



PROCEEDINGS OF THE GIBRALTAR PARLIAMENT

AFTERNOON SESSION: 3.06 p.m. – 6.30 p.m.

Gibraltar, Friday, 19th March 2021

Contents

Questions for Oral Answer	3
Health Authority, Justice, Multiculturalism, Equality and Community Affairs.....	3
Q719 and Q766/2020 Discharged patients – Aftercare for mental health patients; arrangements for the homeless	3
Q720/2020 Illegal entry into Gibraltar – Number of arrests by year	6
Q721/2020 Deportations – Number by year and nationality.....	7
Q722/2020 Global Health Insurance Card – Entitlement of Gibraltarians and British residents of Gibraltar	8
Q723/2020 Discretionary assistance for users of social services – Authorisation of social workers and other Government officers	10
Q724-25/2020 Patient consultations – Remote platforms	11
Q733/2020 Surgical operations – Number undertaken between 1st March 2019 and 31st August 2020	17
Q734/2020 Cancer cases – Number diagnosed between 1st March 2019 and 31st August 2020	17
Q735-739/2020 Nursing staff in GHA – Nursing assistant short-term contracts and renewals; nurses, nursing assistants, sisters and charge nurses by nationality;	18
Q740-41/2020 Dr Giraldi Home – COVID positive cases since March 2020; precautions against spread of COVID	20
Q742/2020 Statistics re COVID recoveries – Inclusion of non-residents	21
Q476/2020 Cybercrime – Number of reports and breakdown of people charged and prosecuted	22

Q747/2020 Emergency calls – Filtering of non-fire and rescue calls through Gibraltar Fire and Rescue Service.....	23
Q748/2020 Patient and constituent grievances – GHA system/policy re timeframe for answering.....	24
Q750-53/2020 GHA Human Resources and Finance departments – Relocation to Europort25	
Q754-55/2020 GHA Clinical Governance team – Annual salaries and qualifications.....	27
Q756-57/2020 Nightingale facility – Security and cleaning companies during COVID crisis.	29
Q758/2020 Agency nurses – Cost and duration in COVID-19 period	29
Q759/2020 Mental Health Service – Actions to improve nurse-patient ratio.....	30
Q760/2020 Mental health patients – Vehicle for outings	30
Q765/2020 Assisted living – Accommodation for the elderly and those with dementia	31
Q767-771/2020 Dementia sufferers – Total number with early onset dementia, number on ERS waiting list, support facilities; number of dementia patients at Ocean Views; number of Ocean Views residents waiting for ERS beds	33
Q772/2020 Mental health prescribing, admissions and treatment – Statistics for pandemic period	35
Q773-74/2020 Children’s home – Number of residents and ages; number of counsellors .	37
Economic Development, Telecommunications and the GSB.....	38
Q775/2020 NVQ Level 2 and 3 in Mechanical Engineering – Number of trainees and method of assessment.....	38
Q776-797/2020 Public finances – Cost and financing of proposed hostel on MoT site; Sinking Fund balances; public, gross and aggregate debt, and cash reserves and net debt; effect of COVID on annual GDP and forecast; cost and financing of Post-Brexit National Economic Plan; GSBA Ltd shareholdings; GoG or GDC-owned companies under investigation re financial irregularities; Barclays Bank loan facility; GIB facility drawdown; Gibraltar National Mint Ltd audit, turnover and profit and loss, economic purpose and reason for joint venture with Gib 3000 (International) Ltd	39
Q798-99/2020 Government-owned companies – Early exit schemes	50
Q800-01/2020 Intended funding re supported employment for persons with learning disabilities – Median income in Gibraltar 2015-20	51
Q802/2020 Bishop Caruana Road residential home for the elderly – Outdoor facilities	52
Digital and Financial Services and Public Utilities	53
Q803/2020 Cyber security – National strategy.....	53
<i>The House adjourned at 6.30 p.m.</i>	54

The Gibraltar Parliament

The Parliament met at 3.06 p.m.

[MR SPEAKER: Hon. M L Farrell BEM GMD RD JP *in the Chair*]

[CLERK TO THE PARLIAMENT: P E Martinez Esq *in attendance*]

Questions for Oral Answer

**HEALTH AUTHORITY, JUSTICE, MULTICULTURALISM,
EQUALITY AND COMMUNITY AFFAIRS**

Q719 and Q766/2020

Discharged patients –

Aftercare for mental health patients; arrangements for the homeless

Clerk: Meeting of Parliament. Friday, 19th March 2021.

Order of Proceedings: we continue with Answers to Oral Questions. We commence with Question 719 and the questioner is the Hon. D A Feetham.

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Hon. D A Feetham: Mr Speaker, what duty of aftercare is there in relation to detained mental health patients once discharged?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, I will answer this question together with Question 766.

Clerk: Question 766. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: What are the existing arrangements for discharging persons from hospital or Ocean Views in cases where they do not have a home to be discharged to but their health condition requires a functional, clean, safe, accessible, reliable and secure home?

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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, upon discharge, the GHA retains a duty of care for all patients, including mental health patients. This may include a review appointment, medication reviews and referrals to appropriate specialities to support their recovery.

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When patients are preparing for discharge, the GHA's Mental Health Services will hold discharge planning meetings, which include discussions with the patient and family, if appropriate,

30 about the aftercare they will require. Discharge summaries are completed upon discharge and
sent to GPs and the Community Mental Health team. Once drawn up, the completed forms are
placed in the patient's clinical notes at the Community Mental Health Service. Aftercare for
patients may include follow-up by a psychiatrist to monitor the effectiveness of treatment
prescribed, and a key worker in the community may be allocated, if deemed appropriate, to
35 monitor mental health and progress. The key worker may be required to undertake home visits
and keep in regular contact with the patient.

Discharge planning begins at hospital from the moment of admission. Through a multi-agency,
multi-disciplinary approach, each patient's circumstances are looked at on an individual basis.
Social housing and health status are also considered when planning discharge, and through close
40 working relationships with the Housing Department, Care Agency and Elderly Residential Services,
the most appropriate and safest discharge is sought for each individual's needs so that, once
discharged, all steps are taken to reintegrate the person back into the community.

Hon. D A Feetham: Mr Speaker, in the United Kingdom, under section 117 of the Mental Health
45 Act, there is a statutory duty placed on the Secretary of State in England, together with local
authorities, in relation to the duty of care to patients once discharged, and that may include the
issue of housing and other issues that have been outlined by the Minister in answer to the
question. Where are these criteria? Where are these guidelines in relation to the duty of care
owed to patients once discharged? It occurs to me that of course the Minister can provide an
50 answer in this Parliament to do with what is done in relation to patients, but it would be extremely
useful for that, for example, to be set out in the Code of Conduct, and I ask the Minister whether
that is one of the plans for the Code of Conduct.

Hon. Miss S J Sacramento: Mr Speaker, it is not only one of the facets in the Code of Conduct,
55 which is a very substantial document, but it also forms part of the recent review that we have
undertaken since 1st January this year when we have looked at all the services and, more
importantly, enhanced the multi-agency working of the services when it comes to supporting
patients with mental health needs and particularly the discharge pathways. So, that is something
that, operationally, has recently been enhanced. We are still working on improving the model in
60 the future, but in terms of the structure it is very much one of the things that will be contained in
the new document when it is published.

Hon. D A Feetham: Just finally, Mr Speaker, housing is obviously absolutely critical in relation
to this, because if you discharge a mental patient and he or she has nowhere to go, then obviously
65 that is just going to lead to a spiral and you are going to find that that person just simply comes
back into Ocean Views. What conversations have happened in relation to your Ministry and also
the Ministry for Housing, and what decisions have been made about ensuring that anybody who
is discharged has a house to go to, in order to prevent that from happening?

Hon. Miss S J Sacramento: Mr Speaker, in this particular instance, it is actually quite helpful
and the hon. Member may recall that I was the previous Minister for Housing, so these are
70 protocols that I know are in place because these are things that I did when I was the Minister for
Housing, but we continue to work on them in terms of the discharge – because obviously I am
now looking at it from another point of view – to see how we can improve the systems that have
already been in place.

One of the fundamental improvements, and as a result of conversations that I had, when I was
Minister for Housing, with the Minister for Health at the time was the crucial support, when it
comes to housing, of the halfway house. Yesterday, we had a lengthy discussion and there were
several questions in relation to the halfway house, but the hon. Gentleman's question right now
80 demonstrates how important the element of provision of housing is, as well as the element of
provision of sheltered accommodation, so both are being catered for. We now know that they are

85 catered for, but we all know how crucial housing is in these circumstances and we very much have very fluid conversations between Ocean Views and all the relevant practitioners there and the Housing Department. At this stage, there is no real need for there to be a conversation at ministerial level because the policy decisions have already been taken. I have, of course, had these discussions with my colleague Minister Linares, but it is not something that we get involved in at an operational level because operationally it is dealt with by the Departments.

90 **Mr Speaker:** The Hon. Marlene Hassan Nahon.

95 **Hon. Ms M D Hassan Nahon:** Mr Speaker, I thank the Minister for her answer, but as she knows – because I do talk to her whenever I get the chance about situations that I have – I am afraid that a lot is left wanting in terms of what she cites happens afterwards, like regular contact, the social housing and the follow-up that she talks about. It would seem that, from my point of view – where I can already think, off the top of my head, of half a dozen constituents who have ended up in this situation – the system seems to be failing. From what I can see, there seems to be a lack of multi-agency co-ordination.

100 Would the Minister accept that the multi-agency co-ordination needs to be improved? Can she suggest some better working structure for perhaps MPs to deal with her Ministry when these constituents are left down and out? Otherwise, we end up, like my hon. Friends here to my right said, in some kind of spiral where they actually continue to have to go back into the system and out of the system. I personally see this all too often, so I would like to find some working solution to better their situation.

105 **Hon. Miss S J Sacramento:** Mr Speaker, it is true that the hon. Lady and I frequently discuss cases, and I am grateful that when the hon. Lady has an issue brought to her attention she immediately contacts me so that we can look to see what the issue is and help the person directly there and then. In that respect, of course I would get involved, because the hon. Lady, in her capacity as an MP, speaks to me in my capacity as an MP, and that is the protocol of this House, that Members of Parliament speak to each other. I will then, of course, pass it on to the relevant officials should action be necessary.

