrome, Alcohol (ethanol) Intoxication Anxiety, Overdose (see Free Text) Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Bruise/ Contusion/ Abrasion - Thigh Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Toxic Effect Of Alcohol Overdose (see Free Text) Toxic Effect Of Alcohol Overdose (see Free Text), Depression Grand Mal Epilepsy, Overdose (see Free Text)	Referred to CMHT Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - no follow up Discharged - no follow up Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Left before Clinician assessment Discharged - follow up treatment by GP Discharged - no follow up Other Direct to Specialty Discharged - follow up treatment by GP

	er to Question 548	
a) Arrival Date	b) Diagnosis	e) Discharge Outcome
	Toxic Effect Of Alcohol, Overdose (see Free Text)	Discharged - no follow up Admitted / Bed Available
	Overdose (see Free Text), Overdose (see Free Text) Gastritis, Alcohol (ethanol) Intoxication, Drug Reaction	Discharged - advised return to dept if further problems
30/04/2017	Minor Head Injury (gcs>12), Bruise/ Contusion/ Abrasion - Face, Bruise/ Contusion/ Abrasion - Head, Alcohol (ethanol) Intoxication	Discharged - no follow up
26/04/2017	Other Drug/alcohol Disorder (see Fr	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Overdose (see Free Text)	Admitted / Bed Available
	Overdose (see Free Text)	Admitted / Bed Available
23/04/2017	Toxic Effect Of Alcohol	Discharged - awaiting blood results
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Wound: Lac/ Incised/ Bite - Face, Minor Head Injury (gcs>12), Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Recreational Drug Use	Discharged - no follow up
	Toxic Effect Of Alcohol	Discharged - no follow up
	Other Nervous System Disorder (see , Toxic Effect Of Alcohol Anxiety, Alcohol (ethanol) Intoxication	Referred to other Health Care Professional
08/04/2017	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems Discharged - no follow up
07/04/2017		Referred to CMHT
05/04/2017	Social Problem, Homelessness, Alcohol Dependence Syndrome	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Discharged - advised return to dept if further problems
01/04/2017		Discharged - no follow up
30/03/2017		Admitted / Bed Available
27/03/2017	Overdose (see Free Text)	Referred to CMHT
25/03/2017		Discharged - follow up treatment by GP
	Overdose (see Free Text)	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Alcohol Dependence Syndrome, Social Problem	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Overdose (see Free Text) Alcohol (ethanol) Intoxication	Admitted / Bed Available Left Department - Self Discharge
	Other Drug/alcohol Disorder (see Fr	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Recreational Drug Use	Discharged - follow up treatment by GP
	Alcohol (ethanol) Intoxication	Discharged - follow up treatment by GP
26/02/2017	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Injury Of Liver, Recreational Drug Use	Referred to GP
19/02/2017		Referred to CMHT
17/02/2017	Overdose (see Free Text) Alcohol (ethanol) Intoxication	Admitted / Bed Available Discharged - no follow up
16/02/2017		Referred to CMHT
10/02/2017		Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Recreational Drug Use, Other Ophthalmic Disorder (see Free	Discharged - advised return to dept if further problems
	Overdose (see Free Text)	Admitted / Bed Available
09/02/2017		Discharged - no follow up
08/02/2017		Other
	Toxic Effect Of Alcohol	Discharged - no follow up
	Wound: Lac/ Incised/ Bite - Face, Alcohol (ethanol) Intoxication	Other
	Alcohol (ethanol) Intoxication	Admitted / Bed Available
	Alcohol (ethanol) Intoxication	Discharged - advised return to dept if further problems
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Wound: Lac/ Incised/ Bite - Face, Alcohol (ethanol) Intoxication Overdose (see Free Text), Toxic Effect Of Alcohol	Discharged - advised return to dept if further problems Left Department - Self Discharge
	Alcohol (ethanol) Intoxication	Discharged - no follow up
	Delirium (acute Confusion), Alcohol (ethanol) Intoxication	Return for intervention
25/01/2017	Minor Head Injury (gcs>12), Alcohol (ethanol) Intoxication	Admitted / Bed Available
		Discharged - no follow up
22/01/2017	Alcohol (ethanol) Intoxication	Discharged - no follow up
22/01/2017 20/01/2017	Alcohol (ethanol) Intoxication Hypoglycaemia Without Coma, Allergic Reaction Unspecified, Alcohol (ethanol) Intoxication	Admitted / Bed Available
22/01/2017 20/01/2017 15/01/2017		
22/01/2017 20/01/2017 15/01/2017 14/01/2017 13/01/2017	Hypoglycaemia Without Coma, Allergic Reaction Unspecified, Alcohol (ethanol) Intoxication Simple Tooth Fracture, Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
22/01/2017 20/01/2017 15/01/2017 14/01/2017 13/01/2017 13/01/2017	Hypoglycaemia Without Coma, Allergic Reaction Unspecified, Alcohol (ethanol) Intoxication Simple Tooth Fracture, Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12)	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
22/01/2017 20/01/2017 15/01/2017 14/01/2017 13/01/2017 13/01/2017 09/01/2017	Hypoglycaemia Without Coma, Allergic Reaction Unspecified, Alcohol (ethanol) Intoxication Simple Tooth Fracture, Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12) Recreational Drug Use	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
22/01/2017 20/01/2017 15/01/2017 14/01/2017 13/01/2017 13/01/2017 09/01/2017 02/01/2017	Hypoglycaemia Without Coma, Allergic Reaction Unspecified, Alcohol (ethanol) Intoxication Simple Tooth Fracture, Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12) Recreational Drug Use Alcohol (ethanol) Intoxication	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems
22/01/2017 20/01/2017 15/01/2017 14/01/2017 13/01/2017 13/01/2017 09/01/2017 02/01/2017	Hypoglycaemia Without Coma, Allergic Reaction Unspecified, Alcohol (ethanol) Intoxication Simple Tooth Fracture, Alcohol (ethanol) Intoxication Alcohol (ethanol) Intoxication, Alcohol (ethanol) Intoxication, Minor Head Injury (gcs>12) Recreational Drug Use Alcohol (ethanol) Intoxication Overdose (see Free Text)	Admitted / Bed Available Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems Discharged - advised return to dept if further problems

520 Acting Clerk: Question 549. The Hon. L F Llamas.

Hon. E J Phillips: Mr Speaker, just one further question in relation to that. I think my hon. Friend asked in (e) what aftercare was provided. I think that the initial care by the service provider is provided in the schedule. Does the Minister know whether patients who present in A&E with particular alcohol/drug dependency issues, or at least overdose issues, are then referred to a secondary programme where they can be reviewed later on? Most of the entries here say 'advised return to dept if further problems'. It does not necessarily refer to a specific counselling team or drug dependency team which would look into any issues relating to these particular individuals. What I am getting at effectively is what secondary care is available to the very long list, sadly, of people being admitted for alcohol overdose or drug overdose.

Hon. N F Costa: Mr Speaker, the hon. Gentleman will know that, I think it was last year or the beginning of this year, the Government announced for the first time the establishment of a clinic

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of a GP with special interest in substance misuse and alcohol consumption. So we now have a GP who specialises specifically on those conditions.

⁵³⁵ If the hon. Gentleman were to take a further look at the schedule that I provide to him, he will also see that there are references to 'discharged' and 'follow up treatment by GP'. So there are cases where on discharge there is advice that this particular person ought to be seen subsequently by a GP.

You will also see, Mr Speaker, that in some cases the person is admitted, which means that at that point other protocols would be in place because of perhaps the acuity of the person presenting or because further help in the manner that he has indicated is required.

I have not made a statistical calculation but I think it may be right to say that the majority of people are basically told to return if there is a further problem, but there is also maybe less than half of people who are advised to attend to a GP for further advice and treatment by the GP. But for those who present with a particularly high acuity and obviously require additional treatment

for those who present with a particularly high acuity and obviously require additional treat immediately after the A&E presentation, they are admitted into St Bernard's Hospital.

Hon. E J Phillips: [Inaudible]

Hon. N F Costa: Well, Mr Speaker, there is only one GP who specialises in substance misuse, so she prioritises those cases because of course there are another 23 GPs who provide either the ordinary day clinic, the evening clinic or the emergency clinic and provide either continuous support and treatment for chronic conditions or for people who just present at A&E. So, so long as the GP is available to provide treatment and support on that particular day for this particular person, then yes of course that person will be prioritised. If, for whatever reason, Dr Taylor's clinic on that particular day is full, which could also happen, the GPs of course also have training in dealing with substance misuse. It is just that this particular doctor has particular further training that allows her to register with a special interest in substance misuse.

560 **Mr Speaker:** The Hon. Roy Clinton.

Hon. R M Clinton: Thank you, Mr Speaker.

I would just like to go back to Question 545, if the Minister would be so kind, in relation to the cost of software maintenance and programming.

⁵⁶⁵ I appreciate that, the way the question is phrased, this will cover a period since December 2011, so we could be talking about a cumulative period of close to seven years, but I would like to ask three very specific questions.

One is that on the schedule that we have been handed there is an item called EPR E H R systems –

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Hon. N F Costa: Would the hon. Gentleman give way?

Hon. R M Clinton: Yes, of course.

- 575 **Hon. N F Costa:** Mr Speaker, only to say that I had not come to the House prepared with any answers on any of the particular maintenance companies because, as he will have seen, the schedule runs into two pages. So, if he has specific questions on any specific contract, I am more than happy to oblige but I would need notice of that question.
- 580 **Hon. R M Clinton:** Mr Speaker, I am grateful for the Minister's answer and explanation and I accept... I am not going to ask for details of contracts, but this particular item, EPR E H R systems, which is over about £1.5 million over and I assume it is the seven-year period; I do not know if this is a bolt payment, but it is irrelevant ... I would like to ask the Minister a simple question: what is EPR E H R systems?

Hon. N F Costa: Mr Speaker, the EPR system is a project that was introduced by my hon. colleague Dr John Cortes for primary care. So, when a patient now attends primary care there is a program that is able to produce, for example, repeat prescriptions that people can now attend to the PCC to receive. Where you can have a repeat prescription for a series of say six months, that program is able to produce the repeat prescriptions. It is an electronic software system that allows doctors to be able to provide the better treatment and better quality of treatment that it does because they are able to recover notes quickly, are able to scan notes, especially for patients who have chronic conditions and when they have a very thick file because of all of the attendances that the person may make to the PCC. In this context it bears repeating that almost double the population attends the PCC during the course of one year, so a patient who has a chronic condition may well attend the PCC on many occasions. The EPR system allows the GP to be able to better access and better search electronic records.

Hon. R M Clinton: I am very grateful to the Minister for his answer. Can he advise why there are three different providers listed for the same system? Do they do different things, or is it that
 the provider has changed over time?

Hon. N F Costa: Mr Speaker, as I advised the hon. Gentleman, he will need to give me notice of that question because, as I say, the schedule runs into almost two pages. I provided the information that was requested. If he has particular questions on any particular item in the schedule provided, I would need notice, but if he provides me with notice I will be more than happy to answer his questions.

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Hon. R M Clinton: Mr Speaker, I thank the Minister for his answer.

My second question is in relation to the Morph salaries program. I do not know whether the Minister has the information to hand whether this is an actual maintenance fee or the program licence fee. And would I be correct in stating that the GHA runs its own salaries program rather than using a system that might be available to the Government in general?

Hon. N F Costa: Mr Speaker, I will ask my office and revert. I think the answer is yes, that the GHA does do its own salaries, but I am not confirming that to him; I need to ask the question.

Hon. R M Clinton: Mr Speaker, again I am grateful to the Minister for his answer.I have just one final question. Unfortunately, there seem to be a lot of abbreviations here.Could the Minister just advise the House: what does P2P stand for?

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Hon. N F Costa: Again, Mr Speaker, I am not confirming this to him, I will ask, but Dr Cortes and I both are quite sure it is 'purchase to pay'. Again, I will confirm it for him.

Q549/2018 Ambulance transportation – Payments made to service providers

Acting Clerk: Question 549. The Hon. L F Llamas.

625 **Hon. L F Llamas:** Mr Speaker, since December 2011, can the Government provide details for each financial year on the payments made in respect of ambulance transportation, including the amount paid to each service provider?