115 While of course there are systems in place, systems are not perfect and systems sometimes fail, and that is the reason why I specifically commissioned a public health adviser, who has been working with me in the Ministry and undertaking this project for the last three months. She commenced at the beginning of January and she left Gibraltar last week. She has been working on this. We began in October and again in November, but she has been working solidly in Gibraltar for three months and this is one of the things that has arisen as a result of the review, so that established multi-agency working practices are better enhanced. In fact, I chaired a meeting of all the heads of the multi-agency stakeholder organisations recently, to look at a national working practice to better support people from mental health, so that new structure is now very firmly embedded and, whereas I accept that there will have been problems in the past, I am very confident that, as a result of this review, things are going to get much better in the future. Multi-agency working I think now has been developed much more successfully, and I do not think that we will see, going forward, problems and pitfalls that we have experienced in the past.

125 **Hon. Ms M D Hassan Nahon:** Mr Speaker, thank you. I thank the Minister for her answer once again. I just wanted to ask: is the Minister aware that, more often than not, when these ex-patients from Ocean Views come out and end up with relatives for somewhere to stay and it gets very difficult from a mental health and social perspective, the main solution at that point is often to call the Police, have the Police intervene, and, vicariously through the Police, the social work kicks in? Does she think that this is a working solution, which is what is happening most of the time right now?

Hon. Miss S J Sacramento: Mr Speaker, I am not aware that that is a frequent working practice. I am aware that it may occur on occasions, where the Police may have to be called. Of course the Police also have a role to play within the wider framework, but that does not mean that the role of the Mental Health Support Services, whether at the GHA or Social Services, is displaced. There are different circumstances and steps will be taken, depending on the circumstances, when appropriate.

We all have to be mindful that mental health is a very complex issue. Of course, everybody wants to support and help patients with mental health problems, but it is not always an easy solution. Clinical treatment for patients with mental health ... is not the same as clinical treatment when someone has an accident and may break their leg, where they have surgery and the problem will, more likely than not, be fixed. Mental health issues are very complex and they are ongoing, so at the point of discharge a person may be well and they will be discharged with multi-disciplinary input and packages of support, but it is also possible that patients who suffer from mental health may also relapse. At that point, it may become an issue where the patient may become violent, in which case it is appropriate that the Police be called, and the Police will then follow their mental health protocols. There has been training by the Royal Gibraltar Police on this aspect, and then there are other resources that the Royal Gibraltar Police can trigger to then provide further support in relation to individuals.

Mr Speaker: Next question.

Q720/2020
Illegal entry into Gibraltar –
Number of arrests by year

Clerk: Question 720. The Hon. K Azopardi.

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Hon. K Azopardi: Mr Speaker, how many persons have been arrested for entering Gibraltar illegally during the period 1st January 2010 to 31st December 2020, broken down by year?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, the number arrested for the offence of being a non-Gibraltarian found in Gibraltar without a valid permit or certificate, under the provisions of the Immigration, Asylum and Refugee Act, is as follows: policing year 1st April 2016 to 31st March 2017, 39; policing year 1st April 2017 to 31st March 2018, 14; policing year 1st April 2018 to 31st March 2019, 42; policing year 1st April 2019 to 31st March 2020, 57; policing year 1st April 2020 to 31st March 2021, 35 – data is up to 16th March of this year.

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The RGP system cannot be searched in this way before 2016, so the data I have provided relates to 2016 onwards.

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Hon. K Azopardi: I understand that the RGP systems went through an overhaul probably around 2016-17, so that may account for that, but is there no other way of obtaining statistics on persons arrested for entering Gibraltar illegally, or indeed being arrested for any crime before 2016?

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Hon. Miss S J Sacramento: Mr Speaker, I did ask that question when I received the answer, and I was told that the system could not be interrogated in that way. However, I am happy to go back

180 to the Police, if I have more time, to get the further detail and then the hon. Gentleman and I can discuss the figures thereafter.

Mr Speaker: Next question.

Q721/2020
Deportations –
Number by year and nationality

Clerk: Question 721. The Hon. K Azopardi.

185 **Hon. K Azopardi:** Mr Speaker, how many deportations of persons have there been during the period 1st January 2010 to 31st December 2020, broken down by year and by nationality of person?

190 **Clerk:** Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, the number of persons deported from Gibraltar during the period 1st January 2016 and 15th February 2021 are as follows.

195 In 2016 there were a total of 25 – 20 Moroccan, two Chinese, one Ghanaian, one Albanian and one Bangladeshi.

In 2017 there were four. All four were Moroccan.

In 2018 there were 38, of which 28 were Moroccan, one was British, two were Chinese, six were Algerian and one was Senegalese.

200 In 2019 the total was 39, of which 32 were Moroccan, two Albanian, one Uruguayan, one Algerian, one Australian, one Cuban and one Ukrainian.

In 2020 the total was 29, of which 22 were Moroccan, five Albanian, one Chinese and one Pakistani.

205 Again, Mr Speaker, the RGP system cannot be searched in this way before 2016, so the data that I have provided relates to 2016 onwards.

Hon. K Azopardi: Mr Speaker, in this respect, in terms of deportations, is it, I ask, only an RGP collation exercise? I assume that deportations have happened as a result of some kind of court order; and, if so, are there not centrally held statistics at the courts that could be accessed?

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Hon. Miss S J Sacramento: Mr Speaker, again, I asked the same question, particularly given that the question preceding this is provided to me in terms of policing year and the second question is provided to me in terms of the calendar year. I asked the exact same question, but the answer that I received was that these statistics are kept by the Royal Gibraltar Police. However, Mr Speaker, following the Parliament session, when I have more time, I will go back to this again because the supplementary questions that the hon. Gentleman has asked are the exact same questions that I also asked.

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220 **Hon. K Azopardi:** I am grateful and glad to see that we are on the same wavelength, because there does not seem to be a consistency with that, and indeed, as the hon. Lady will know from her experience at the Bar, certainly in respect of the second question there should be some kind of cross-check and not just RGP statistics.

In relation to the year 2018, she said that there were deportations of two British subjects. How is that possible?

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Hon. Miss S J Sacramento: Indeed, Mr Speaker, in 2018 there was ... The statistic I have been given is that there was one British subject. I will find out the detail and get back to the hon. Gentleman.

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Hon. K Azopardi: Finally, Mr Speaker, I appreciate she is doing work with the authorities and indeed probably the courts as a result thereafter, but perhaps there can be an exercise done so that we understand to what extent ... I am assuming, for the purposes of my number crunching of these statistics, that the deportations that are happening are happening in respect of illegal entries in that year, but of course it is difficult to ... First of all, we would like confirmation of that. Secondly, it is difficult to do that if the first set of statistics is given against not a calendar year but the second are. So, it is impossible to conduct that exercise and I think it would be helpful, not just for Members on this side of the House but indeed for the Government, to understand that if there were 39 illegal entries in a particular year, there may have been 36 deportations. Maybe a couple of them are seeking asylum if you are able to track it, but otherwise, if you do not have the statistics constructed on the same basis, then you cannot – so, perhaps the Minister would take an interest in the issue.

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Hon. Miss S J Sacramento: Yes, I will, Mr Speaker, because when I was analysing the statistics I wanted to compare them, and then, when they were presented to me in the way that they were, I had difficulty in doing so, so it is something that I need to go back and check further.

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Mr Speaker: Next question.

Q722/2020

Global Health Insurance Card – Entitlement of Gibraltarians and British residents of Gibraltar

Clerk: Question 722. The Hon. K Azopardi.

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Hon. K Azopardi: Mr Speaker, can the Government confirm whether Gibraltarians and British residents of Gibraltar will be entitled to a new Global Health Insurance Card to access emergency medical care in the EU when their current European Health Insurance Card issued by the GHA expires?

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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, there is currently no agreement with the EU on a Global Health Insurance Card.

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Hon. K Azopardi: Mr Speaker, can I ask the Minister to clarify? Does she mean there is no current agreement with Gibraltar in relation to a Global Health Insurance Card, or does she mean there is not one generally?

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Deputy Chief Minister (Hon. Dr J J Garcia): Mr Speaker, if I may assist the House, my understanding is that the Gibraltar health card, as a result of the New Year's Eve agreement, will

270 continue to be valid in Spain, and the Spanish health card that exists will also continue to be valid
in Gibraltar. That is a bridging measure, though we have negotiated with a view to a final treaty
coming at some point later on in the year. That is the card that we are using and that we can use
in Spain, I stress, and the card that Spanish citizens can use in Gibraltar on a reciprocal basis for
the moment, until a treaty comes along, where that may change.

275 **Hon. K Azopardi:** With respect, I am not sure the hon. Member has answered the question I
asked. Is it that the Government is saying to us that there is not an agreement in relation to a
Global Health Insurance Card, or that there is not one in place with Gibraltar?

280 **Hon. Deputy Chief Minister:** Mr Speaker, we can answer, obviously, for our cards and for
Gibraltar, and there is no agreement in place for Gibraltar at this moment in time. There may be
one, but there is not one at this moment.

Hon. K Azopardi: The hon. Lady perhaps will be familiar that the NHS is putting out information,
and I will just read an extract, where it says:

UK-issued European Health Insurance Cards (EHICs) are still valid and offer the same cover as GHICs in the EU.
Once your EHIC has expired, you'll be able to replace it with a GHIC.

285 That is the NHS information. That is why I was asking whether we had a similar system in place,
and so can I just ask that ...? One of the things the Chief Minister has said in his previous
interventions in this House is that while at the moment we have, as the Deputy Chief Minister
says, bridging measures under the framework agreement ... That is all they are; they are informal
bridging measures that are not legally binding, but we are grateful for them. The Chief Minister
has said often, I think, that insofar as the UK-EU agreement, most of that is irrelevant, but there
290 may be some personal benefits in that agreement that may transmit to Gibraltar.

If there are benefits in the current UK-EU agreement that are in respect of health rights across
the EU, can I ask the Government perhaps to engage into whether rather than take the position
that we do not have these rights at the moment, perhaps investigate the possibility that we may
already be able to claim those personal rights in relation to healthcare stemming from the EU-UK
295 agreement on the basis that whatever agreement we are going to do in respect of Gibraltar is a
sort of territorial agreement, but insofar as there are specific rights pertaining to individuals who
were British EU citizens before, we should be in no different place to someone who is from
Bradford?

300 **Hon. Deputy Chief Minister:** Mr Speaker, as the hon. Member has said, Gibraltar is excluded
from the UK-EU agreement that currently exists. As I have understood the question, there are
some benefits that British citizens everywhere may be able to tap into regardless of the exclusion.

In terms of the card, this is something that is under discussion, which I have been discussing
with my hon. Friend and her Department, and also with the United Kingdom, so it may well be
305 that it is something that happens, but we cannot confirm that one way or the other at this stage.

Mr Speaker: Next question.

310 **Hon. K Azopardi:** Sorry, I am just asking the hon. Member to take on board the position that,
while I accept that of course Gibraltar is not covered, there is no territorial application in the EU-
UK treaty to Gibraltar, the Chief Minister has said before that there may be rights stemming from
it, and can he keep the issue in mind when considering the issue of healthcare, which is important
to people when they are travelling throughout Europe, whether or not there is an agreement in
future?

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Hon. Deputy Chief Minister: Mr Speaker, yes, certainly, as I said, the matter is under active consideration.

Hon. D A Feetham: Mr Speaker –

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Mr Speaker: No, we need to continue.
Next question.

Q723/2020

**Discretionary assistance for users of social services –
Authorisation of social workers and other Government officers**

Clerk: Question 723. The Hon. K Azopardi.

Hon. K Azopardi: Mr Speaker, are social workers or any other Government officers authorised to provide users of services discretionary assistance or support by way of materials, food or household or general goods?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, social workers provide clients with discretionary services on the basis of an assessment of need. In cases of severe financial hardship creating an element of risk to a vulnerable adult, assistance is provided by way of materials, food or general household goods through donations or through formal process requests to the Financial Secretary for money through the Hardship Fund.

Hon. K Azopardi: Just pulling the thread from the last part, there is provision in a budget somewhere in the Government for this? The hon. Lady described it as the Hardship Fund – is that the official name? And against which kind of criteria? Does it require a recommendation by a senior officer in the Department? And is there a limit to the Hardship Fund that would be released to a particular applicant?

Hon. Miss S J Sacramento: Mr Speaker, the Care Agency budget has provision for such circumstances. However, we also live in an extremely generous community, where we find ourselves in a situation where people continuously offer the provision of food and assistance. In these circumstances, these offers are directed to Social Services, who will then, with the consent of individuals, receive goods and pass them on to people who may be on the Social Services' radar, whether they are on the vulnerable adults list or the like, or people who may need particular things may be put in touch with organisations.

So, as I said in my first answer, there are two channels. There is the informal channel, but, always having GDPR safeguards, all sorts of safeguarding protocols that are triggered; or alternatively, there is the formal channel through the Care Agency, which would be authorised by the Controlling Officer of the Care Agency, who is the Chief Executive Officer, so it is the official at the highest level.

Mr Speaker: Next question.

Q724-25/2020
Patient consultations –
Remote platforms

Clerk: Question 724. The Hon. K Azopardi.

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Hon. K Azopardi: Mr Speaker, is the GHA contemplating Zoom-type or other remote/telematics consultations for patient appointments with locally based or visiting consultants?

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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, I will answer this question together with Question 725.

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Clerk: Question 725. The Hon. K Azopardi.

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Hon. K Azopardi: What investment is the GHA making in terms of technical or human resources, equipment and infrastructure to support a move to deliver greater care, patient consultations, appointments and follow-up telematically or telephonically?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, yes. Indeed, this has already been done; in fact, this was already in place before COVID and its use has now been expanded for obvious reasons.

For patient consultations, particularly with tertiary centres, the GHA had already installed a secure medical teleconference platform.

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Hon. K Azopardi: Mr Speaker, I am grateful to hear that, although slightly surprised, I have to say, from a personal experience that I am about to recount. I filed this question some time ago, but recently, during the height of lockdown, I had a follow-up with a consultant in Gibraltar. I was offered a telephone consultation and I made enquiries as to whether I could have a Zoom call, because now we live our lives on Zoom and I thought it would just be better to see the consultant face to face. I was told that the systems were not in place to do that, and indeed that it was against the rules on data protection. I thought, 'Well, I am the patient, so I am happy to waive my rights on data protection.'

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I then proceeded to have the telephone consultation – and let me assure the hon. Lady I have been treated really well by the GHA throughout my troubles in the last few months, but I am telling the story. I am not sure that the message is getting across, to those who need to conduct the consultations, that the Zoom technology is available, and therefore can the Minister perhaps think about ways of transmitting that message first of all to the staff and then to the public?

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Hon. Miss S J Sacramento: Mr Speaker, I am sorry to hear that from the hon. Gentleman; I wish he had been in contact directly. What may have confused the staff is ... The question is whether we will introduce Zoom-like calls, therefore I am assuming that he means any app. When I am at my office at the GHA, in the building at St Bernard's Hospital, on the seventh floor in the Minister's office, I use all sorts of apps because it also depends on who is inviting you to the meeting. So, in the last year we have used Zoom, Microsoft Teams and various other ones, which is extremely confusing, especially for someone like me, Mr Speaker, because I sometimes get very easily

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confused with these things. But if the hon. Gentleman asked the GHA for a Zoom call, because the app in the GHA is called something else, then the reply could have been, 'No, sorry, we cannot do Zoom because our system is called Webex.'

410 Webex has enhanced security and is supposed to be the most secure platform for medical consultations, and that is why they have that one, because it was requested by the clinicians. I recall when Webex was launched, and it was launched by Neil Costa when he was the Minister for Health ... I asked my officers to come up with a press release of when it was, because I vividly remember that for the press conference there was a demonstration between the Minister for Health then and doctors in the UK. So, Webex has been installed in the Hospital for quite a long time.

415 Like all of the other teleconferencing platforms, you do not have to be a subscriber to Webex to be able to use it, so, in the same way that you can download Microsoft Teams or any other app for the 'Zoom' call, the hon. Gentleman should have been told that we do not use Zoom but that we use Webex because it is a more secure, clinically recommended platform, and the hon. Gentleman could have very easily downloaded it on his phone.

I apologise to the hon. Gentleman, given that it affected him personally, and I will once again go back to the GHA and ask them to better communicate.

425 **Hon. K Azopardi:** Mr Speaker, I thought I had made it clear, but it is not that it affected me personally in any significant way. I was fine with it, and indeed the care I receive is very good. I take on board what the hon. Lady has said. Perhaps it is just a question of there being better transmission of information, that is all.

430 **Mr Speaker:** I think I am not going to allow you to ask a question, because what we are saying here is that if a Member asks a question, the person who is entitled, in my view, to follow-up supplementaries is the person who posed the question originally. That is how I am operating now. Yes?

435 **Hon. K Azopardi:** Mr Speaker, on a point of order, that would be different to how we have been operating in the last three days. In the last three days you have allowed other people –

440 **Mr Speaker:** I think Members are not taking account of what I said at the time. In the first couple of days, you are quite right, I was a wee bit flexible, but there were not too many people who were not asking supplementary questions that were not supplementary questions in relation to their own questions. What I am saying here is it is not the correct thing to do to allow Members who are not asking the questions supplementaries on a question that was tabled by somebody else.

445 I think I am trying to move persons towards what happens in other parliaments. You are quite right to point it out, but this is what I am doing now and that is my decision. Thank you.

Hon. K Azopardi: Mr Speaker, can I just say, on that, it would be a variation to the practice that this House has had for the last 50 years. It would certainly be to place the Opposition in a position which would constrain its Members in a way that has not happened for decades, in a way that would not affect the Members opposite, who sometimes jump in on each other's answers to assist each other. There are things that may occur to –

455 **Mr Speaker:** Let me say something. I have allowed your good self, as Leader of the Opposition, to come in if you feel that a Member of the Opposition has missed an opportunity to ask an important question, and I have allowed you to come in to ask a question in the same way as the Chief Minister or any other person here on the Government side can come in, if a Minister is unable to answer a question or has not answered a question properly, to respond to that. That is the way I have focused this. Perhaps I did not explain at the time and give the advice, but if I am

460 constraining or restricting Members of the Opposition to a certain number of questions, then it is obvious that if another Member piggybacks on somebody else's question, I cannot allow it to happen.

It may well be something that you might wish to bring up when we have the Select Committee on Parliamentary Reform. You might want to bring this up.

465 **Hon. K Azopardi:** Mr Speaker, with all due respect, I think that to change what is decades-long practice in a way that suddenly constrains the Opposition to do its job in a Parliament where we have an inbuilt minority and the executive has an inbuilt majority is to completely put hurdles in front of the job of the Opposition. It makes it so hard for us to keep accountability on Ministers. When someone asks a question and asks supplementaries, it is obvious that there may be other
470 Members sitting around the table who have thought of other issues that are matters of public interest that do need to be raised.

With respect to the Hon. Mr Speaker, I understood at the outset of these last four days the need for us to be more disciplined to cut through the backlog of questions, which was not created by us. We have done that, but Mr Speaker assured us that after that was over we would go back
475 to the normal run of things. What Mr Speaker has just said would put us in an even worse position than we were at the outset of Mr Speaker's ruling.

Can I just say, in closing, that I would ask Mr Speaker to perhaps reflect on those issues, and clearly I would say that the weight of precedent over the last four decades is at least for continuing the practice until such time as there is a process of parliamentary reform and we all agree to
480 change working practices, but until that happens we should do things as we have always done.

Mr Speaker: The issue here is that there are many supplementaries which are asked, and what we end up here with is a cross-examination in a courtroom type of scenario and we have Members of the Opposition jumping in to get their questions in. It has happened in the past. (**Hon. A J Isola:** Always.)

485 That is the way I am focusing the issue. It is not trying to muzzle or remove from the Opposition an opportunity for asking a supplementary; it is trying to control and manage it as best as possible, because there are occasions when it is a free for all, and personally I am not having it.

Hon. K Azopardi: Mr Speaker, if I may – it may not come across as muzzling, and of course that
490 is not the intention of Mr Speaker because I know Mr Speaker is not intending that, but it certainly will have that effect.