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

630 **Minister for Health, Care and Justice (Hon. N F Costa):** Mr Speaker, Since December 2011, payments made in respect of ambulance transportation, including the amount paid to each service provider for each financial year, is in the schedule I now hand over to the hon. Gentleman.

Answer to Q549/2018

FINANCIAL YEAR 11/12	
ATLAS Executive Air SA	C00 125 00
	£89,135.80
Beds & Bucks	£1,290.00
Flying Doctors S.L.	£11,246.38
Heathrow Air Ambulance Services	£4,324.00
Helicopteros Sanitarios	£2,547.80
Medical Solutions	£405.00
S.S.G Andalucia S.L	£5,269.34
St John's Ambulance Gibraltar	£11,158.50
Wings Medical Centre	£2,150.00
Xanit Hospital Int	£95,318.41
FINANCIAL YEAR 12/13	
ATLAS Executive Air SA	£249,051.26
Flying Doctors S.L.	£19,848.62
Heathrow Air Ambulance Services	£13,117.00
Manchester Medical Services Ltd	£600.00
S.S.G Andalucia S.L	£11,527.77
St John's Ambulance Gibraltar	£25,493.00
FINANCIAL YEAR 13/14	
ATLAS Executive Air SA	£157,715.91
Empresa Publica de Emergencias	2101,710.01
Sanitarias	£6,239.24
Flying Doctors S.L.	£20,739.96
Heathrow Air Ambulance Services	£12,148.25
S.S.G Andalucia S.L	£30,435.38
St John's Ambulance Gibraltar	£27,046.50
	227,040.50
FINANCIAL YEAR 14/15	C247 950 00
Atlas executive air	£247,850.00
Atlas Ltd	£31,980.00
Empresa Publica de Emergencias	6270.96
Sanitarias	£279.86
Flying Doctors S.L.	£36,677.53
Heathrow Air Ambulance Services	£11,433.25
S.S.G Andalucia S.L	£22,279.11
St John's Ambulance Gibraltar	£21,677.55
FINANCIAL YEAR 15/16	
Air Medical Ltd	£12,380.00
Atlas executive air	£181,685.00
Clinica Universidad De Navarra	£32,860.55
Flying Doctors S.L.	£40,423.11
Heathrow Air Ambulance Services	£5,898.75
S.S.G Andalucia S.L	£40,733.02
St John's Ambulance Gibraltar	£37,656.06
FINANCIAL YEAR 16/17	[
Atlas executive air	£31,700.00
Atlas executive air ATLAS Executive Air SA	£21,562.88
	£21,562.88 £12,630.00
Capital Air Charter	
Flying Doctors S.L.	£49,087.91
Heathrow Air Ambulance Services	£13,438.85
Medical Air Service (Vendana	£10 779 49
GmbH) S.S.G Andalucia S.L	£19,778.48
St John's Ambulance Gibraltar	£56,923.85
	£36,992.25
World Marine Service Ltd FINANCIAL YEAR 17/18	£176,337.32
Ambulancias Andalucia,S.Coop.And	£55,503.65
Heathrow Air Ambulance Services	
S.S.G Andalucia S.L	£12,600.75
	£43,435.01
St John's Ambulance Gibraltar World Marine Service Ltd	£25,290.24 £109,500.00
WORL Maine Gervice Liu	2103,300.00

Q550/2018 Attempted suicides – Number since January 2012

635 Acting Clerk: Question 550. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, since January 2012, can the Government provide details per calendar year of how many attempted suicides have been identified by the GHA?

640 **Acting Clerk:** Answer, the Hon. the Minister for Health, Care and Justice.

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, the GHA cannot provide this information, as the GHA does not record whether the accident or emergency being treated occurred as a result of suicidal intent.

- ⁶⁴⁵ Following discussions between my Ministry and the Accident and Emergency Consultant, we concluded that it would be very difficult to obtain accurate statistics for the hon. Gentleman, if
 - for no other reason than a genuinely suicidal patient may not reveal his or her intention.

Q551-554/2018 Psychiatric doctors – Numbers employed; average waiting times; number of patients seen

Acting Clerk: Question 551. The Hon. L F Llamas.

650 **Hon. L F Llamas:** Mr Speaker, can the Government state, since January 2012, how many psychiatric doctors have been employed by the Government, detailing the date employed and the date the doctor ceased being an employee of the Government, if applicable?

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

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Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, I will answer this question together with Questions 552 to 554.

Acting Clerk: Question 552. The Hon. L F Llamas.

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Hon. L F Llamas: Mr Speaker, can the Government state, as at 13th September 2018, how many psychiatric doctors are permanently employed by the GHA?

Acting Clerk: Question 553. The Hon. L F Llamas.

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Hon. L F Llamas: Mr Speaker, can the Government state what is the average waiting time to see a psychologist?

Acting Clerk: Question 554. The Hon L F Llamas.

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Hon. L F Llamas: Mr Speaker, can the Government provide statistics in relation to how many persons are routinely seen by psychiatric doctors and the frequency of their visits, and whether this routine has been compromised in the last three months, whether daily, weekly, monthly, quarterly or yearly?

675 Mr Speaker, obviously this question was filed in September, so I appreciate the answer may be from June to September rather than to date.

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

680 **Hon. N F Costa:** Actually, Mr Speaker, just to tell the hon. Gentleman that the answer has been updated, so it is as up to date as it can be.

Two consultant psychiatrists have been employed by the GHA since January 2012, one in February 2013 and one in January 2014. The former retired from the service in May of this year.

I now hand over to the hon. Gentleman a table setting out the information in relation to the number of mental health nurses and consultant psychiatrists up to and including 1st April 2018.

	Mental Health Nurses	Consultant Psychiatrists
As at 1st April 2004	6	1
As at 1st April 2005	7	1
As at 1st April 2006	9	2
As at 1st April 2007	10	2
As at 1st April 2008	15	3
As at 1st April 2009	17	2
As at 1st April 2010	22.5	2
As at 1st April 2011	28	2
As at 1st April 2012	28	2
As at 1st April 2013	28.5	2
As at 1st April 2014	32.5	3.5
As at 1st April 2015	34.5	3.5
As at 1st April 2016	34	3.5
As at 1st April 2017	33	4.5
As at 1st April 2018	31	4.5

Answer to Q551/2018

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As the hon. Gentleman will note, the number of mental health nurses has increased from 28 as at 2011 to 31 and the number of consultant psychiatrist posts from two as at 2011 to 4.5 posts in 2018.

As at 11th December this year, there were 4.5 consultant psychiatrists employed by the GHA.

The average waiting time to see a psychologist was eight weeks in September 2018. These waiting times compare favourably with other European countries, where the target is for 90% of people referred for psychological therapy to be seen within 18 weeks. Further, in cases where a referral is classified as urgent, a member of our Community Mental Health team will make contact with the patient within 24 hours of the referral being received.

695 Mr Speaker, it pleases me greatly to report to the House that the average waiting time to see a psychologist has now been reduced from eight weeks to six weeks. This is testament to the Government's unwavering commitment and care towards our Mental Health Services.

In addition, we have contracted an additional counsellor to provide extra weekly sessions; further, the current counsellor and chartered counselling psychologist have increased their sessions by an extra day each.

July 2017 saw the introduction and development within our community of the mental health team for crisis and outreach services, comprising three mental welfare officers. The new service aims to provide continued support for individuals known to the mental health team when in crisis in order to prevent admissions; or, if admission is required, to support the discharge process. As announced in November of this year, the service has been restructured to comprise

705 process. As announced in November of this year, the service has been restructu four approved mental health professionals. It is worth noting that an average of 20% of appointments offered to see psychologists are not attended and are not cancelled in advance. This further stretches resources in a field where, unlike with other health professionals, appointments may last for a full hour.

Further, I was delighted and proud to announce for the first time in this year's Budget and again in October of this year the introduction of Gibraltar's very first Child and Adolescent Psychology Service, which commences in January of next year.

Patients are routinely seen by consultant psychiatrists as follows. An average of 141 patients are seen every month, including an average of 10 new patients. Of these, an average of 136 patients are seen once a month, two patients are seen once a week and three patients are seen fortnightly. The frequency of the visits is determined by the consultant psychiatrists during initial consultation, depending on the individual patient's needs.

There was one occasion during the beginning of August 2018 when clinics were compromised, which resulted in some appointments being cancelled. These, however, were rescheduled for the following week.

Q555-558/2018 Pregnancy and child birth – Under-18 pregnancies; Down's syndrome; neonatal abstinence syndrome

Acting Clerk: Question 555. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government state, since January 2012, how many pregnancies confirmed by the GHA were of women under the age of 18?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, I will answer this question together with Questions 556 to 558.

- 730 Mr Speaker, before I sit, just as a nod and a thanks to my excellent public officials just to confirm that they have already confirmed the answers I gave to the Hon. Mr Clinton. It is, as I told him before, purchase to pay. And as I noted to him, the GHA Finance has its own salary system and therefore does its own salaries.
- 735 Acting Clerk: Question 556. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government state, since January 2012, how many tests on pregnant women for Down's syndrome have come back positive?

740 Acting Clerk: Question 557. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government state, since January 2012, how many babies have been born with Down's syndrome?

745 Acting Clerk: Question 558. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, since January 2012, can the Government state per calendar year how many babies have been born with neonatal abstinence syndrome?

750 **Acting Clerk:** Answer, the Hon. the Minister for Health, Care and Justice.

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Hon. N F Costa: Mr Speaker, since January 2012 there have been 16 pregnancies confirmed by the GHA of women under the age of 18.

Harmony tests were introduced in July 2014 and since then there have been nine tests on women which have returned a positive result on Trisomy 21, also known as Down's syndrome.

women which have returned a positive result on Trisomy 21, also known as Down's syndrome. No data is available prior to this date.

Since January 2012, four babies have been born in St Bernard's Hospital with confirmed Down's syndrome.

Mr Speaker, given the real risk of identification, I will not provide the hon. Gentleman with the number of babies which have been born with Neonatal Abstinence Syndrome across the floor of the House. I will, however, be happy to advise him of the number in confidence.

Q559/2018 GHA and ERS premises – Number of thefts reported

Acting Clerk: Question 559. The Hon. L F Llamas.

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Hon. L F Llamas: Mr Speaker, can the Government state, for each calendar year since January
 2012, how many reports in relation to theft of goods or property have been raised by patients, residents or relatives within the GHA or ERS?

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

770 **Minister for Health, Care and Justice (Hon. N F Costa):** Mr Speaker, the number of reports in relation to the theft of goods or property which have been raised by patients or relatives within the ERS since January 2012 is as follows: 2012, three; 2013, one; 2014, one; 2015, one; 2016, zero; 2017, six; 2018, seven.

In relation to the GHA, thefts were not being logged prior to November 2017. After the introduction of the Datix program in November 2017 a record of such incidents was introduced and they are now recorded electronically. In 2018, the GHA reported 14 incidents of this nature.

Q560/2018 Care Agency employees – Number of non-resident carers

Acting Clerk: Question 560. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government state how many carers employed by the Care Agency are not resident in Gibraltar, including their date of employment?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, the total number of care workers currently employed by the Care Agency who are not resident in Gibraltar is 29. These carers were employed between January 2000 and December 2011 as follows: 2000, one; 2001, one; 2002, one; 2003, three; 2004, one; 2005, zero; 2006, three; 2007, two; 2008, three; 2009, four; 2010, one; and 2011, nine.

Q561/2018 GHA default judgment – Reason for failure to respond to doctor

790 Acting Clerk: Q561. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government explain why the Government failed to respond to the claim from the doctor suing the GHA, resulting in a judgment in default?

795 **Acting Clerk:** Answer, the Hon. the Minister for Health, Care and Justice.

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, as the hon. Gentleman surely knows, this matter arises from facts dating to their time in office, is currently *sub judice*, and in any event it is not in the interests of the conduct of the litigation for such matters to be discussed publicly.

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Q562/2018 Multi-Disciplinary Team – Meetings with Ocean Views patients

Acting Clerk: Question 562. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government state for each patient who was under the care of Ocean Views as at 1st June 2018 until 9th September 2018, the dates on which each patient met with the Multi-Disciplinary Team?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, this information is not kept electronically. To retrieve this data would require an exhaustive manual exercise that would prove a significant demand on the GHA's resources. It is, therefore, not feasible to complete the answer, as this will affect patient care and running of the services.

However, Mr Speaker, on average, the Multi-Disciplinary Team review admitted patients on a weekly basis.

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Hon. L F Llamas: Mr Speaker, I appreciate that if the information is not kept electronically it may provide some difficulty in providing an answer. However, I am informed by some of the service users, families and relatives who are at Ocean Views that they have actually struggled throughout the summer period. It may be something which has been resolved now, but they did struggle quite heavily during the month of luly and in particular in August when these weekly

struggle quite heavily during the month of July and in particular in August when these weekly meetings were actually not happening, with an actual span of up to three weeks where some of the service users were not actually met, with a disability.

Is the Minister satisfied that that might have occurred and whether they have now put procedures and policies in place so that that does not happen and the Minister is made aware immediately when these systems do fail? Hon. N F Costa: Mr Speaker, I will start with the last part of his question. I am not sure that I am informed immediately when the system fails but I can assure him that I am informed, because if it does not come from the official side, which it almost invariably does because I have to say my officials are very good at telling me if there is a problem, but if the officials do not get to me first then a family member will, and so I will have very good visibility when systems are not working as they should.

I have told the hon. Gentleman in answer to another question that the number of employed psychiatrists has gone from two to 4.5, which means that there is now huge resiliency within the Mental Health Services. In addition, the hon. Gentleman will have read the press release where the Government announced the addition of another psychologist, consultant psychologist, for Ocean Views. So, in addition to there being 2.5 further psychiatrists, we also have an in-house psychologist. So, what happened in August, which I have accepted to him in answer to the

- previous question did happen, should certainly not happen again.
- I do not want the hon. Gentleman, though, to leave the House thinking that it was because of any fault of the GHA, and he can believe me that if it were the fault of the GHA I would also tell him, but sometimes even with the best planning in the world, where we know that somebody is retiring and we start the recruitment process early and we advertise in the UK and locally and the selection boards are held, sometimes the person who comes to that selection board is not suitable, so that sets us back, or even people come to the selection board, they commit themselves to coming and, literally a day or two before, they tell us they are not going to come. You can imagine the stress that that causes when you think you have got a professional coming

to your service to be able to deliver that service.

But given that we have 4.5 psychiatrists and we are going to have I think four psychologists – because in addition to Dr Barber, who is in Ocean Views, we have two for the CAMHS service – I really do not think that the week of August that we had where people were unfortunately sick – these things happen – should happen again.

Mr Speaker: Next question.

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Q563/2018 Primary Care Centre – Telephone appointment system

Acting Clerk: Question 563. The Hon. L F Llamas.

- 860 **Hon. L F Llamas:** Mr Speaker, since the introduction of the telephone appointment system at the Primary Care Centre, can the Government state how many calls have been handled by staff members and how many calls have successfully resulted in appointments via the automated system?
- Acting Clerk: Answer, the Hon. the Minister for Health, Care and Justice.

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, I will answer this question together with Question 564.

870 Acting Clerk: Question 564. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government provide details in relation to the cost for the automated telephone appointment system for the GHA?

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

Hon. N F Costa: Mr Speaker, since the introduction of the automated telephone appointment system at the Primary Care Centre, calls handled by staff members and calls that have resulted in appointments are as follows: calls handled by staff, 30,385; calls via MyGHA successfully resulting in appointments, 12,776.

The cost for the automated telephone appointment system for the GHA was £75,000.

Q565/2018 Squadron Medical – Confirmation of negotiations

Acting Clerk: Question 565. The Hon. R M Clinton.

Hon. R M Clinton: Thank you, Mr Speaker.

885 Can the Government advise whether it or the Gibraltar Health Authority has entered into or is negotiating a supply contract with Squadron Medical?

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

890 **Minister for Health, Care and Justice (Hon. N F Costa):** Mr Speaker, the Gibraltar Health Authority had made enquiries with Squadron Medical; however, it has not entered into a supply contract with them.

Mr Speaker: Next question.

Q566/2018 Xanit – Termination of contractual arrangements

Acting Clerk: Question 566. The Hon. E J Phillips.

Hon. E J Phillips: Mr Speaker, further to Questions 656/2017, 68/2018, and 381/2018, is the Minister now in a position to make a full statement to the House in respect to the termination of the contractual arrangements with Xanit?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, the position remains the same as per my answer to Question 381/2018.

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Hon. E J Phillips: Mr Speaker, whilst I appreciate that there are sensitive discussions with both service providers, the Minister will also appreciate that this question has been outstanding for some time. Can the Minister give any further information that would allay any concerns that we have in relation to patients currently using either one of these service providers, particularly the one in which we have spoken about the termination of the contractual relationship? It does concern citizens who have asked this question to me before.

Hon. N F Costa: Mr Speaker, first of all to say that the answer is not outstanding. I have given him the answer, which is that the negotiations are still in train.

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If I recall correctly, the last time he asked me this question I pointed out to him that we were not only seeking to enter into contractual arrangements with two but in fact also a third tertiary centre in Spain that is very much known to Gibraltarians and which specialises in cancer treatment. The importance of a contractual arrangement with a Spanish tertiary centre is extremely important, as I am sure the hon. Gentleman will agree with me, because we want to

- 920 ensure that our clinical standards, which are taken from the NHS, are adopted by the Spanish tertiary centres. The GHA has, through the appointment of a responsible officer – basically he is an officer who ensures that all our doctors are GMC compliant and they keep up to date with the training and so on. He has visited Spanish tertiary centres and he has told us categorically that the GHA is, beyond a shadow of a doubt, at least 10 years ahead of Spanish tertiary centres
- ⁹²⁵ in terms of the quality of the care that we provide. The hon. Gentleman knows that in the past two years, following on from the work of the Hon. Dr John Cortes, we have quickened the pace of repatriating as many services as possible, not only because it makes sense for people not to have to travel when they are sick and all the stress that that entails, but also because we want to make sure that we have as much capability within our homeland as possible.
- So, he is right when he says that these negotiations are sensitive. They are sensitive because we need to make sure that the clinical standards are appropriate and we are happy with them. Let me tell him something else. If I had to choose whether to go to the UK or to Spain, I would always choose to go to the UK for any complex treatment. There is no better place than an NHS university hospital if you have something seriously wrong with you. However, of course if there
 is an emergency and you really are sick and you cannot fly, then we need to make sure that the care that we provide to our people is the best that we can, and we can only do that by making

sure that the tertiary centres agree to those standards.

There is one tertiary centre, and I spoke with my lawyers yesterday on a contract which is about to be signed, so I will not be able to make a statement on that one before Xanit, but I can assure the hon. Gentleman that if we are taking time it is only because we need to get it right, because we are not talking here about a typing pool or any other service, we are talking about the care of our patients, of our community.

Hon. E J Phillips: Whilst that is a very helpful explanation in relation to the tertiary providers
 that the Government may well contract with in the future, or whether the ink is dry on the document or not, I was referring to obviously the termination arrangements in relation to Xanit itself.

The issues surrounding the termination of Xanit as a tertiary provider, do they relate to a financial issue or is this just in relation to transferring patients from Xanit to have the services provided in some other tertiary hospital? My question was specifically about the termination of Xanit rather than the contractual arrangements that the Government intends to enter into with other tertiary providers.

Hon. N F Costa: In respect of that specifically, Mr Speaker, we are in negotiations as to price,
and as the hon. Gentleman should know – I have told him before in the House – we do continue to refer patients to Xanit.

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Hon. E J Phillips: So, insofar as the question, without going into too much detail because it is clearly sensitive, we are clearly looking at what has previously been owed to Xanit insofar as their services and how we can continue to work with Xanit in the future in relation to the special services that they provide for our community?

Hon. N F Costa: We are negotiating all aspects of the commercial work. We are negotiating all commercial aspects of the contract.

Mr Speaker: Next question. 965

Q567/2018 Medicinal cannabis -Statement of Government policy

Acting Clerk: Question 567. The Hon. E J Phillips.

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Hon. E J Phillips: Can the Government state its policy in respect to the use of medicinal cannabis in Gibraltar?

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

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Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, Her Majesty's Government of Gibraltar and the Gibraltar Health Authority are currently considering its policy as to the use of medicinal cannabis in Gibraltar.

Hon. E J Phillips: Will the Minister be laying a Command Paper in respect of this subject? 980

Hon. N F Costa: Mr Speaker, the hon. Gentleman, I know, knows that of course I am looking at it strictly from a clinical perspective and we are looking at what he will have read, as I have, the system in the UK, and so we are looking at how we can best benefit our patients for the use of medicinal cannabis products. Once we have clarity and a clear view on how we can benefit 985 our patients, I need to discuss the matter with the Hon. the Chief Minister, as the Minister with responsibility for drugs, and then of course we will have to take that matter to the Drugs Advisory Council. So it is not one area in which it is purely clinical and I can just make a decision. It is, I can assure him, actively looked into and once the GHA is ready we will then refer the matter to the Office of the Hon. the Chief Minister.

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Hon. E J Phillips: Obviously the reason why I asked that question is of course that our community had ... I think the hon. learned Lady on that side of the House and I engaged in a debate with the hon. Lady on this side of the House in relation to Sativex. In fact, it was one of the parts of the debate that we had. The Government by regulation introduced Sativex in order 995 to give reassurance to our medical practitioners that Sativex could be administered to patients with specific conditions. So, the Government has shown that propensity to deal with a request from medical professionals in relation to Sativex. Is the Government considering looking at a wide range of medicinal cannabis products that will be licensed and regulated in our jurisdiction to assist others with particular ailments? Or is the scope of medicinal cannabis going to be wider than just specific requests from medical practitioners?

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Hon. N F Costa: Mr Speaker, at this point in time we are taking the widest look at what we can provide and, to answer the first part of the preface to his supplementary, that will require legislative changes. 1005

Mr Speaker: Next question.

Q568/2018 HM Prison – Increase in prison officers

Acting Clerk: Question 568. The Hon. E J Phillips on behalf of the Hon. D A Feetham.

1010 **Hon. E J Phillips:** Does the Government intend to increase the complement of prison officers at HM Prison?

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

1015 **Minister for Health, Care and Justice (Hon. N F Costa):** Mr Speaker, following my Budget speech in July of this year, where I announced the recruitment of five additional prison officers, I am pleased to confirm that since September 2018 these additional resources are now in place. It bears pointing out to this House that under this Government the number of prison officer posts has increased from 38 in financial year 2012-13 to 50 posts in the current financial year.

1020 Following the outcome of the resources review conducted by the Prison Review Working Group, further recruitment is expected and planned over the next two years.

Hon. E J Phillips: Mr Speaker, in relation to those further resources that the Minister has referred to, from 38 to 50, how many of those specific officers have received training insofar as education and counselling in respect of the inmates?

The reason why I ask this question is of course that traditionally we have imported, effectively, from outside the community into the Prison, resources for teaching and counselling hopefully to deal with inmates and their particular issues. I wonder whether this process has been evolved internally so that we can provide for training and education internally to assist the inmates. That is why one of the questions I had was in relation to resources, because if there is an increase in prison population, of course there is going to be increased pressure on prison officers, but I wondered whether the Government had been looking at it from a different end as well.

Hon. N F Costa: Mr Speaker, the question asked me specifically about the increase of the complement of prison officers. If he wants to ask me about training, which of course he is perfectly entitled to do, I would ask that he please give me notice of the question because then I can ask the Superintendent to provide me with those details. I do, of course, have an idea but I do not want to even unintentionally mislead him by giving him information that may prove to be incorrect.

Mr Speaker: Next question.

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Q569/2018 HM Prison – Parole qualification time

Acting Clerk: Question 569. The Hon. E J Phillips on behalf of the Hon. D A Feetham.

Hon. E J Phillips: Does the Government intend to increase the time an inmate serves in prison before he or she qualifies for parole, which is currently set by the Prison Act at a third of sentence?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, the Law Commission is presently considering whether to amend the required proportion of the sentence to be served prior to a qualification for release on licence.