If there is a reason why things are taking so long it is that sometimes the Members opposite do not give brief answers; they give extremely long answers. I am trying really hard to keep my questions fairly short – although sometimes they need an introduction, but fairly short – but the
495 answers on the opposite side ... I am not talking about today, because I thought today we were actually going quite well, but on other occasions the reason for delay is the length of the answers and rambling nature that does not keep to the original answer. That is the issue, and if that is then having the effect of delaying proceedings, the consequence cannot be that Members on this side of the House, who are trying to fulfil an important function in holding the Government to account,
500 are told that they cannot ask questions of the Government.

Mr Speaker: No, I am not saying that. I am saying that we are restricting the number of questions in order to be able to expedite dealing with the backlog. What I do not think is right is that whenever a question is made and the supplementaries have been dealt with by an individual
505 Member, other Members come into play and are all asking questions. It has happened, it happens regularly, and I think that is not right.

[Inaudible]: It does not happen in any other Parliament.

510 **Mr Speaker:** Precisely.

Hon. K Azopardi: Mr Speaker, it has happened for 50 years in this Parliament and no one has ever bothered to constrain the Opposition. This would be a precedent –

515 **Mr Speaker:** No, it is not. I am sorry, but it is not. It is a view taken by the Leader, but it is not. I am trying to manage business as well as possible. The Member might object, fair enough, and I understand his objection.

The issue of asking a supplementary is to elucidate. The Standing Order says here:

(5)(i) A Member may put a supplementary question or questions for the purpose of further elucidating ...

520 Fine, but we should not have cross-examination-type questions. Yes, it happens, and if you are telling me it does not happen, I do not agree.

Chief Minister (Hon. F R Picardo): Mr Speaker, if I may assist the House, I think it is important that we do bear in mind that this is not without precedent. It is totally unfair and wrong to think that this is without precedent. I was in the House when Speaker Alcantara, after I think a particularly fractious meeting and a meeting with a lot of questions, directed, as you are directing
525 now, that at least whilst he was dealing with what was a very large number of questions he was restricting the number of supplementaries, and I recall myself not being allowed to ask supplementaries of another person's question, which is actually the practice in most parliaments and was the practice in our Parliament for a period of time.

530 The Government is answering many hundreds of questions because there is a backlog. We hope to go back to the monthly rhythm of questions, where there will therefore be fewer questions, I assume, and we will be able to deal with that.

In the parliamentary reform process, Mr Speaker, the Hon. Mr Azopardi is the one who tells us that we have to change things and modernise them. It is remarkable that now he is telling us he
535 wants to rely on a practice that has gone on for 50 years.

540 What we are witnessing is really just an attempt to grab a headline based around parliamentary martyrdom. The reality is the Government *is* answering questions, the Government *is* giving as much information as it is able to do so and we will continue to do so, and the hon. Member knows that. Frankly, I think we all need to realise that this is an exceptional meeting held in exceptional times, hoping to clear a backlog and come back to normal processes.

Hon. K Azopardi: Mr Speaker, the hon. Member was not even here when the vast majority of that exchange between you and I took place, so I am afraid that he has not captured what this point was about. The point was that I had understood Mr Speaker now saying that you wanted to
545 take a more radical position than you did at the outset of your –

Mr Speaker: That is not the case.

Hon. K Azopardi: Well, if I can just make this point, Mr Speaker?
550

Mr Speaker: Yes, of course.

Hon. K Azopardi: On concluding your ruling on Tuesday – or Monday, I forget which day it was because we have been here every day – you said that we would return to the more liberal fashion. I think you said that phrase exactly.
555

Mr Speaker: When this session is over.

560 **Hon. K Azopardi:** Exactly. That is what I am asking for.

Mr Speaker: When this session is over, yes.

565 **Hon. K Azopardi:** But I am also asking for a recognition that it is not unreasonable for Members on this side of the House to sometimes pitch in with questions that they have which are a different issue of public interest on a particular matter. That is not cross-examination; it is matters of public interest that people are entitled to hear.

570 **Hon. Chief Minister:** Mr Speaker, I would say that that is not the way that we have ever behaved in this Parliament. In this Parliament, we have always been permitted only to ask supplementaries about the question that is put, not to raise a new issue –

Hon. K Azopardi: Not what I am saying.

575 **Hon. Chief Minister:** Well, if that is what you are saying, that is not what came out of your mouth.

Mr Speaker, if that is what the hon. Member is saying, that is not what came out of his mouth and he needs to realise that what he has said is something different.

580 If something does not arise from an answer, then no supplementary arises from it. I have been on the butt of findings in that respect on a number of occasions when I have been in the Opposition. You take the rough with the smooth. That is how democracy works.

Mr Speaker: In order to move forward – we are spending too much time on something which, in my view, can be sorted out – let me just refer to what I had to say on Tuesday. I said:

I am turning to Speaker Alcantara for guidance, who introduced the practice of allowing hon. Members to ask two supplementaries...

585 Initially, he said, 'This is how it is going to be.' Representations were made. He then allowed things to change, and then he brought the system back into play because there were complaints made about the number of supplementaries that were asked at the time. So, there is precedent for it, but having said that, I did say also:

allowing hon. Members to ask two supplementaries and three in respect of the Leader of the Opposition. I intend to follow this practice and will exceptionally allow the Leader of the Opposition a further supplementary for the purpose of elucidating any matter arising out of an Oral Question posed by an Opposition colleague.

590 So, I am allowing you to do that. What I am not doing is allowing other Members to come in. I noticed yesterday – (*Interjection*) No, the odd one here and there because I wanted to be as understanding as possible. That is the truth. (*Interjections*)

595 **Hon. Ms M D Hassan Nahon:** Mr Speaker, can I just say, with all due respect, that in the seven years I have been in this House... We all know that I broke away from the GSD a few months into my coming in on the first term – (*Interjection*) For you. I remember distinctly (*Interjection*) that when the GSD asked their questions I always waited and Speaker Canepa would let me ... In particular, I have visions of this happening with Elliott Phillips because we shadow similar things and I always remember waiting for him. I also remember them waiting for me when they wanted to come in.

This is all news to me, Mr Speaker. That is all I wanted to say.

600 **Mr Speaker:** I am not saying –

Hon. Chief Minister: Sorry, if I may, it is important that I make a point in relation to the hon. Lady. Of course it is news to her, because she has had the benefit of being elected for six years, not seven, in a Parliament run, as Leader of the House, by me with the Hon. Deputy Chief Minister, where we meet every month – when we are able to, except in the exceptional period in which we have found ourselves – and therefore every month there are fewer questions and every month we got into a rhythm of things and there was able to be more leeway. What Mr Speaker has told us all is, ‘Let’s get back to that, when I will be as liberal as I have been and I will continue to permit as much cross-questioning as I have, but not now because we are trying to deal with the backlog.’ That is the issue, Mr Speaker.

The other point that I will make is that the Rules are no longer fit for purpose. The Rules need to be changed and they need to be modernised. Mr Azopardi is wrong to say that simply because something has been happening for 50 years it should continue to happen. We have to give business (*Interjections*) modernity and agility to this Parliament, and that is what we must do in the Committee on Standing Orders.

Mr Speaker: I think the point here is that the Leader of the Opposition has accepted the guidance that I gave on Tuesday. You accept? Then what is the issue –? (*Interjection by Hon. K Azopardi*) Hold on. What is the issue if I extend the way we are managing the questions further, like in the case where I have said to you that you can ask a separate question, a supplementary, in respect of questions posed by others? I have said that – (*Interjection*) hold on – and I did say:

I will return to a more liberal practice when monthly meetings of the House are resumed.

Right? (*Interjection by Hon. K Azopardi*) So, this is particular for this question and answer session.

Hon. K Azopardi: Yes. You ask what the issue is. The issue is that what you said on Tuesday is more restrictive than what has been the practice before, and I accepted it. I did on Tuesday, Mr Speaker knows that. What I heard you say now is more restrictive still than Tuesday. That is the issue for me. We are in the final stretch of this set of questions, so let’s just keep the Tuesday ruling, which is more restrictive than it was, and go back to the more liberal fashion in the future. That is the issue for me. And then let’s get together and amend the Rules of the House, which are not fit for purpose.

Mr Speaker: Good. I think everybody is agreed. Thank you. (*Interjections*) No. In fact, I did say here:

I will afford the Hon. Marlene Hassan Nahon the same courtesy.

I did say that. (**Hon. Ms M D Hassan Nahon:** Yes.) So, on this occasion – hon. Member, please – it was an error on my part not to allow you to ask the question, because I did say you could because I was going to afford the same courtesy to you.

Hon. Ms M D Hassan Nahon: Thank you, Mr Speaker, for acknowledging that. I did think I had heard that a few days ago, but we have been here for so long that I am getting a bit of cabin fever and I did not want to – (*Interjection by Hon. Chief Minister*) On the supplementaries.

Mr Speaker, my supplementary was simply to ask the Minister – (*Interjection*)

[Inaudible]: He wants less rambling.

Hon. Chief Minister: Less rambling, yes.

Hon. Ms M D Hassan Nahon: So, let's stop rambling. Okay.

650 I wanted to ask the Minister ... I wanted to tell her, actually, before asking, that I also have had
an experience. My mother has had a Zoom with doctors in Spain. Clearly she talks about getting
the communications better and all that, but I wanted to ask her if the GHA is going to embark on
some awareness campaign so that the people of Gibraltar know that it is an option, because I do
not think people know it is an option. Obviously they want to expand that service. Can we hear
655 more about it and how the technology works, and how people understand through the media and
through the press how the Zoom option will be possible in the future?

Hon. Miss S J Sacramento: Mr Speaker, yes, this is all part of the Reset, Restart and Recovery
programme for the GHA that I explained yesterday. I will remind the hon. Lady that I said it is not
660 Zoom. The programme that we have is called Webex, but it can be downloaded by patients as
well.

Mr Speaker: Next question.

Q733/2020

Surgical operations –

Number undertaken between 1st March 2019 and 31st August 2020

Clerk: Question 726 to 732 have previously been answered, so we now move to Question 733
665 and the questioner is the Hon. K Azopardi.

Hon. K Azopardi: Mr Speaker, how many surgical operations were undertaken in Gibraltar by
the GHA in the following six-month periods: 1st March 2019 to 31st August 2019, 1st September
2019 to 29th February 2020, and 1st March 2020 to 31st August 2020?
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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism,
Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs
(Hon. Miss S J Sacramento): Mr Speaker, the number of surgical operations undertaken by the
675 GHA for each six-month period were: 1st March 2019 to 31st August 2019, 1,692; 1st September
2019 to 29th February 2020, 1,787; 1st March 2020 to 31st August 2020, 1,033.

Q734/2020

Cancer cases –

Number diagnosed between 1st March 2019 and 31st August 2020

Clerk: Question 734. The Hon. K Azopardi.

680 **Hon. K Azopardi:** Mr Speaker, how many cases of cancer were diagnosed in Gibraltar at the
GHA in the following six-month periods: 1st March 2019 to 31st August 2019, 1st September 2019
to 29th February 2020, and 1st March 2020 to 31st August 2020?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism,
685 Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, the number of diagnosed cancer cases for each six-month period were: 1st March 2019 to 31st August 2019, 82; 1st September 2019 to 29th February 2020, 81; 1st March 2020 to 31st August 2020, 85.

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Mr Speaker: Next question.

Q735-739/2020

Nursing staff in GHA –

**Nursing assistant short-term contracts and renewals;
nurses, nursing assistants, sisters and charge nurses by nationality;**

Clerk: Question 735. The Hon. K Azopardi.

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Hon. K Azopardi: Mr Speaker, how many nursing assistants were employed within the GHA on 31st March 2020 on contracts of six months or less or contracts of under 12 months, and how many of these have been previously renewed once or more than once?

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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, I will answer this question together with Questions 736 to 739.

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Clerk: Question 736. The Hon. K Azopardi.

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Hon. K Azopardi: How many nursing assistants were employed within the GHA on 31st October 2020 on contracts of six months or less or contracts of under 12 months, and how many of those have been previously renewed once or more than once?

Clerk: Question 737. The Hon. K Azopardi.

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Hon. K Azopardi: Can the Government state the number of nursing assistants working in the GHA on 31st March 2012 and 31st March 2020 respectively broken down by nationality?

Clerk: Question 738. The Hon. K Azopardi.

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Hon. K Azopardi: Can Government state the number of nurses working in the GHA on 31st March 2012 and 31st March 2020 respectively, not including sister/charge nurses, broken down by nationality?

Clerk: Question 739. The Hon. K Azopardi.

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Hon. K Azopardi: Can Government state the number of sister/charge nurses working in the GHA on 31st March 2012 and 31st March 2020 respectively, broken down by nationality?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, there were eight nursing assistants employed within the GHA on 31st March 2020 on contracts of six months or less and a further nine nursing assistants employed on contracts of over six months but under 12 months. Of those eight nursing assistants on contracts of six months or less, all eight had been previously renewed. Of the nine nursing assistants on contracts of over six months but under 12 months, seven had previously been renewed.

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There were 25 nursing assistants employed within the GHA on 31st October 2020 on contracts of six months or less, and a further eight nursing assistants employed on contracts of over six months but under 12 months. All these had previously been renewed.

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The number of nursing assistants working in the GHA on 31st March 2012 and 31st March 2020 respectively are as follows: 80 on 31st March 2012; 129 on 31st March 2020. The breakdown by nationality is as follows. In 2012 there were 79 who were British and one who was Swedish. In 2020, there were 119 who were British, six who were Spanish, one who was Dutch, one who was Irish, one who was Polish and one who was Portuguese.

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The number of nurses working in the GHA on 31st March 2012 and 31st March 2020 respectively, not including sister or charge nurse, is as follows: 287 on 31st March 2012, and 388 on 31st March 2020. The breakdown by nationality is as follows. In 2012, 240 were British, 40 were Spanish, two were German, two were Polish, one was French, one was Irish, one was Portuguese. The nationalities of those in 2020 were 252 British, 121 Spanish, three German, three Portuguese, three Romanian, two Italian, one French, one Irish, one Latvian, one Polish and one Swedish.

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The number of sister/charge nurses working in the GHA on 31st March 2012 and on 31st March 2020 respectively is as follows: 32 on 31st March 2012, and 40 on 31st March 2020. The breakdown by nationality is as follows. In 2012, 31 were British and one was Malaysian. In 2020, 34 were British, five were Spanish and one was Malaysian.

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Hon. K Azopardi: Mr Speaker, can I just ask about the process on the renewals of the nursing assistants? At 31st October 2020, the statistics the hon. Member gave were that there were 25 nursing assistants on contracts of less than six months and eight between six and 12 months. They had all been previously renewed. There was also a significant number of previous renewals in the previous answer of 31st March 2020. What is the criteria and what is the process of renewal? When is a decision taken for someone being made permanent? The information that I am getting sometimes is that people are being kept on an almost regular renewal basis, even though they may be local nursing assistants. Is the hon. Lady aware of that?

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Hon. Miss S J Sacramento: Mr Speaker, the problem is that this is a difficult period when it comes to the renewal of these nursing assistants. If the hon. Gentleman compares the numbers between 2012 and now, he will see that in every category the figure is remarkably higher for October of last year than it is for the period in 2012. That is because we have engaged a lot of supernumerary nursing assistants, particularly on the bank. However, if they are employed in the bank, they will still be on a fixed-term contract. A lot of these have been offered short-term fixed contracts, which are at present renewed depending on the COVID room demand, but as we settle down we will look at the establishment and regularise the position of those that need to be regularised. It is just where we find ourselves at this juncture of the pandemic. This is the way that we are handling this matter right now because the demand for the staff is such.

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Hon. K Azopardi: I certainly understand that, and I was not making a point on anything like that, because I understand that as a result of the pandemic of course the GHA had to recruit people on short-term contracts, which was necessary to do. I was making more the point that people, if you go back, would have been on historic renewals even before the pandemic came about.

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785 Is the hon. Lady saying that because of the pandemic there may have been people on historic renewals, but it is only post pandemic that the matter will be settled and reviewed and the complement will be looked at?

Hon. Miss S J Sacramento: Mr Speaker, the answer is probably yes. Because we have been in a pandemic, the status quo has continued and people on fixed-term contracts have been extended for expediency, probably, but also to be mindful that we have had a lot of additional people because of the pandemic. But now I am keen to review the situation in respect of all those who are on fixed-term contracts.

Mr Speaker: Next question.

Q740-41/2020

Dr Giraldi Home –

COVID positive cases since March 2020; precautions against spread of COVID

795 **Clerk:** Question 740. The Hon. K Azopardi.

Hon. K Azopardi: Mr Speaker, have there been any COVID positive cases at the Dr Giraldi Home since March 2020; and, if so, how many to 29th January 2021?

800 There is no magic in the figure. That was the date I filed the question, that is why it is 29th January, so if the hon. Member has another date ...

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

805 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, I will answer this question together with Question 741.

Clerk: Question 741. The Hon. K Azopardi.

810 **Hon. K Azopardi:** Mr Speaker, what precautions against the spread of the COVID virus are being taken at the Dr Giraldi Home?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

815 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, from March 2020 to 29th January 2021, a total of 50 cases were detected at the Dr Giraldi Home, of which six were residents and 44 were staff.

820 To ensure that the risk of the spread of COVID was mitigated as far as possible, the following measures were implemented at the Dr Giraldi Home: contingency plans were generated and updated monthly, or sooner if needed, in consultation with Public Health and the Infection Control Team at the GHA; staff were placed at the entrance to the building to monitor temperature and symptom check of those entering; ensuring all people entering the premises are informed they must wear personal protective equipment; contractors were informed they needed to be screened prior to entering the premises; all meetings took place remotely via online platforms; educating staff and service users on the importance of wearing PPE and the need to maintain social distancing; PPE equipment was procured and a rolling stock is in supply at all times; twice weekly swabbing of all staff in order to detect positive cases; increase in cleaning inside and

830 outside of the premises; a quarantine area identified for use by service users symptomatic and testing positive for COVID-19; screening of service users as per Public Health guidelines; Dr Giraldi Home has been in lockdown since 29th December 2020; restricted families visiting sites; creation of bubbles of staff to prevent cross-contamination; audits for hand hygiene implemented on a regular basis; and generated risk management plans to mitigate the risk for service users.

835 **Hon. K Azopardi:** Mr Speaker, I think the hon. Lady said that the Giraldi Home has been in lockdown. Is it currently in lockdown?

Hon. Miss S J Sacramento: No, Mr Speaker, I apologise. I do not believe that the Dr Giraldi Home continues to be in lockdown, but there are stringent measures in relation to visiting.

840 **Hon. K Azopardi:** Mr Speaker, the 50 positive cases, 44 from staff – does she have dates when those staff members became positive?

845 **Hon. Miss S J Sacramento:** No, Mr Speaker, the dates will be for the period that was requested in the question, but I do not have a monthly breakdown of the positives.

Hon. K Azopardi: In relation to the Dr Giraldi Home I think she said swabbing twice a week of staff. Like in ERS at the height of the lockdown and the more virulent strain, was the swabbing frequency increased?

850 **Hon. Miss S J Sacramento:** Mr Speaker, the answer that has been prepared for me by the officials says that the testing was undertaken twice a week, but I understand, wearing my Civil Contingency hat, that at that time swabbing was increased and it was undertaken in the same way that it was undertaken at ERS because we were monitoring ... Because it is all related to the increase in infectivity in the community, as the cases were increasing in the community we escalated the precautions at the homes. So, on that basis, Giraldi Home was treated in the same way as ERS was being treated. Although I do not have it in my answer, from memory I think that swabbing was increased.

Mr Speaker: Next question.

Q742/2020
Statistics re COVID recoveries –
Inclusion of non-residents

860 **Clerk:** Question 742. The Hon. K Azopardi.

865 **Hon. K Azopardi:** Mr Speaker, are non-residents included in the figure of recovered cases in the daily COVID-19 statistics published by Government, and have they been since 31st August 2020?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

870 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, the answer is yes, non-residents are included in the recoveries.

875 **Hon. K Azopardi:** Yes, since 31st August 2020, I think there were some ... I have to perhaps ask
the hon. Lady to go back to Public Health and see how they produce those statistics. We have
been doing tracking of those statistics and if that is the case, well then there are deficiencies in
the statistics because the numbers just do not stack up. The only way that we thought they could
stack up was by non-residents not being included in the recovered cases for a period of maybe
even two or three months during that period. So, I would ask the hon. Lady ... If she wants, I can
share the statistics that I compiled as well. She will find when the number crunching is done that
880 those numbers that are published do not stack up, if that is the case.