Hon. E J Phillips: Mr Speaker, does the Minister know when Law Commission last met?

1060 **Hon. N F Costa:** Actually, we had another meeting pencilled in for today, and of course we have been unable to hold that meeting and so the last meeting was on 21st November.

Mr Speaker: Next question.

Q570/2018 HM Prison – Drugs testing of inmates

Acting Clerk: Question 570. The Hon. E J Phillips on behalf of the Hon. D A Feetham.

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Hon. E J Phillips: Mr Speaker, how many inmates at HM Prison have been subject to (a) mandatory drugs testing and (b) voluntary drugs testing in the last seven years?

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

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Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, in the last seven years 255 inmates have been subject to voluntary drugs testing.

No inmates have been subject to mandatory drugs testing. However, the mandatory drugs testing implementation process is well under way. The Prison Superintendent is taking the relevant steps to introduce the MDT programme as soon as it is reasonably practical. This includes the drafting of relevant documents, including information leaflets for inmates, information leaflets for staff, authorisation forms and adjudication forms. Information leaflets for inmates will be translated into various languages to cater for non-English speaking individuals. A comprehensive Prison Service Order has also been drafted which will serve as a complete reference on MDT. The commissioning of new IT software and staff training is also required. The Prison now has three qualified sample takers, with more officers to be trained early in the new year.

As a result of representations received, we are also looking at various legal issues raised. Consideration is being given to the level of assistance required by the adjudicating Justices of the Peace in adjudication hearings following a positive result. Further, questions as to legal assistance at adjudications and the process for independent testing of samples by prisoners are also being carefully deliberated.

Mr Speaker: Next question.

Q571/2018 Europa Point facilities for children – Nature of facilities

1090 Acting Clerk: Question 571. The Hon. E J Phillips on behalf of the Hon. D A Feetham.

Hon. E J Phillips: Mr Speaker, will some of the facilities for children which the Government has intimated in documents filed with the Town Planner, that it proposes to build at Europa Point, be in the nature of a young offender institution, or a secure training centre, or secure children's home?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, the documents illustrate plans for a secure children's home. As the hon. Member will be aware, a secure children's home is a place where children and young peoples' liberties are restricted under an order made in court and they serve two main purposes: (a) to protect young people who are placing themselves or others at risk of harm through a range of behaviours, or (b) to provide an alternative venue to a custodial sentence that is not an adult prison.

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Hon. E J Phillips: I am not too sure whether the Government's plans have further matured in relation to the secure children's home. I am grateful to the Minister for clarifying that the principal objectives are to protect those young people and also in relation to their attendance as an alternative to custody.

- 1110 The Minister may not know this at this stage, given the maturity of those plans, but does the Minister know what forms of education will be available in the context of this secure children's home and the availability and access to education and teaching aids?
- Hon. N F Costa: Mr Speaker, the hon. Gentleman raises some good questions, but they are
 very far ahead of where we are right now. The hon. Gentleman, though, I think should be comforted in the fact that the secure children's home will be under the aegis of the Care Agency rather than under HM Prison, which means that the central philosophy of the secure children's home will be to be able to educate and take care of young children or children, not necessarily that young so that they are able to reintegrate into society, depending of course if it is one under a custodial sentence, then that would be determined by the courts, and also if it is in relation to other behaviour but not through a custodial sentence but through a court order and the time limits will be set therein, but should be able to ensure that once the young person is out into the community the education of that young person has not been stunted or interrupted by being in a secure children's home as opposed to normal education.
- 1125

Hon. E J Phillips: The difficulty that I have encountered in wearing a different hat, my professional hat – my other professional hat – is that people, when they leave prison, particularly adult inmates, find it difficult to transition back into society, and I am sure the Minister would agree that is more important, of course, with younger children as well who have had issues where custodial sentences have been imposed, that we try to avoid them falling into

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a pattern of criminality. The reason for the question is especially important because if there is availability of alternatives and further education that will stop them falling back into criminality... I agree with what he says about that, and obviously the plans are not significantly matured, but I think it is especially important in the context of children that we stop them falling into the cycle of crime. I am sure that the Minister would agree with that.

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Hon. N F Costa: Yes, Mr Speaker, which is, as I said, why we have taken the route, after a lot of deliberation with the Hon. Chief Minister and the Hon. Deputy Chief Minister, about how best we ensure that, when a young person is in a secure children's home we ensure that there is the minimum interruption to that young person's trajectory in life, which obviously pivotally includes receiving an excellent education.

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Mr Speaker: Next question.

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Q572-577/2018 Convictions and fines – Dogs; weapons; drugs

Acting Clerk: Question 572. The Hon. E J Phillips on behalf of the Hon. D A Feetham.

Hon. E J Phillips: Mr Speaker, how many convictions or fines issued have there been in each of the last 10 years for failure to register or licence a dog in Gibraltar?

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

Minister for Health, Care and Justice (Hon. N F Costa): Mr Speaker, I will answer this question together with Questions 573 to 577.

Acting Clerk: Question 573. The Hon. E J Phillips on behalf of the Hon. D A Feetham.

Hon. E J Phillips: Mr Speaker, how many convictions or fines issued have there been for dog fouling in each of the last 10 years?

Acting Clerk: Question 574. The Hon. E J Phillips.

Hon. E J Phillips: How many convictions have there been in each of the last 10 years for crimes associated with carrying or injuries caused by the carrying of knives, guns or other offensive weapons in Gibraltar?

Acting Clerk: Question 575. The Hon. E J Phillips.

Hon. E J Phillips: How many convictions have there been in each of the last 10 years in respect of (a) the importation and (b) the supply of cocaine, cannabis and heroin in Gibraltar?

Acting Clerk: Question 576. The Hon. L F Llamas.

- 1175 **Hon. L F Llamas:** Mr Speaker, since December 2011 to date can the Government provide details of illegal drugs recovered by our law enforcement officers in venues where festivals and events took place, including (a) the type of illegal drug, (b) the amount, (c) the date recovered and (d) the associated festival or event?
- 1180 Acting Clerk: Question 577. The Hon. E J Phillips.

Hon. E J Phillips: Can the Government confirm the classification and amount of drugs seized by law enforcement agencies during National Day?

1185 **Acting Clerk:** Answer, the Hon. the Minister for Health, Care and Justice.

Hon. N F Costa: Mr Speaker, I now hand over a schedule to the hon. Gentleman showing: (1) the number of convictions issued or fines issued in respect of the last 10 years for failure to register or license a dog in Gibraltar; (2) the number of convictions or fines issued in each of the last 10 years for dog fouling; (3) the number of convictions in each of the last 10 years for crimes associated with the carrying or injuries caused by the carrying of knives, guns or other offensive weapons in Gibraltar; and (4) the number of convictions in each of the last 10 years in respect of (a) the importation and (b) the supply of cocaine, cannabis and heroin in Gibraltar.

Answer to Q572-577/2018

YEAR	How many convictions or fines issued have there been in each of the last 10 years for	How many convictions or fines have there been for dog fouling in	How many convictions have there been in each of the last 10 years for crimes associated with the carrying, or injuries	How many convictions have there been in each of the last 10 years in respect of a) the importation and b) the supply of cocaine, cannabis and heroin in Gibraltar? (RGP4)			
	failure to register or licence a dog in Gibraltar? (RGP1)	each of the last 10 years? (RGP2)	caused by the carrying of knives, guns or other offensive weapons in Gibraltar? (RGP3)	a)	b)		
2008- 2009	2*	2*	46	8	112		
2009- 2010	8	4	69	9	83		
2010- 2011	8	NIL	90	10	139		
2011- 2012	19	8	70	28	117		
2012- 2013	10	7	28	18	42		
2013- 2014	4	2	60	12	25		
2014- 2015	3	1	64	21	28		
2015- 2016	2	1	15	27	13		
2016- 2017	7	2	33	10	16		
2017- 2018	NIL	NIL	39	11	30		

* Please note that the data in respect of this question was corrupted hence we cannot vouch for its total accuracy.

1195 **Hon. N F Costa:** Mr Speaker, the RGP does not record statistics on venues where illegal drugs are recovered.

Further, the following drugs were seized by the RGP during the National Day policing operation: Class A MDMA, 2 g; Class B cannabis resin, 10.2 g; Class C Valium, two tablets.

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CULTURE, THE MEDIA, YOUTH AND SPORT

Q578/2018

Lathbury barracks – Surveys undertaken before removal of green area

Acting Clerk: Question 578. The Hon. E J Phillips on behalf of the Hon. T N Hammond.

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Hon. E J Phillips: Mr Speaker, what surveys of the green area recently removed at Lathbury Barracks as part of the sports complex construction were undertaken prior to its removal?

Acting Clerk: Answer, the Hon. the Minister for Culture, the Media, Youth and Sport.

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Minister for Culture, the Media, Youth and Sport (Hon. S E Linares): Mr Speaker, surveys and assessments were carried out, as is the norm, to present to the Development and Planning Commission. These refer to environmental impact assessments that included an ecological survey carried out by Wild Life Gibraltar Limited.

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Mr Speaker: Next question.

Q579/2018 GSLA – Update re Grade 9 AA post

Acting Clerk: Question 579. The Hon. E J Reyes.

Hon. E J Reyes: Mr Speaker, further to the answer provided to Question 363/2018, can the
 Minister for Sport update this House in respect of the Grade 9 (Administrative Assistant) post
 which was vacant within the Gibraltar Sports and Leisure Authority and being covered
 temporarily by a supply worker via S&K Recruitment?

Acting Clerk: Answer, the Hon. the Minister for Culture, the Media, Youth and Sport.

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Minister for Culture, the Media, Youth and Sport (Hon. S E Linares): Mr Speaker, the S&K worker who was covering the post temporarily decided to explore other avenues and the GSLA is currently working with S&K Recruitment for a suitable replacement to continue to cover the post temporarily.

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Hon. E J Reyes: Mr Speaker, in previous answers relating to this question, the Minister said that this post was on a temporary basis by a recruitment agency because he was reviewing staffing levels and so on. Are there any updates? Having taken someone else on still via a recruitment agency means that (1) there is still an ongoing process in respect to the staffing level, or (2) some other reason that the Minister may enlighten us with.

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Hon. S E Linares: Yes, Mr Speaker, the GSLA is still under review but it is only at this level, i.e. the AA level, as opposed to all the others. As the hon. Member knows, we have done the review from top to bottom and we are at the stage, I think, that it is going to be decided very soon whether we do keep that post or we actually do not need that post for the GSLA. That is why they are using a temporary cover, to see if there is enough work or enough for that person to be

doing. Like I said, they are still using S&K but it will get to a point where they will decide we do not need this post or we then have a permanent one.

1240 **Mr Speaker:** Next question.

Q580/2018 Sports Performance Director – Details of post

Acting Clerk: Question 580. The Hon. E J Reyes.

Hon. E J Reyes: Can Government provide details of the duties assigned to the Sports Performance Director's post, indicating within which Department this post holder is based and what relevant qualifications does the individual possess?

Acting Clerk: Answer, the Hon. the Minister for Culture, the Media, Youth and Sport.

Minister for Culture, the Media, Youth and Sport (Hon. S E Linares): Mr Speaker, the post of Sports Performance Director was removed from the approved establishment pages for the financial year 2017-18, and I can therefore confirm that this post no longer exists.

Hon. E J Reyes: Yes, thank you, Mr Speaker, I had noticed that the estimates of 2016-17 had one post catering for Sports Performance Director and then in 2017-18 it went to zero, which is why I asked him the question where is the post holder based.

Is the Minister confirming that there is no current post holder? And, therefore, if there was one before, what has happened to that individual?

Hon. S E Linares: No, Mr Speaker, there was -

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Mr Speaker: You do not have to answer the second part, what would he do; just confirm whether there is a post holder or not.

Hon. S E Linares: Thank you, Mr Speaker.

Basically, we put that post in the book, nobody had covered it, so there is no reason why ... what they were going to do anyway, but the post was there because at the time during the review that the hon. Member and I have explained before, we envisaged that we were going to have a Sports Performance Director. Now, with the review and all the things that have happened within the GSLA, it is not necessary to have that post.

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Mr Speaker: Next question.