Hon. Miss S J Sacramento: Mr Speaker, I am not aware that they do not stack up, but I will
discuss the matter with the hon. Gentleman after the session.

885 **Mr Speaker:** Next question.

Q476/2020

Cybercrime –

Number of reports and breakdown of people charged and prosecuted

890 **Clerk:** Questions 743 to 745 have previously been asked and answered, so we now go to
Question 746 and the questioner is the Hon. Ms M D Hassan Nahon.

895 **Hon. Ms M D Hassan Nahon:** Given the recent GFIU reports in the press that eight businesses
lost over £500,000 to cybercrime, and the ever-increasing and evolving threat that cybercrime
presents to individuals and businesses alike, can Government please confirm, in respect of the
data available, how many reports of cybercrime were made to the Royal Gibraltar Police in the
last three years, and of those, the breakdown between people actually charged and prosecuted?

900 **Clerk:** Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism,
Equality and Community Affairs.

**Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs
(Hon. Miss S J Sacramento):** Mr Speaker, in the last three years, 214 reports of cybercrime were
made to the Royal Gibraltar Police. Of those, 12 have been charged and subsequently prosecuted.

905 **Hon. Ms M D Hassan Nahon:** Mr Speaker, it is widely accepted that cybercrime is vastly under-
reported and therefore the actual incidence is much higher than the figures suggest. In any event,
does the Minister not agree that, given the nature of such crimes, it makes it very difficult for law
enforcement bodies to pursue those cybercrimes that are actually reported, because they often
straddle a number of different jurisdictions, and obscure jurisdictions, and that a new and fresh
910 approach is required to combat this ever-increasing and evolving threat?

Does she agree that there is a new strategy that is needed, or is it the case that the Hon.
Minister is satisfied with the Government's current strategy?

915 **Hon. Miss S J Sacramento:** Mr Speaker, this is a complex one because cybercrime as a criminal
activity targets a wide range of potential victims, whether they be individuals or businesses, by
the use of computers and networks and mostly by people wanting to make money illegally, though
not exclusively.

920 Cybercrime is prosecuted by the Police in serious ways. Because there are different elements
to different types of cybercrime, there are certain facets of cybercrime that I have been in
discussion with the Royal Gibraltar Police on, and it is something that we are already looking at.

Hon. Ms M D Hassan Nahon: Mr Speaker, it has been since 2017, I believe, that ... It was actually in the *Gibraltar Chronicle*, a report that the Gibraltar Contingency Council was working on developing a national cyber strategy for the Rock. Fast forward four years, in the RGP's Annual Policing Plan 2020, under priority number one, the report says at point 10 of its delivery plan:

Continue to pursue the creation of a National Cyber Security Strategy, which when published will inform the RGP's own Cyber Crime Strategy with an uplifting programme.

925 So, it is clear the RGP are calling out for a fresh strategy. Is there nothing forthcoming from Government in order to resource them and empower them in a jurisdiction like ours, where we have so much digital industry that we are clearly crying out for a solid cyber strategy for the future?

930 **Hon. Miss S J Sacramento:** Mr Speaker, there is another question on this topic on the Order Paper, but it has been put to the Minister with responsibility for digital services. Can I ask that we deal with that under that question? It would be more appropriate.

Mr Speaker: Yes, there is another question which is very similar. It is Question 803 and the Minister for Financial Services and Public Utilities will answer that question.
935 Next question.

Q747/2020

Emergency calls –

Filtering of non-fire and rescue calls through Gibraltar Fire and Rescue Service

Clerk: Question 747. The Hon. Ms M D Hassan Nahon.

Hon. Ms M D Hassan Nahon: Can Government tell this House if it is satisfied with the current arrangement whereby emergency calls not pertaining to issues relating to fire and rescue are filtered through the Fire Service?
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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.
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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, the Gibraltar Fire and Rescue Service (GFRS) was appointed as the dispatch hub for fire and emergency ambulance over 20 years ago. This arrangement was agreed and endorsed at the time by Unite the Union and it remains a responsibility of the GFRS today. This responsibility is clearly highlighted in the Fire Control Operator job specification. The Fire Control Operators have dispatched assets since then, and recently the GFRS has introduced new protocols to more efficiently triage by adopting a shared multi-agency approach to the overall dispatch model through an SOP with the GHA.
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Hon. Ms M D Hassan Nahon: Mr Speaker, it is my understanding that the telephonists who answer these calls are not medically trained and that they have no medical qualifications and are not even required to hold a first-aid certificate. What happens, from what I understand, is that they receive a one-day training course on how to handle calls. Is this not effectively irresponsible and dangerous for the caller? I have had several representations from people who have experienced the pathology of these calls and how there is a lot lacking in terms of medical attention and advice.
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965 **Hon. Miss S J Sacramento:** Mr Speaker, this is the way that it has been done for the past 50 years. It is misleading to say that calls are being received by telephonists. They are not received by telephonists; they are being received by fire control officers who are trained in taking emergency calls. However, just because this has been the practice for the last 50 years does not mean that we do not continue to work on it. I have alluded to a standard operating procedure that has been prepared by the GHA and by its relevant departments, and there is engagement now, and much more engagement, between the GHA and the GFRS on the subject.

970 **Hon. Ms M D Hassan Nahon:** One more: I do not necessarily know how fire officers may have the same training needed as they do to answer phones for medical emergencies, not fire-related emergencies, but could I just ask the Minister if there is any chance that – perhaps given that now the 111 system is going to, hopefully, naturally shrink after the COVID days that we have had – that team would perhaps be of any interest to restructure and work in a similar way as a standard response team with professional advice, in a similar way as they were doing during the COVID months?

980 **Hon. Miss S J Sacramento:** Mr Speaker, once again, as I alluded to yesterday, the GHA has embarked on a project called Reset, Restart and Recover, where we are looking at the best of COVID to see how we implement the best going over. Like everything else in healthcare, it is something that is under continuous review so that we can improve patient care and the way that we deliver and interact with all our services.

Mr Speaker: Next question.

Q748/2020

Patient and constituent grievances – GHA system/policy re timeframe for answering

985 **Clerk:** Question 748. The Hon. Ms M D Hassan Nahon.

Hon. Ms M D Hassan Nahon: Is there a system or policy within the GHA that deals with patients or constituents' grievances within a reasonable timeframe?

990 **Clerk:** Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

995 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, all complaints are dealt with by the Patient Advisory and Liaison Services (PALS) on the same day, who will revert to the patient within five working days. If the complaint cannot be resolved, then it is referred to the Complaints department.

1000 As per GHA policy, all formal complaints are acknowledged by the Complaints department within five working days of receipt. A response is given as soon as any pertinent inquiries or investigations have taken place, and no later than 25 working days after receipt of the complaint. If, for any unexpected reason, there is any delay during the investigation process, the complainant is duly informed of the need for an extension beyond the initial 25 days.

1005 **Hon. Ms M D Hassan Nahon:** Mr Speaker, it has been well recognised, I am sorry to say, that PALS does not work. If only it was five days, or even weeks. I have constituents who come to me who have actually been waiting for years for a response – I will happily remind her of their names. Who do constituents actually go to when PALS does not work? Because it does not.

Hon. Miss S J Sacramento: Mr Speaker, I do not accept that it is widely recognised that PALS does not work. It may be that also we have to consider that some people may make complaints and some complaints may not be resolved to the expectation of the person making the complaint because it may not be possible to deal with it that way. In relation to complaints, anyone within the GHA who is not satisfied in respect of anything will always have recourse to the senior management, and invariably a lot of things – sometimes unnecessarily, but invariably, because we are in Gibraltar – will either be brought to the attention of the office of the Medical Director or indeed my office. It is not something that the Ministry of Health should be dealing with, because the responsibility of the Ministry of Health is something else, but invariably, if a complaint is brought to my attention then I will obviously immediately engage the procedures that are required to investigate the complaint.

Hon. Ms M D Hassan Nahon: Mr Speaker, is the Minister saying that PALS is accountable to her Ministry directly?

Hon. Miss S J Sacramento: Mr Speaker, no, I have not said that PALS is accountable to the Ministry. What I have said is that invariably people will call my Ministry, because that is the practice and the nature of the expectation in Gibraltar. What I did say is that calls end up in the office of the Medical Director of the GHA. Ultimately, everything is the responsibility of the Medical Director of the GHA. He is the person at the top of the tree.

Mr Speaker: One final question.

Hon. Ms M D Hassan Nahon: Mr Speaker, thank you. I meant to rephrase: who is PALS actually accountable to, then?

Hon. Miss S J Sacramento: Mr Speaker, within the structure of the GHA it will be within the clinical structure. PALS is the Patient Liaison Service. Patients can have complaints which are wide ranging, so it depends whether a patient is going to complain about the clinical treatment, about the way they may have been spoken to by counter staff, or they may have a complaint about the food that they have been served on the ward, so depending on ... PALS is where complaints will be received, but then, depending on the nature of the complaint, it will be followed up by other departments and within the senior structure of the management of the Hospital.

Mr Speaker: Next question.

Q750-53/2020
GHA Human Resources and Finance departments –
Relocation to Europort

Clerk: Question 749 has previously been answered, so we move now to Question 750 and the questioner is the Hon. Ms M D Hassan Nahon.

Hon. Ms M D Hassan Nahon: Why did the GHA Human Resources department relocate to 7.3.3 Europort?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

1050 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, I will answer this question together with Questions 751 to 753.

Clerk: Question 751. The Hon. Ms M D Hassan Nahon.

1055 **Hon. Ms M D Hassan Nahon:** How much is the rent for the newly relocated GHA Human Resources department at 7.3.3 Europort?

Clerk: Question 752. The Hon. Ms M D Hassan Nahon.

1060 **Hon. Ms M D Hassan Nahon:** Why did the GHA Finance department relocate to 9.4.3 Europort?

Clerk: Question 753. The Hon. Ms M D Hassan Nahon.

1065 **Hon. Ms M D Hassan Nahon:** How much is the rent for the recently relocated GHA Finance department at 9.4.3 Europort?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

1070 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, Human Resources and Finance moved out of St Bernard's Hospital so as to make space, which was required for clinical and patient services, as some GHA services have been repatriated in preparation for Brexit or because staff have been trained to be able to offer such services locally as this is preferable for the patient.

The rent for the Human Resources office at 7.3.3 Europort is £85,485 per annum, and the rent in respect of the Finance office at 9.4.3 Europort is £88,400 per annum.

1080 **Hon. Ms M D Hassan Nahon:** Mr Speaker, can the Minister tell me when the leases of these offices were entered into and by whom, and by whom were they authorised?

Hon. Miss S J Sacramento: Mr Speaker, Human Resources moved in May 2019 and Finance moved at the beginning of December 2020. I do not have a copy of the leases, but I would imagine that the leases would have been executed by the GHA.

1085 **Hon. Ms M D Hassan Nahon:** Mr Speaker, can the Minister tell us why the rental of these offices in Europort is not in the Estimates of 2019-20? And can she also tell us the length of these leases?

1090 **Hon. Miss S J Sacramento:** Mr Speaker, I do not know that they are not in the Estimates. Not having prepared those Estimates myself, it is not information that I have at the tip of my fingers, so I cannot take it at face value that they are not reflected in the Estimates. It is very unlikely that we will find a line in the Estimates that refers to one rental contract, so it would be unusual for them to be there in any event because there are various global heads under which they could appear.

I do not know the length of the agreement, I am afraid. It is not information that has been provided and I do not have a copy of the lease or the agreement.

1100 **Hon. Ms M D Hassan Nahon:** Mr Speaker, it appears that the rentals have been highlighted on page 197 of the Gibraltar Estimates Book 2019-20 under subsection (26), with no detail on this. If I can just pass it to the Minister, perhaps she can enlighten me further.

1105 **Hon. Miss S J Sacramento:** Mr Speaker, as I said, it is not an estimate that I have prepared in the past, so it is not knowledge that I have a working knowledge of. Whereas some rent may be reflected in the Estimates Book, it is also possible that other rent may be reflected in other heads. Indeed, it may be that there are a number of possible explanations. The budget of the Gibraltar Health Authority is, of course, a very substantial budget and therefore it has numerous other heads. But I will look into the point and look to see what the answers are, and I will let the hon. Lady know after this Parliament.

1110 **Mr Speaker:** Next question.

Q754-55/2020
GHA Clinical Governance team –
Annual salaries and qualifications

Clerk: Question 754. The Hon. Ms M D Hassan Nahon.

1115 **Hon. Ms M D Hassan Nahon:** What are the annual salaries of the Clinical Governance team at the GHA by title and post?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

1120 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, I will answer this question together with Question 755.

Clerk: Question 755. The Hon. Ms M D Hassan Nahon.

1125 **Hon. Ms M D Hassan Nahon:** What professional qualifications does each member of the Clinical Governance team possess, by job title?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

1130 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, the Clinical Governance team comprises two members, one at consultant level and one at an allied health professional senior 1 level. The salary scales of both these posts are published in the Government Estimates Book.

1135 They meet their professional competences. These are clinical professionals assigned to undertaking a clinical task.

1140 **Hon. Ms M D Hassan Nahon:** Mr Speaker, it is interesting to hear the Minister answer that they meet their professional competences, when 98% of PCC doctors and 20% of the secondary care sector doctors of all grades signed a vote of no confidence against the lead of Clinical Governance. I do not know if the Minister has seen the letter, but how can the Government justify what I can imagine to be a very large salary for the leader of a Clinical Governance team who has so little confidence from his doctors – as well as the union, which has expressed grievances – and was the source of a Government walkout and demonstration?

1145 **Hon. Miss S J Sacramento:** Mr Speaker, we had a similar situation in Questions yesterday and we said that we would not comment on any individual members of staff across the floor of this House.

1150 **Hon. Ms M D Hassan Nahon:** Mr Speaker, I believe that the question yesterday was very different. I am simply trying to establish how the Government can justify salaries, which is a matter of public interest, and when you juxtapose that against the reality that the leader of the Clinical Governance team does not enjoy any support from most doctors and has caused, effectively, walkouts because of the lack of confidence in him, I think that the Minister is duty bound to give us an answer.

1155 **Mr Speaker:** Please resume your seat. I need to point out to the hon. Lady that in 17.1 of the Standing Orders it does say:

The right to ask questions shall be governed by the following rules

and this rule says:

(viii) a question shall not be asked as to the character or conduct of any persons except in his official or public capacity;

1160 **Hon. Ms M D Hassan Nahon:** Mr Speaker, thank you for that, but the vote of no confidence is all related to the professional capacity of this individual. I have not mentioned any names, but we are talking about his role within a clinical governance team. My question stemmed from how we allocate funds, salaries and jobs to people who do not enjoy confidence for their roles, so I think that my question falls within the scope of the allowance to have an answer for it.

1165 **Hon. Miss S J Sacramento:** Mr Speaker, the hon. Lady refers to a walkout, but I would remind the hon. Lady that this walkout took place in July of last year, and in a way this is now a historic question. I would invite the hon. Lady to read the press release that the Government issued in July of last year in respect of this subject, and therefore the Government's position in this respect is already in the public domain.

1170 **Hon. Ms M D Hassan Nahon:** Mr Speaker, when the hon. Lady reminds us that this walkout took place in July it makes the situation even more worrying, considering that for the last seven or eight months and throughout a second wave of a pandemic we have been under the clinical governance of an individual who does not enjoy the confidence of his doctors. So, I would like to ask the Minister if she is looking at the root cause of this situation and how it is that we can afford a figure of around £150,000 plus allowances when this doctor has zero confidence from his colleagues in the service. How can we justify this expense? I think that is a very normal question from an opposition MP.

1180 **Hon. Miss S J Sacramento:** Mr Speaker, I would like to remind the hon. Lady what clinical governance is actually about. Clinical governance relates to the safety standards and the patient standards in hospital. What the Clinical Governance team was set up to do was ensure that clinical, safety and professional standards within the Hospital were established, followed and met. It is, I think, natural by extension that sometimes this may cause situations which may be difficult for people, but that does not mean ... This role is about making the Hospital better and ensuring the safety and standards of patients.

1185 **Mr Speaker:** Next question.

Q756-57/2020
Nightingale facility –
Security and cleaning companies during COVID crisis

Clerk: Question 756. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: How many security companies were involved in the Nightingale facility?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, I will answer this question with Question 757.

Clerk: Question 757. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: What is the name of the cleaning company contracted to work at the Nightingale hospital during the COVID-19 crisis months?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, there has been one company involved in the security of the Nightingale hospital.

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The following companies were engaged for the cleaning services at the Nightingale hospital: Environmental Support Services and Elite Cleaning.

Mr Speaker: Next question.

Q758/2020
Agency nurses –
Cost and duration in COVID-19 period

Clerk: Question 758. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: What was the financial cost of contracting agency nurses during COVID-19 period and how long were they contracted for?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, the total cost of contracting agency nurses up to 31st August in relation to COVID-19 was £2,291,589.74. The contract duration of those agency nurses ranged from three weeks to 24 weeks.

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Mr Speaker: Next question.

Q759/2020

**Mental Health Service –
Actions to improve nurse-patient ratio**

Clerk: Question 759. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: What is the Health Ministry doing to improve the ratio, as reported by the Mental Health Report, of three mental health nurses and six enrolled nurses for 901 active patients?

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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, following some reviews and changes recently – dementia patients predominantly supported by Outreach Memory Clinic from Bella Vista – I can confirm that there are 480 active adult cases that presently come under Community Mental Health team, of which 120 patients would be allocated to a nursing staff member at a point in time. The remaining patients are reviewed by the consultant psychiatrist.

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There are currently seven nursing staff for the above 120 patients who need nursing intervention or support at any point in time, and this is broken down as follows: one team manager, who would be allocated to up to six of the most complex cases; three registered mental nurses, who would be allocated 12 to 15 cases; and three enrolled nurses, who would be allocated 20 to 25 active cases.

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Mr Speaker: Next question.

Q760/2020

**Mental health patients –
Vehicle for outings**

Clerk: Question 760. The Hon. Ms M D Hassan Nahon.

Hon. Ms M D Hassan Nahon: When will Government comply with the recommendation of the Mental Health Report to obtain a vehicle to transfer patients to outings, or has it done so already?

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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, the vehicle with the required specifications has been identified and an order will be placed as soon as possible.

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Hon. Ms M D Hassan Nahon: Mr Speaker, thank you for that.

When the Hon. Minister says that an order will be placed as soon as possible, do we have a timeframe by which patients/residents can expect this vehicle to be delivered?

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Hon. Miss S J Sacramento: Mr Speaker, I know that the team have been working on this vehicle, but I do not know the exact details of how long it will take for the vehicle to be procured and delivered.

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Mr Speaker: Next question.

Q765/2020

Assisted living –

Accommodation for the elderly and those with dementia

Clerk: Questions 761 to 764 have previously been answered.

We now move to Question 765. The questioner is the Hon. Ms M D Hassan Nahon.

1275 **Hon. Ms M D Hassan Nahon:** Does the Government have plans to build assisted living accommodation for the elderly/people living with dementia?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, the Government has built and will continue to build purpose-built flats for the elderly. These flats, which are designed with the input of social workers, occupational therapists and other such professionals, are fully accessible and are designed with a view that tenants can continue to live independently for longer. In addition, the Government will also offer packages of care to those who live with dementia, upon assessment by the Care Agency social workers.

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Hon. Ms M D Hassan Nahon: Mr Speaker, I do acknowledge that this administration has built some assisted living centres for people living with dementia, which is a great thing, but looking into the future, can the Minister, given that she has told us that they will continue to build, identify the locations they are looking at and what designs have been taken into account?

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Hon. Miss S J Sacramento: Mr Speaker, some years ago, when we were redesigning the Hillside residential facility for people with dementia, I engaged someone who specialised in designing for dementia. This was an award-winning ... I cannot remember whether he was an architect or an engineer, but he had a lot of experience in designing dementia facilities. Through the process of designing a residential home for dementia, we actually learnt a lot about dementia design – things like colour coding and easily accessible features. What we did particularly in relation to residential facilities was absolutely crucial for the dignity of the person who lived there.