Q581/2018 Sports-related grants – Payments this financial year

Acting Clerk: Question 581. The Hon. E J Reyes.

Hon. E J Reyes: Can the Minister for Sports provide updated consolidated details of all payments made during this current financial year in respect of any sports-related grants?

Acting Clerk: Answer, the Hon. the Minister for Culture, the Media, Youth and Sport.

Minister for Culture, the Media, Youth and Sport (Hon. S E Linares): Mr Speaker, I now hand over to the hon. Member opposite updated consolidated details of all payments made in respect of sports-related grants during this financial year.

I take this opportunity to remind the hon. Member opposite that updated information is posted on the GSLA website regularly.

Answer to Q581/2018

Grants awarded for Hosting of Special Sports and Leisure Events 2018/2019

Backgammon Association	£67,000.00
Tenpin Bowling Association	£16,000.00
Chess Tournament	£40,648.00
Professional Darts Corporation	£298,549.20
Harley Davidson Rally	£1,180.00
Mixed Martial Arts Association	£1,592.80
Netball Association	£10,850.40
Match Point (International Pool Tournament)	£85,250.00
Rhythmic Gymnastics Association	£1,150.00
Snooker Open	£4,105.75
Special Olympics	£9,065.50
International Ladies Football Tournament	£29,693.14

Grants awarded to Sporting Societies, 2018/2019

Official International Competitions

Netball Association	6,652.72
Shooting Federation	22,972.16
Darts Association	5,002.34
Hockey Association	6,125.00
Athletics Association	7,821.88
Basketball Association	34670.55
Triathlon Association	1,834.20
Ju-Jitsu Association	1,367.19
Rowing Association	5,186.20
Sea Angling Federation	5,389.18
Squash Association	2,145.00

Multi Sport International Competitions

Straits Games	£628.00
Island Games Triathlon	£967.50
Special Olympics	£9,065.50

Sports Development Projects

Cycling Association	227.96
Basketball Association	455.04
Hockey Association	832.50
Badminton Association	893.75
Target Shooting Association	1,349.00
Cricket Association	860.00

1285 **Mr Speaker:** Next question.

Q582/2018 Cultural grants – Awards this financial year

Acting Clerk: Question 582. The Hon. E J Reyes.

Hon. E J Reyes: Can the Minister for Culture provide updated consolidated details of all cultural grants awarded during this current financial year?

Acting Clerk: Answer, the Hon. the Minister for Culture, the Media, Youth and Sport.

1295 **Minister for Culture, the Media, Youth and Sport (Hon. S E Linares):** Mr Speaker, I now hand over to the hon. Member opposite updated consolidated details of all the cultural grants awarded during this financial year.

I take this opportunity to remind the hon. Member opposite that updated information is posted on the HMGoG website regularly and the culture.gi website.

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Mr Speaker: The advantage of the website is that you do not need a magnifying glass, which you do for this schedule again.

Answer to Q582/2018

CULTURAL GRANTS FOR FINANCIAL YEAR 2018-2019

Stylos Dance Studio - Participation at the Dance Excellence International Festival of Young Dancers	5,000.00
Gibraltar Productions - Sponsorship of World Music Festival 2018	50,000.00
Gibraltar Academy of Music and Performing Arts - Participation at World Choir Games	4,004.00
Ambrose Avellano – Support towards Exhibition	1,000.00
Gibraltar National Dance Organisation - GNDO for IDO affiliation fee/dance workshops & International Events	12,724.00
The White Light Theatre Group - Participation at the West End Stage Summer School	2,348.00
Gibraltar Arts and Crafts Association - St Bernadette's School workshops	1,750.00
Gibraltar League of Hospital Friends – Relaunch of the Gibraltar Cookery Book	6,420.00
Gibraltar Academy of Music and Performing Arts - Support towards the Festival of Young Musicians	3,000.00
Transitions Dance Academy - Equipment and support towards workshop in Manchester	1,680.00
Gibraltar Photographic Society - Purchase of Equipment	4,100.00
Comic Con Festival and ZDay Horror Festival	11,050.00
Art in Movement - Support towards Art Dance Festival 2018	2,320.00
M.O Productions - Organisation, staging and production of the 17th Gibraltar International Dance Festival	5,000.00
Bayside & Westside Drama Group to travel to Rochester, UK to participate in the Duncan Youth Festival	2,500.00
Gibraltar Face & Body paint Association - Assistance for the Gibraltar Body Painting Festival 2019	2,100.00
DSA Sequence Dance Club - Travel Expenses for international couple to attend the 65th Anniversary	1,000.00
Gibraltar Artisan Market – Gibraltar Christmas Markets	6,000.00
Harmonics Choir - Production "The Armed Man - A Mass for Peace"	1,000.00
Joseph Gingell - Book Grant - Second edition publication on the Evacuation of the Civilian Population during WWII	6,000.00
Dr M G Sanchez - funding of university conferences	1,200.00
Alan John Perez - Cost of Travel, equipment hire etc. to exhibit in Alcultura Exhibition	4,500.00
Group 2000 - Production of a World War II Presentation	400.00

Q583/2018

Victoria Stadium – Moneys outstanding from sale of lease

Acting Clerk: Question 583. The Hon. E J Reyes.

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Hon. E J Reyes: Can the Minister for Sports indicate when does Government expect to receive the balance, which is £6.5 million, still outstanding for the sale of the lease of Victoria Stadium?

Acting Clerk: Answer, the Hon. the Minister for Culture, the Media, Youth and Sport.

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Minister for Culture, the Media, Youth and Sport (Hon. S E Linares): Mr Speaker, it is expected for the Gibraltar Football Association to pay HM Government the outstanding balance of £6.5 million during this financial year.

1315 Mr Speaker: Next question.

Q584/2018 Gibraltar National Dance Organisation -Breakdown of grant awarded

Acting Clerk: Question 584. The Hon. E J Reyes.

Hon. E J Reyes: Mr Speaker, further to the answer provided to Q368/2018, can the Minister for Culture now provide a detailed breakdown of the £11,700 granted to the Gibraltar National Dance Organisation?

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Acting Clerk: Answer, the Hon. the Minister for Culture, the Media, Youth and Sport.

- Minister for Culture, the Media, Youth and Sport (Hon. S E Linares): Mr Speaker, further to 1325 the answer provided to Q368/2018, the £11,700 grant to the Gibraltar National Dance Organisation was awarded and used for their participation in the IDO Commonwealth Dance Games held in South Africa and at the IDO World Show Dance Championships held in Riesa, Germany. The grant also went towards the IDO affiliated membership fee.
- 1330 Hon. E J Reyes: Yes, Mr Speaker, very similar to what I was told last time, and in the schedule we have a grand total of £11,700, which was to do with the IDO affiliation dance workshops, and I had requested how much was the affiliation fee. That was the one that mainly concerned me. The Minister did not have the information at that moment. He said he would try and chase it up. I never wrote to him and he obviously did not do that, which is why I posed the question, but if
- the staff who help to prepare the answer for the Minister had followed it up from Hansard he 1335 would really find out that what we were trying to establish was is the affiliation fee simply £700, for example, and therefore £11,000 was the actual participation, or what? One has no idea, especially when looking at schedules of how much is given in grants to other people, and so on. That was the main purpose, which can easily be derived from looking at Hansard from the 1340 previous occasion. So maybe the accounting staff would have been able to provide the Minister
- with information more so in respect of the affiliation fees.

Hon. S E Linares: Mr Speaker, I will give the hon. Member, by the end of business today, exactly the amount of money that the IDO paid for their affiliated membership fee.

Q585/2018 Victoria Stadium – Compensation paid to catering establishments

1345 Acting Clerk: Question 585. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise whether any money has been paid in compensation to catering establishments conducting business at the Victoria Stadium due to the sale of the stadium to the GFA; and if so, what amounts to whom?

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Acting Clerk: Answer the Hon. the Minister for Culture, the Media, Youth and Sport.

Minister for Culture, the Media, Youth and Sport (Hon. S E Linares): Mr Speaker, no money has been paid in compensation to any catering establishment conducting business at the Victoria Stadium.

Q586/2018 Lathbury Barracks Sports Complex – Parking spaces

Acting Clerk: Question 586. The Hon. R M Clinton.

1355 **Hon. R M Clinton:** Mr Speaker, can the Government advise how many parking spaces are to be built at the Lathbury Barracks Sports Complex and how many are envisaged to be sold commercially and for what value?

Acting Clerk: Answer the Hon. the Minister for Culture, the Media, Youth and Sport.

1360

Minister for Culture, the Media, Youth and Sport (Hon. S E Linares): Mr Speaker, an announcement will be made shortly with details of the number of parking spaces available for sale and value.

Hon. R M Clinton: Mr Speaker, I appreciate that the Government may wish to make an announcement. I am actually asking him now: can he provide that information to the House?

Hon. S E Linares: No, Mr Speaker.

- **Hon. R M Clinton:** Mr Speaker, I have asked a specific question to which I would like an answer. Either the Minister has the information available and can provide the answer to that question, or he is just plain blank refusing to provide that information to this House because it does not suit his timetable.
- 1375 **Chief Minister (Hon. F R Picardo):** Mr Speaker, it is neither of the two.

Mr Speaker: Next question.

ENVIRONMENT, ENERGY, CLIMATE CHANGE AND EDUCATION

Q483/2018 Government website – Table ED.8

Acting Clerk: Question 483. The Hon. L F Llamas.

1380 **Hon. L F Llamas:** Mr Speaker, can the Government provide an up-to-date schedule of Table ED.8 formerly published on the Government website?

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

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1400

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, the information is available on the website.

Q484/2018 Teachers – Details of vacant posts

Acting Clerk: Question 484. The Hon. E J Reyes.

Hon. E J Reyes: Mr Speaker, can the Minister for Education provide details in respect of any vacant teaching posts, identifying the school/establishment where these may exist and indicating how many are being covered in an acting capacity?

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

1395Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes):
Mr Speaker, the details are provided in the schedule I now hand over.

May I, though, qualify that by saying that one deputy head post was announced this week and there are several other teaching posts which have been interviewed and the results are expected shortly. I can share with the hon. Member exactly which they are, but I have just received notification that a number of them will have been filled certainly within the next week or two.

49

Answer to Q484/2018

VACANT TLR P	OSTS DUE TO PROMOTIONS	
QUALIFIED TEACHER TLR 1B	Westside School	SCIENCE CO-ORDINATOR (RING-FENCED)
QUALIFIED TEACHER TLR 1A	Westside School	SENIOR TEACHER
QUALIFIED TEACHER TLR 2B	Westside School	ASST TO KS3 COORDINATOR
QUALIFIED TEACHER TLR 2B	Westside School	ASST TO KS4 COORDINATOR
DEPUTY HEAD	NOTRE DAME	DEPUTY HEAD
QUALIFIED TEACHER TLR 2C	ST ANNE'S MIDDLE	FOUNDATION SUBJECT PE
QUALIFIED TEACHER TLR 2B	ST PAUL'S FIRST	CORE SUBJECT LEADER ENGLISH
QUALIFIED REACHER TLR 1A	Westside School	SENIOR TEACHER
QUALIFIED TEACHER TLR 2C	ST BERNARD'S MIDDLE	FOUNDATION SUBJECT LEADER ICT
QUALIFIED TEACHER TLR 2C	HEBREW SCHOOL	ICT AND FOUNDATION SUBJECT
QUALIFIED TEACHER TLR 2B	HEBREW SCHOOL	CORE SUBJECT LEADER MATHEMATICS AND SCIENCE
QUALIFIED TEACHER TLR 2D	ST JOSEPH'S MIDDLE	FOUNDATION SUBJECT LEADER
QUALIFIED TEACHER TLR 2C	ST ANNE'S MIDDLE	FOUNDATION SUBJECT ICT
QUALIFIED TEACHER TLR 2C	ST BERNARD'S MIDDLE	ICT COORDINATOR
QUALIFIED TEACHER TLR 2D	ST BERNARD'S MIDDLE	FOUNDATION SUBJECT ART AND DT

VACANT TLR POSTS DUE TO RETIREMENTS

QUALIFIED TEACHER TLR 1B	GIBRALTAR COLLEGE	IT COORDINATOR
QUALIFIED TEACHER TLR 1B	WESTSIDE SCHOOL	DESIGN AND TECHNOLOGY COORDINATOR
QUALIFIED TEACHER TLR 2B	NOTRE DAME	SENCO
QUALIFIED TEACHER TLR 2B	HEBREW SCHOOL	ENGLISH AND SENCO COORDINATOR
QUALIFIED TEACHER TLR 1B	WESTSIDE SCHOOL	HEAD OF BIOLOGY

ALL ABOVE POSTS ARE BEING COVERED ON AN ACTING CAPACITY

Q485/2018 Government-registered nurseries – Breakdown of registered pupils

Acting Clerk: Question 485. The Hon. E J Reyes.

Hon. E J Reyes: Can the Minister for Education provide a breakdown of nursery pupils registered in Government-administered nurseries, indicating the establishment where these pupils are registered and showing if they are morning or afternoon placements?

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

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Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, I am handing over a schedule to the Hon. Member which contains the information requested.

Answer to Q485/2018

NURSERY	АМ	РМ
St Joseph's	62	30
Notre Dames	30	19
Varyl Begg	33	30
Early Birds	8	7
St Bernard's	39	
Governor's Meadow	41	
St Paul's	42	
St Mary's	33	

Q486/2018 Government schools – Breakdown of registered students

Acting Clerk: Question 486. The Hon. E J Reyes.

1415

Hon. E J Reyes: Can the Minister for Education provide a breakdown indicating the school and class year, i.e. Reception to Year 12, in respect of students registered in Government schools for the academic year 2018-19?

1420 **Acting Clerk:** Answer, the Hon. the Minister for the Environment, Energy, Climate Change and Education.

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, with apologies to the member of staff who is going to rush across the Chamber, yet again, for the third successive time – perhaps I should have given them all together – the information is in the schedule that I will now hand over.

SCHOOL	RECEPTION	YEAR1	YEAR 2	YEAR 3	YEAR 4	YEAR 5	YEAR 6	YEAR 7	YEAR 8	YEAR 9	YEAR 10	YEAR 11	YEAR 12
GOVERNOR'S MEADOW	60	74	64	51	X	X	Х	X	X	X	X	X	X
NOTRE DAME	53	79	91	68	X	х	Х	X	X	X	X	Х	X
ST. BERNARD'S F	40	46	36	45	X	Х	х	X	X	X	X	X	X
ST. MARY'S F	40	39	40	50	X	Х	Х	X	X	X	X	Х	X
ST. JOSEPH'S F	93	79	99	107	X	Х	Х	X	X	X	X	Х	X
ST. PAUL'S F	79	73	80	60	X	X	Х	X	X	X	X	Х	X
HEBREW PRIMARY	20	19	24	16	15	26	10	19	X	X	X	Х	X
BISHOP FITZGERALD	X	X	X	X	103	111	110	101	X	X	X	Х	X
ST. ANNE'S M	x	Х	X	X	122	106	115	107	X	X	X	Х	X
ST. BERNARD'S M	X	X	X	X	119	86	76	88	X	X	X	Х	X
ST. JOSEPH'S M	x	Х	X	Х	124	108	97	89	Х	X	X	Х	X
ST. MARTIN'S	7	5	5	4	4	6	5	3	3	2	1	4	X
BAYSIDE	x	Х	X	X	X	X	Х	Х	215	215	189	180	156
WESTSIDE	x	X	X	X	X	X	Х	X	184	197	198	161	156

Answer to Q486/2018

Hon. E J Reyes: Mr Speaker, while the schedule is being handed over, I have a very short supplementary in respect of the answer given in the schedule to Question 484. Would it be convenient for me to pose that now?

1430 The first entry is 'Qualified Teacher TLR 1B' at Westside School, which is a Science Coordinator, and it says '(Ring-fenced)'. Could I have a little bit of clarification of what is meant by ring-fenced in respect of this particular post?

Hon. Dr J E Cortes: Mr Speaker, I will have to enquire as to exactly what that would mean. I assume that it is possibly personal to the holder in relation to certain conditions, but I would need to get that information.

Hon. E J Reyes: Mr Speaker, I would be grateful for that, in fact my first reaction was very similar to the Minister's – could it be something personal to the holder – but because it is
vacant, it should not be personal to holder; personal to holder is when someone occupies something personally. I will wait for the Minister to get information as and when he can.

Q487/2018 Notre Dame School – Cost

Acting Clerk: Question 487. The Hon. E J Reyes.

Hon. E J Reyes: Can the Minister for Education say what was the original contracted cost in respect of construction of the new Notre Dame School and what the final cost has been?

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

1450 **Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes):** Mr Speaker, in view of the fact that we will shortly be inviting proposals for similar schools, this information cannot yet be made public.

Q488/2018 St Martin's and Notre Dame Schools – Outreach programme

Acting Clerk: Question 488. The Hon. E J Reyes.

1455 **Hon. E J Reyes:** Can the Minister for Education provide details of any delays or variations in respect of the outreach programme hereto enjoyed by pupils of St Martin's School due to the pending transfer of Notre Dame School into a new site?

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

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, there was no significant impact.

Q489/2018 St Martin's School – Kusuma Trust

Acting Clerk: Question 489. The Hon. E J Reyes.

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Hon. E J Reyes: Can the Minister for Education provide details of the monetary value of donations made by the Kusuma Trust in 2013 in favour of St Martin's School and what is envisaged will happen to these upon the eventual transfer of St Martin's School to new premises?

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

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, the monetary value of donations made by the Kusuma Trust in 2013 amounted to £310,823.42.

This money went towards building extensions which therefore cannot be transferred to the new school.

Q490/2018 TLRs – Equalisation between lower and upper primary schools

Acting Clerk: Question 490. The Hon. E J Reyes.

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Hon. E J Reyes: Can the Minister for Education provide an update in respect of any progress made towards the equalisation of TLRs between lower and upper primary schools?

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

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, this has been agreed and the matter settled.

1490 **Mr Speaker:** And it was the subject of a very recent press release. Couldn't the Minister have held it up until today?

Chief Minister (Hon. F R Picardo): No, Mr Speaker, for a very good reason. The question has come from three months ago and there are press releases which have been backing up because
 we try and keep to that convention, but the business of Government and in particular the business of Government informing citizens is not one that can be indefinitely held up, although Question Time has been unfortunately held up by the need for us to be dealing with Brexit matters. I am sure it is neither in the interests of hon. Members or ours to be, in the last 48 working hours of the year, dealing with matters which relate principally to questions posed in September of this year, although that used to be the case when I was elected and Members opposite used to run the Government; but it has not been our practice and it will not be our practice, I hope, in the next calendar year.

Mr Speaker: Next question.

Q491/2018 GCSEs – Details of classes with more than 25 pupils

1505 Acting Clerk: Question 491. The Hon. E J Reyes.

Hon. E J Reyes: Can the Minister for Education provide details in respect of how many GCSE classes are currently being taught with more than 25 pupils per class, indicating the subject area and the establishments concerned?

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

- Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes):
 Mr Speaker, there are currently six GCSE classes being taught with more than 25 pupils per class. Three of these are in Westside. They correspond to two Spanish classes and one history class. The other three correspond to Bayside, with one Spanish class, one sociology class and one English class being over 25 pupils.
- 1520 Hon. E J Reyes: Thank you, Mr Speaker.

Given that there is some sort of agreement or understanding with the Teachers' Association in respect of class sizes, one presumes that there must be exceptional cases why these classes are bigger than 25. Can the Minister confirm is it because there is a shortage of a specialist teacher in that subject area, or is it a question of shortage of available rooms to be able to provide two classes, or for some other valid reason?

Hon. Dr J E Cortes: No, Mr Speaker, the average still remains well within. For example, for history classes the average is 23, for Spanish year 10 the average is 22 and for Spanish year 11 in year 11 the average is 20 in Westside. In Bayside the average is 20, 23 and 18 for Spanish, sociology and English.

The fact is that they are over 25 by very little. Four of the six have 26 in the class and the other two have 28 in the class, so it is a question of ... You cannot really have a whole new class just for one or two, so the additional ones are spread out in order to make them very close to 25 and therefore with no significant negative impact on teaching. That is the reason. It is not that we are well over; it is just the odd individual students that are fitted in, in order to not have to

we are well over; it is just the odd individual students that are fitted in, in order to not have provide a full new class for very few students.

Q492/2018 Portakabin classrooms – Details of use

Acting Clerk: Question 492. The Hon. E J Reyes.

Hon. E J Reyes: Can Government provide details of how many classrooms are currently being conducted in portakabins and the schools they relate to for this academic year?

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

1545 **Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes):** Mr Speaker, the number of classes currently being conducted in portakabins – and fine portakabins most of them are too – and the schools they relate to are as follows: two in the Gibraltar College, three in St Martin's and four in Bishop Fitzgerald.

Q493/2018 Casais contract re Bayside/Westside School – Government company signatory to contract

Acting Clerk: Question 493. The Hon. R M Clinton.

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Hon. R M Clinton: Mr Speaker, can the Government advise which Government company signed the contract with Casais for the construction of the new Bayside/Westside school?

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

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, the company is GEP Ltd.

Q494/2018 New comprehensive school – Cost of ICT, fixtures, fittings and equipment

Acting Clerk: Question 494. The Hon. R M Clinton.

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Hon. R M Clinton: Mr Speaker, can the Government advise what is the anticipated cost of ICT and fixtures, fittings and equipment for the new comprehensive school?

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

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, the procurement process for the new comprehensive school's ICT, fixtures, fittings and equipment is currently underway, so it is not possible to advise on the anticipated costs.

Q495 and Q499-500/2018

St Martin's, Governor's Meadow and Bishop Fitzgerald Schools – Expected completion date and cost re Westside site; logistics re walking route; engagement with parents

1570 Acting Clerk: Question 495. Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government confirm that it is now its intention to demolish the existing Westside School once vacated and build new schools for St Martin's, Bishop Fitzgerald and Governor's Meadow on that site; and if so, what is the expected completion date and cost?

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

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, I will answer this Question together with Questions 499 and 500.

1585 Acting Clerk: Question 499. The Hon. Ms M D Hassan Nahon.

Hon. Ms M D Hassan Nahon: In connection with the interim arrangements for Governor's Meadow and Bishop Fitzgerald Schools, has Government decided on how the logistics, ranging from lunch areas and pick-up and drop-off points, to the walking route, given the extended journey for many within the catchment area, will work?

Acting Clerk: Question 500. The Hon. Ms M D Hassan Nahon.

Hon. Ms M D Hassan Nahon: With regard to Governor's Meadow and Bishop Fitzgerald Schools, is Government satisfied that it has engaged sufficiently with parents in connection with the new interim arrangements while the new school is built?

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

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Hon. Dr J E Cortes: Mr Speaker, in answer to Question 495, no, sir, St Martin's will be built on the area currently taken up by the Westside playing fields. Governor's Meadow and Bishop Fitzgerald will be built on their current sites.

In relation to Question 499, the design process, which is underway, will take account of all of these considerations.

In answer to Question 500, this will of course happen as soon as it is appropriate.

Hon. Ms M D Hassan Nahon: Mr Speaker, if I may ask the hon. Gentleman ... Parents have reported that they feel that there is a lack of communication and they have actually been
 hearing about arrangements through the kids from the teachers. So, if I may ask the Hon. Minister, would he be willing to enhance communication methods with the parents to give them some comfort and information for future arrangements?

Hon. Dr J E Cortes: Mr Speaker, not only would I be willing, as I have said, it is a part of the
 process, but it is just too soon for that. They will be consulted, as has been the case throughout.
 In fact, the St Martin's School, which is the one that is commencing imminently, there has been discussion with the parents and in fact parents were invited to the presentation which the Chief Minister and I gave in No. 6 a couple of weeks ago. So, at the appropriate time, absolutely they will be allowed to form part of the process.

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Mr Speaker: The Hon. Roy Clinton.

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Hon. R M Clinton: Thank you, Mr Speaker.

I am grateful to the Minister for his answer. Could he perhaps elaborate on his answer as to what he has in his mind in terms of the planning and logistics for building the new Bishop Fitzgerald, Governor's Meadow and St Martin's? Is it the Government's intention to first have decanted Westside into a new comprehensive before building on the playing field or the sports ground at the back of Westside? And, is it also the Government's intention, where will they decant the pupils in Bishop Fitzgerald and Governor's Meadow while construction is occurring on that footprint?

1635 **Hon. Dr J E Cortes:** Mr Speaker, this was actually stated in our press call just a couple of weeks ago. *(Interjection)* It may not have been in the press release, Mr Speaker, but it was mentioned.

The construction of St Martin's will be starting very soon and that will not be awaiting the decanting of Westside School. Arrangements will be made so that there will be no need to pass through Westside School as part of the construction process during school hours.

Bishop Fitzgerald and Governor's Meadow will be decanted into schools that are going to be vacated next summer with the building of new ones. The detail of which exactly is going where is being assessed with the headteachers, but that is the plan.

1645 **Hon. R M Clinton:** Mr Speaker, I am grateful to the Minister for his answer. Can he give the House a categorical assurance that there will be no use of portakabins for decanting?

Hon. Dr J E Cortes: Yes, sir.

Mr Speaker: Next question.

Q496/2018 Excluded and suspended students – Numbers in last 12 months

1650 Acting Clerk: Question 496. The Hon. E J Phillips.

Hon. E J Phillips: Mr Speaker, can the Government state how many students have been excluded or suspended from our schools in the last 12 months?

1655 **Acting Clerk:** Answer, the Hon. the Minister for the Environment, Energy, Climate Change and Education.

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes):
 Mr Speaker, from September 2017 to December 2018 – the question came in September but I
 have been generous and added a couple of months more, so it is more than 12 months; it is
 from September last year to the current date, or as recently as we have been able to get the
 information – 37 students have been suspended or excluded from school, a total of 48
 suspensions, given that some students have been excluded more than once.

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Hon. E J Phillips: Mr Speaker, just to make a point, I am grateful for the hon. Gentleman giving us a further two months, given the fact that we have not had Questions since September.

- Although I take the point that the Chief Minister made, that the business as usual for Government should take place and PRs need to be issued, clearly the Chief Minister has used a mechanism within this Chamber to prevent us from asking further questions as from September by listing one of the Bills for First Reading, and therefore we have not been in a position to ask those further questions. I am grateful. I understand the difficulties that the Chief Minister has been in, in relation to the negotiations on Brexit, and that takes priority obviously, but we have been unable to continue asking questions during this period of time because of a mechanism that has been deployed to prevent us from doing so. But I am grateful that the Minister has seen some way to giving us further information related to the question.
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Mr Speaker: Next question.

Chief Minister (Hon. F R Picardo): Well, Mr Speaker, the only mechanism that I think is relevant here is the Constitution, which provides that there shall be three meetings for questions in any calendar year, and two meetings for questions in any year where there might be an election. Given that hon. Members thought that there was going to be an election during the course of this year and have said so on a number of occasions and are on record as having estimated that that was going to be the case, they might have been surprised to see that we are not taking advantage of that part of the Constitution.

- 1690 The part of the Constitution that is relevant is that there should be three meetings for questions. I think this is the sixth meeting for questions that we have had this year, double the number set out in the Constitution, and indeed I believe double, if not almost double, the number of meetings that hon. Members held for questions when they were in government in all the time that they were in Government. So I am satisfied that we have not used any device, as
- 1695 the hon. Gentleman suggests, to avoid them being able to carry out their constitutional functions or the right that they have to ask questions; but, as he rightly says, we have had to be engaged in respect of other matters, so if he accepts that, I would have thought he cannot then move himself into a position where he is purporting to make a complaint that we have not been able to proceed with questions. We are now dealing with the questions.
- 1700 It is true that in some instances the questions have been overtaken by events. We fully understand that. It is not our practice not to respect the covenant or the undertaking that we have all to this House not to pre-empt the answers to questions, but in this particular instance it has been impossible. Hon. Members would not have wanted us, I am sure, not to announce the new schools when we were about to get the process of construction, etc. going, simply because we had a question pending from them, because I do not think that is either politically something
 - that they would be able to defend or indeed something that, in their heart of hearts as Gibraltarians, they would have wished to see.

So, in those circumstances, could I suggest, Mr Speaker, that we use the time available to ask and answer questions?

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Mr Speaker: Next question.

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Hon. E J Reyes: Mr Speaker, may I try to ask the Minister – he may just happen to have the information. In respect of his answer to Question 496, where he referred to the suspension or exclusion of 37 students covering 48 separate instances, does he happen to know if all these are within the secondary schools sector or some are in the primary sector? I know we may be conscious of trying not to identify the pupils in particular, but at least by sector.

1720 **Hon. Dr J E Cortes:** Yes Mr Speaker, I am going from memory rather than from any figures that I have; I do not have the breakdown and will be happy to share it privately with the hon. Member. The majority are in the secondary sector, but I believe there are some that are in the primary sector and, I would have thought, the middle school sector. I would be happy to share that with him if he reminds me later.

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Hon. E J Reyes: Thank you, Mr Speaker, and I accept the Minister will share it with me privately as and when he can.

1730

Q497/2018 PGCE programmes – Number of students in United Kingdom

Acting Clerk: Question 497. The Hon. E J Phillips.

Hon. E J Phillips: Mr Speaker, can the Government state how many students are currently pursuing PGCE programmes in the United Kingdom?

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

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, we currently have 27 students pursuing PGCE programmes in the United Kingdom.

Hon. E J Phillips: Mr Speaker, one of the reasons why I have brought this question is that from the numbers of student teachers that have approached us it would appear that we would tend to have an oversupply of our students going to study for these further professional examinations. What plans does the Government have to attempt to ensure that the people that we have sent out and the people who are studying these particular courses have a job when they return home?

Hon. Dr J E Cortes: Mr Speaker, we -

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Mr Speaker: May I suggest that the Hon. Minister may answer this particular supplementary after the next question, because the matter is related?

Hon. Dr J E Cortes: If that is all right with -

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Mr Speaker: Next question.

Q498/2018 Teaching supply list – Number of teachers on list

Acting Clerk: Question 498. The Hon. E J Phillips.

Hon. E J Phillips: Mr Speaker, can the Government state how many teachers are on the supply list?

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

1765 Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, there are 118 teachers on the supply list and I am happy to go straight into that supplementary.

I suppose you could say the same of any profession. We have students out there – dare I mention lawyers – who then come back and they cannot be guaranteed a job, but the Government policy for decades has been that we support young people following the career of their choice, whether or not we can then offer them a job. Actually, of the 118 teachers on the supply list, many of them are called in very regularly, particularly... obviously when there are vacancies that, as you can see, we are making efforts to fill on a regular basis ... Also maternity leave. Many teachers are young women, who obviously have children at this time in their career.

- So, a lot of them are used on a fairly regular basis, but it is something that goes with any profession if you are going to support students who want to further their career in their chosen path and not have any limitations, and it has not been the policy of this Government now, or previous Governments, to curtail that.
- Hon. E J Phillips: Whilst I agree entirely with what the Chief Minister says in relation to allowing choice for every one of our students to take a subject that is in their interest and in the interest of our community as young ambassadors going out to university and studying specific courses, would the Minister agree though that we should sort of, undertake advanced career management and planning and also manage our students' expectations of a job properly?
 Because if we do have an oversupply, or many of our students are going out to do a particular course say in teaching and we have an oversupply and very few jobs to fill in respect of teaching don't you think we should be managing those expectations more appropriately and preparing them for future careers and advanced career management?
- 1790 **Chief Minister (Hon. F R Picardo):** Yes, Mr Speaker, that is already done, but I think in particular we should also make clear to the hon. Members opposite that although there is going to be an election next year I do not anticipate there being any vacancies for Government.

Hon. Dr J E Cortes: Mr Speaker, if I may just confirm, at the time of a student going to the
 Department of Education to discuss their scholarship and so on, they are given this advice.
 Certainly some students will come to me and I always tell them that they cannot have an expectation, but I always encourage them to follow the career of their choice because things do usually tend to work out. This kind of advice is already provided and we are hoping to enhance that even further in the future.

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Mr Speaker: Yes. The Hon. Daniel Feetham.

Hon. D A Feetham: Mr Speaker, in relation to the 118 teachers on the supply list, does the Minister have the statistics as to how many of those have been working as supply teachers for more than 12 months?

Hon. Dr J E Cortes: No, Mr Speaker, I do not have that information. It is not a part of the Question.

In many cases, or in some cases at least, somebody may be covering one person's maternity leave and then another one goes and it moves over, but I do not have that kind of information here; I would have to request it.

Hon. D A Feetham: Does the Hon. Minister have this information: how many of those 118 are actually covering a vacancy, for example? The Hon. Minister mentioned vacancies in his previous answer?

Hon. Dr J E Cortes: Mr Speaker, it cannot be more than the number that I gave in answer to Question 484, which listed the vacancies. So it is not more than 15 or 20 and the vacancies are regularly being filled. In fact, there are some posts that have been announced this week, some that are due to be announced shortly, and more vacancies have actually been advertised this week – which, if I may, Mr Speaker, is one of the reasons why this press release had to go at the time. The vacancies were being held back because this equalisation meant that the pay was changing and, therefore, the pool of interested teachers would have been interested in knowing what the new pay grade was going to be, and therefore, in order not to delay this further we had to make an announcement so the advert could go out.

The vacancies are being filled regularly, I am happy to say, and so it will not be more than that number. I think that other absences like long-term sickness or maternity are two of the major reasons that one would find for the use of supplies.

- 1830 Hon. Ms M D Hassan Nahon: Mr Speaker, could I ask the Hon. Minister how it is that six or seven years ago when the Government came into administration they proudly wiped off the supply list with the 40-odd or 50-odd and now we see ourselves with triple that amount? How does this discrepancy pan out?
- **Hon. Dr J E Cortes:** Mr Speaker, it is very different. The others were permanent supplies taking up posts, or posts that had cropped up and were being filled without any regularisation. This is different. This is covering for absences, so it is a very different situation.

Mr Speaker: Next question.

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Q501/2018 The Mount – Listing under Heritage and Antiquities Act

1840 Acting Clerk: Question 501. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise if it intends to list the Mount buildings under the Heritage and Antiquities Act; and if not, why not?

1845 **Acting Clerk:** Answer, the Hon. the Minister for the Environment, Energy, Climate Change and Education.

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, the Mount is one of the sites that will be assessed by the new Heritage and Antiquities Advisory Council, which will then make recommendations to me as to whether they consider that it should be added to the schedule.

Hon. R M Clinton: Mr Speaker, the Minister will recall having attended the Heritage Trust AGM recently and he did intimate he would be making an announcement shortly in relation to the Mount. Can he give this House some indication as to what would have been the nature of that announcement? Is that in terms of the sale of the Mount or the use of the Mount; or is it in fact, as he just mentioned, some deliberation as to whether it should be listed?

Hon. Dr J E Cortes: Mr Speaker, it is in relation to a number of issues but we are not yet ready to make that Statement.

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Hon. R M Clinton: Mr Speaker, can the Minister give any kind of assurance to the House today that there is no intention to demolish any of the buildings on the Mount?

Hon. Dr J E Cortes: Yes, sir. I have to qualify that, because there may be some buildings in the
 Mount which are old, ramshackle and not part of the historical building. There is, for example, an old electricity substation which may at one stage be demolished. My confirmation does not extend to that sort of thing.

Hon. R M Clinton: Mr Speaker, I am grateful to the Minister for his answer and I appreciate
 he may not have the answer to this question, but has the Mount, to his knowledge, been sold or
 is it in the process of being sold?

Hon. Dr J E Cortes: No, sir. (Interjections)

1875 **Chief Minister (Hon. F R Picardo):** I am quite happy to speak on behalf of the whole Government – I think once again, Mr Speaker, because I think we have been asked this before – to say that the Mount has not been sold. But I recommend to the hon. Gentlemen that he put the question every six months – or every month, if he likes, and we can give him the answer every month.

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Mr Speaker: Next question.

Hon. R M Clinton: No, Mr Speaker, if I may -

1885 **Mr Speaker:** I do not want any unnecessary controversy. We move on.

Q502/2018 Governor's Parade – Refurbishment

Acting Clerk: Question 502. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, when does the Government envisage refurbishing Governor's Parade?

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

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): 1895 Mr Speaker, plans are being considered.

Hon. L F Llamas: Mr Speaker, whilst plans are being considered, would the Hon. Minister take note and perhaps implement some sort of maintenance programme, because it is looking rather poor at the moment and shoddy? Whilst plans are considered – and years and months may pass – the place is looking rather grim, so could the Minister assure us whether they would implement some sort of maintenance programme in the area?

Hon. Dr J E Cortes: Yes, Mr Speaker. I am reminded that it is looking a lot better than when it had a big hole next to it. At least you can look across at the beautiful trees in the park. The reason why we are seriously considering plans to improve the area is precisely because we realise that the area needs improving, and it will be improved when we are ready to do so.

Mr Speaker: Next question.

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Q503/2018 New Harbours industrial estate – Agreement re solar panels

Acting Clerk: Question 503. The Hon. L F Llamas.

Hon. L F Llamas: Mr Speaker, can the Government provide a copy of the agreement entered into for the installation of solar panels on the roof of New Harbours industrial estate?

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

1920 **Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes):** Mr Speaker, there is a power purchase agreement in place with regard to the installation of solar panels on the roof of New Harbours industrial estate. This is the standard template which is being used in all renewable projects. It is commercially sensitive, Mr Speaker, and therefore a copy cannot be provided.

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Hon. L F Llamas: Mr Speaker, given that the Government allowed this commercial project to happen without a proper tender process or a fair and transparent process whereby other providers could have provided the Government with equal or at least a competitive bid, why has this now become a, sort of, commercially sensitive agreement whereby the Opposition and the community are not able to scrutinise the details that the Government has entered into – and now the Government, in September, have actually gone out for tender for different projects, which are similar and perhaps even actually smaller than this one?

Hon. Dr J E Cortes: Mr Speaker, this particular project dates back quite a number of years. It
 was at a time when this Government, for the first time in decades, there was a Government here seriously looking at renewable energy – or looking at renewable energy at all – and a number of different parties came forward making proposals. They were all spoken to and they were all entertained and this is the only one that was able to deliver. Therefore, it was not that there was any preference given to that; this was the only one that was able to deliver. Precisely in order to encourage others and more at this time when people were seeing that this was actually happening and there was more interest being generated, we have gone out and we are now considering a number of different companies to be able to carry on our solar projects for the future.

1945 **Mr Speaker:** Next question.

Q504/2018 Third-party puppy and kitten sales – Intention to ban

Acting Clerk: Question 504. The Hon. D A Feetham.

Hon. D A Feetham: Mr Speaker, does the Government intend to consider the banning of third-party puppy and kitten sales in Gibraltar, as is proposed in the UK following the Lucy's Law
 campaign?

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

1955 Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, yes, sir.

Hon. D A Feetham: Mr Speaker, will the Government, as part of legislating in this area, also consider imposing an extra territorial ban on the importation of puppies and kittens from effectively puppy farms in Spain? Because of course, here in Gibraltar we do not have any puppy farms; we had one pet shop, but really the problem is going to be importation from Spain.

Hon. Dr J E Cortes: Yes, Mr Speaker, this is why I say we are considering it. We are looking at how we can apply the principles of Lucy's Law in Gibraltar, where we do not have these commercial institutions. So this is being drafted into the Pet Animals Act and the hon. Member will be able to see that draft very soon, and I would be very happy to share it with him in advance of publication given his interest in the matter.

Hon. D A Feetham: Mr Speaker, I am very grateful to the hon. Gentleman; and indeed if the
 hon. Gentleman thinks that it might be useful to him, if he can send me the legislation on ivory
 and also the importation of trophies from animals, I will give him my views in advance.
 Thank you very much.

Q505-6 and Q515-16/2018 Dogs – Numbers registered; DNA testing re fouling

Acting Clerk: Question 505. The Hon. D A Feetham.

- **Hon. D A Feetham:** Mr Speaker, can this Government please state how many dogs were registered in Gibraltar under the Animals and Birds Rules 2004 as at the end of 2008, 2012 and 2017; or, if those statistics are not available, please provide any reliable statistics to show the increases or decreases in the number of dogs lawfully in Gibraltar over the last 10 years?
- 1980 **Acting Clerk:** Answer, the Hon. the Minister for the Environment, Energy, Climate Change and Education.

Minister for the Environment, Energy, Climate Change and Education (Hon. Dr J E Cortes): Mr Speaker, I will answer this question together with Questions 506, 515 and 516.

1985 Acting Clerk: Question 506. The Hon. D A Feetham.

Hon. D A Feetham: Mr Speaker, in relation to any convictions and/or fines for dog fouling, how many have resulted from the Government's DNA testing initiative?

Acting Clerk: Question 515. The Hon. D A Feetham on behalf of the Hon. T N Hammond.

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Hon. D A Feetham: Mr Speaker, how many DNA samples of dog faeces have been tested since 1st January 2018 and how many fines have resulted from that testing?

Acting Clerk: Question 516. The Hon. D A Feetham.

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Hon. D A Feetham: Mr Speaker, how many checks for unregistered dogs have been made since 1st January 2018 and how many fines have been issued?

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

Hon. Dr J E Cortes: Mr Speaker, the schedule I now hand over lists the number of registered dogs under the Animals and Birds Rules.

Answer to Q505/2018

Number of registered dogs:

YEAR	Number of Dogs
2008	1569 Dogs
2012	1665 Dogs
2017	3012 Dogs

Hon. Dr J E Cortes: In relation to Question 506, all of these have resulted from the Government's DNA testing initiative.

At the time of drafting the question – this is probably a couple of months old; this is one of the ones I do not think has been updated to the current date – 146 samples have been taken and have been sent for analysis. As a result of the DNA testing, eight fixed penalty notices have been issued, five have been paid and three are pending court proceedings.

2010 Since 1st January 2018, 220 dog owners have been checked. Four fines have been placed by the Environmental Protection and Research Unit for non-registration of dogs.

Mr Speaker: Supplementary, the Hon. Daniel Feetham.

2015 Hon. D A Feetham: In answer to a question that I lodged and my learned Friend the Leader of the Opposition, Mr Phillips, asked earlier on – how many convictions or fines had there been for dog fouling in each of the last 10 years – for 2016-17 there were two, and for 2017-18 there were nil. That is the answer that was provided by Minister Costa.

- As I understand it now, the answer to the question that has been posed to the Hon. Minister is that 146 samples had been sent for analysis and eight fixed penalty notices had been issued. I do not understand what the discrepancy – it may not be a discrepancy – between the two answers is. Can he just explain that for our purposes, please?
- Hon. Dr J E Cortes: Yes, Mr Speaker, fixed penalty notices are issued there on the spot or sent
 by post and would not have gone through the courts and therefore they would not appear in my
 hon. Friend's statistics. They would not have been the subject of court proceedings because they
 would have been settled, except for three which were pending at the time and, not knowing

exactly whether we are talking about the same timeframe, these three may or may not have been captured in my hon. Friend's reply. But the fixed penalty notices are different if they have been paid; if they have not been paid, then that would trigger off the court proceedings.

Minister for Tourism, Employment, Commercial Aviation and the Port (Hon. G H Licudi): Mr Speaker, can I just add that fixed penalty notices are not convictions and therefore one thing is an answer in relation to convictions, another thing is an answer in relation to fixed penalty notices. They are, as the Hon. Minister has said, different things. Fixed penalty notices are not convictions. It is not just a different procedure and therefore differently recorded; fixed penalty notices are not convictions.

Hon. D A Feetham: Yes, it is not controversial, but the question that I asked of Minister Costa
 was how many convictions *or fines* had been issued. A fine – (*Interjection*) Of course, a fine can be issued pursuant to a fixed penalty notice. You choose to pay the fine and therefore the process does not go any further.

Hon. N F Costa: A fixed penalty notice is different to a fine.

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Hon. D A Feetham: My understanding is a fixed penalty notice gives rise to a fine.

Hon. N F Costa: No. It is an administrative penalty.

2050 **Hon. G H Licudi:** Mr Speaker, a fine generally arises from a conviction. A fixed penalty notice is not a conviction and therefore not a fine; it is just a fixed penalty notice, as defined by law.

Hon. D A Feetham: We are, with respect -

2055 **Mr Speaker:** May I suggest that the legal practitioners should suspend these discussions for another time outside this Chamber.

Chief Minister (Hon. F R Picardo): Hear, hear.

2060 Hon. N F Costa: And the best in Chairman in history, Mr Speaker.

Hon. D A Feetham: Indeed, Mr Speaker, because we are really splitting hairs in relation to this.

Of the eight fixed penalty notices, those eight have been this year – or were they in 2017? Does he have a split in relation to those eight, at all?

Hon. Dr J E Cortes: Mr Speaker, Question 515 actually defines the answer to that supplementary because it asks 'since 1st January 2018'. So therefore yes, this year.

2070 Mr Speaker: Any other supplementary? Okay, we then go to –

Hon. D A Feetham: No, Mr Speaker, please. (Mr Speaker: Yes.) I have been asking questions on my own behalf and on behalf of Mr Hammond. (Mr Speaker: I know.) My questions are phrased slightly differently from Mr Hammond's.

2075 In terms of the number of dogs, in 2008 there were 1,569 dogs legally registered in Gibraltar; While in 2017 there were 3,012 dogs registered in Gibraltar, so that is almost double the number of dogs. Does he have any kind of explanation for what is a very significant increase in the number of dogs in Gibraltar? Hon. Dr J E Cortes: Yes, Mr Speaker, I do not think this is reflecting an increase in the number of dogs; I think it is reflecting an increase in the number of dogs that actually are getting registered. When we introduced new legislation requiring them to be microchipped and DNA tested, there was a big response from dog owners wanting to comply with the law. Obviously we also increased the fine for non-registration to £1,000 and clearly this has had the desired effect
 and therefore we have seen an increase in dogs being registered, rather than in the number of dogs in Gibraltar. That is what my team advise me and I actually believe that is correct.

Hon. D A Feetham: Well, I have to say, as a dog owner myself, as an owner of four dogs, obviously I am ... But I am not the worst culprit on this side of the House, I can tell you – there are people who own more than four dogs.

One of the comments that is often made to me about the state of our streets, for example, and dog fouling, is 'Well, because there are far more dogs today than there were 10 years ago.' That is the reason why I asked this, because I wanted to see whether that was correct or it was not correct. So what the Hon. Minister is saying is effectively if there is an increase in dog fouling and our streets are worse because of fouling by dogs, this has nothing to do really with the number of dogs; this has got to do with habits by the owners of dogs, and indeed potentially also it has to follow with the way that our streets are cleaned by whoever it is that is tasked with cleaning our streets.

- Hon. Dr J E Cortes: Mr Speaker, the dog fouling in the streets is the responsibility of the dog owners and therefore, if they do not clean up, this would ... If there were an increase it would be a reflection of the number of irresponsible dog owners or the number of times an irresponsible dog owner takes their dog for a walk. You cannot have any convincing statistics on this, but I do not agree that dog fouling is worse. Any dog fouling is more dog fouling than any of us would want to see, but I am told by those who enforce the law that it has got more difficult to find dog
- fouling in certain areas which have been targeted. We have still got a lot of work to do, but I think that slowly we are beginning to win the battle.

Hon. D A Feetham: Well, thank you very much and that is a very helpful answer, as
 somebody who owns dogs and who does not want dogs to be used as a scapegoat for the state of our streets. So, that is very welcome, certainly to my ears.

Mr Speaker, when I asked the supplementary about the eight fixed penalty notices and I was told to refer back to Mr Hammond's question – Mr Hammond's question was 1st January 2018, as from that date – my own question related to any convictions and/or fines for dog fouling and how many have resulted from the Government's DNA testing initiative. That was my question. It was not time limited at all. Does he have any statistics pre 1st January 2018 in terms of fixed penalty notices? Let's put it that way to avoid any further controversy. Does he have any statistics of that pre 1st January 2018?

2120 Hon. Dr J E Cortes: Not here, Mr Speaker.

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Mr Speaker: The House will now recess until four this afternoon.

The House recessed at 12.50 p.m.