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But this question is about living in the community, and we incorporated all the learning that we had from Mr Wilson, who was here back then – because he taught us a lot on dementia – and we incorporated a lot of that learning when we designed the latest block for elderly living, which we did at Charles Bruzon House and Seamaster Lodge. So, there is a lot of cross-learning and cross risk practices that we can implement from the residential home that we did into purpose-built flats for the elderly to improve the quality of life of people who live in the community. It makes it easier for people who live with dementia, but it makes it easier for everyone all round.

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Hon. Ms M D Hassan Nahon: Mr Speaker, can I just ask whether Government is working closely with GAAD to make the future assisted living projects dementia friendly, and if they have a long-term plan to eventually incorporate dementia assisted living residents within mainstream estates in the future?

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Hon. Miss S J Sacramento: Mr Speaker, GAAD, of course, is a charity and a support group. We work closely with them and they are consulted with professionals, but when we design, primarily our advice comes from qualified professionals, whether they are clinical professionals or professionals in design. GAAD, as the hon. Lady may recall, worked very closely with us when we designed what is now Hillside. In fact, Mr Speaker, I made a point of inviting GAAD before we demolished what I discovered when I went there in 2011, and I vividly recall how emotional that

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1320 was. I really wanted GAAD to see what it was that I was working with. GAAD have always been involved in our projects, so we consult with them closely. Unfortunately, because of the lockdown, we have not been able to meet personally, but I am sure that will change in the future.

Hon. Ms M D Hassan Nahon: Thank you, Mr Speaker.

1325 Can I just ask the Minister to clarify that when we talk about assisted living we are both referring to the same thing? From what I understand, it is a system whereby you need a flat in the block for carers 24/7 in order to assist with any emergency or to care for the residents. Is this what the Minister will be providing in the future, in order to fulfil the personal needs of these residents?

1330 **Hon. Miss S J Sacramento:** No, Mr Speaker, that is not what I answered in my substantive answer. The model that we have developed as a Government has been that we build purpose-built flats for the elderly. The way that these flats are designed, an elderly person will be able to live independently at home for as long as possible as they age, whether they deteriorate in their health, whether they acquire a disability or have a disability and it may deteriorate, or whether
1335 indeed they have dementia, and that is all down to the design of the home. Depending on the individual, after an assessment by social workers they may be offered home help, and that is what makes it assisted living.

The hon. Lady may be thinking of some kind of sheltered accommodation, and that is the kind of provision that we discussed yesterday for people who suffer from mental health. On this
1340 occasion, the model that we have is that people can remain at home independently for longer, until they reach a stage where they can no longer live in the community and they can no longer be independent, in which case residential care is best for them.

Hon. Ms M D Hassan Nahon: Mr Speaker, I am confused because assisted living means living with assistance, otherwise it is not assisted living. This is why I was asking about ... Globally, the
1345 model is that you have carers there at the ready to assist people to live in their older years. For me, this is news and I believe that most dementia societies are under the same impression.

Hon. Miss S J Sacramento: Mr Speaker, the problem is that I do not think the hon. Lady has understood my answer. In her mind, she wants it to be what the hon. Lady wants it to be, and that
1350 is not what I have said.

I am perfectly aware what other models exist in other, larger countries. In fact, I visited a dementia village in Amsterdam once. It was part of a dementia conference that I attended once with the head of ERS. In other countries, where you have the luxury of space, you can build a
1355 purpose-built village for people with dementia. Ideally, of course, there is nothing more we would like to build, a village for people with dementia and other needs in Gibraltar, but the way we have to do it in Gibraltar, because of our size, because of our needs and in order to meet everybody's needs, is that the home itself is as accessible as it can be and the assistance comes by way of domiciliary care. That is a model that we introduced in 2011. It is a model that we have been
1360 working on, building on and improving as the years go.

Mr Speaker: Next question.

Q767-771/2020

Dementia sufferers –

**Total number with early onset dementia, number on ERS waiting list, support facilities;
number of dementia patients at Ocean Views;
number of Ocean Views residents waiting for ERS beds**

Clerk: Question 766 has been previously answered.

We move to Question 767. The questioner is the Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: Following the last parliamentary session, where the former Health Minister confirmed that there were 30 people with dementia on the ERS waiting list, can the newly appointed Health Minister confirm if that list of 30 includes in it anyone with early onset dementia?

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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, I will answer this question together with Questions 768 to 771.

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Clerk: Question 768. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: What is the number of people with early onset dementia in Gibraltar?

Clerk: Question 769. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: What support/facilities are available for people with early onset dementia?

Clerk: Question 770. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: What is the number of people with dementia at Ocean Views?

Clerk: Question 771. The Hon. Ms M D Hassan Nahon.

Hon. Ms M D Hassan Nahon: What is the number of patients at Ocean Views waiting for a bed at ERS facilities?

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Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, there are no individuals with early onset dementia on the ERS waiting list.

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There is currently one known person living with early onset dementia.

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Individuals living with any form of dementia are offered the same support. This includes intervention of allied health professionals, day care facility for those with moderate to severe dementia, neuro-psychology stimulation, access to home help, respite services, direct access to GPs and counselling services, direct access to the Memory Clinic, access to research centre in UK, admission to ERS, access and support in accessing neuro appointment for those who are at home,

1410 access at home by the Dementia Outreach team, close collaboration with families and the Care Agency, planned therapeutic activity for stimulation for those at home, and access to the Dementia Outreach team, which includes regular telephone contact and domiciliary visits.

There are currently 13 patients at Ocean Views living with dementia, 10 of whom are on the waiting list for admission to ERS.

1415 **Hon. Ms M D Hassan Nahon:** Mr Speaker, I appreciate the Minister's answer, but I was a little worried to hear that the strategy for people with early onset dementia is the same as the one for people who are more elderly. Can she elaborate on whether the Government might have a different strategy that they might want to apply in the future for people with early onset dementia? For example, when she says that they have this direct access to ERS, imagine somebody
1420 who is 40 or 45 and has early onset dementia. You would hope that the strategy for them, in terms of their care, and especially in the early years when they still have not fallen so deeply into the condition, would not be an ERS solution. So, I would like to ask her if the GHA is working on a strategy for people suffering from early onset dementia.

1425 I also find it difficult to believe that there is only one person, because from my understanding and connection with people, there are more people with early onset dementia in Gibraltar. Are these statistics updated and current?

Hon. Miss S J Sacramento: Mr Speaker, I can confirm that this answer has been provided to me by clinicians. There are a very limited number of clinicians who deal with people with dementia, because they specialise both in treating elderly patients and patients with dementia.
1430 The definition and classification of early onset dementia is a clinical one, and therefore I am confident that if this answer has been provided to me by the most senior consultant in elderly care, then it is the correct clinical response to the question.

1435 In relation to the other supplementary, I am afraid that I think the hon. Lady has misunderstood what I have said. We have one person with early onset dementia, but what I have said in relation to this question and other answers that I have provided is that all our care is always person centred, and if we were to find ourselves in a situation where someone had a case of early onset dementia or any other need, if it is person centred, because there is a multi-agency approach then all other resources would kick in.

1440 The hon. Lady is right to say that it would not be appropriate for someone in their 40s to be admitted to Mount Alvernia or any ERS facility, and there is no question that anyone would be. If that were to be the case, and say for example the person had housing needs, then the social housing or the medical housing pathways would trigger. Generically, this has happened in the past, and where people require additional levels of care the Housing department has even
1445 allocated a new flat which is not only completely accessible but may even have an additional bedroom if that person will need additional care.

So, I can tell the hon. Lady to rest assured that there are all sorts of protocols in place to assist people in our community in Gibraltar.

1450 **Hon. Ms M D Hassan Nahon:** Thank you, Mr Speaker.

Can I just ask the hon. Lady how long patients waiting for a bed in ERS who are in Ocean Views typically stay before they get that place at the ERS facilities?

1455 **Hon. Miss S J Sacramento:** Mr Speaker, that very much depends on the individual patient, because the assessment will depend, and particularly at the time, on whether their dementia needs outweigh any other clinical need they have. Usually, if someone is admitted to Ocean Views, it may be because they have another clinical priority, which may take priority over the dementia.

1460 **Hon. Ms M D Hassan Nahon:** Mr Speaker, when people go into Ocean Views to be assessed and once they are, do they go home or do they stay? I ask because my concern is whether these

individuals are monitored once they have been administered medication and deemed safe to go home, or whether they are held back to monitor their reaction or levels of agitation.

1465 **Hon. Miss S J Sacramento:** Mr Speaker, once again, it depends on the person. There will be an evaluation as to what is in the best interests of the individual. I had a very similar question yesterday, where I went through a whole list of the responsibilities and the tasks that the GHA will go through before somebody is safely discharged and the responsibilities that they will continue to have for that patient once they are discharged.

1470 **Hon. Ms M D Hassan Nahon:** Mr Speaker, one last supplementary. Does the Minister agree that the system or structure ... that they do not aim, they do not want and they do not encourage dementia patients to stay long term in Ocean Views if they do not have a mental problem as such, and that they hurry it along for them to move on to ERS and not stay at Ocean Views?

1475 **Hon. Miss S J Sacramento:** Mr Speaker, it depends on what is in the best interest of the patient. Again, any statistics that they give in relation to this year are going to be somewhat different to the normal course of things. Because of the COVID situation, for the last year we have been reluctant to move people from one facility to another, particularly when they have dementia, because of all the reasons that were aired yesterday, which I will not go into again today.

1480

Mr Speaker: Next question.

Q772/2020

Mental health prescribing, admissions and treatment – Statistics for pandemic period

Clerk: Question 772. The Hon. Ms M D Hassan Nahon.

1485 **Hon. Ms M D Hassan Nahon:** Have we seen a rise in anti-depression and anti-anxiety medication, admissions to Ocean Views and psychiatric or psychological treatment in the last year as a result of the COVID pandemic; and, if so, can Government provide this House with any statistics to this effect?

1490 **Clerk:** Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

1495 **Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento):** Mr Speaker, the overall average admission rate to Ocean Views from March to December 2020 was nine per month. This was the same average admission rate as the corresponding period the previous year. However, on closer examination, during the period of lockdown from March to June 2020, there had been a slight increase in admissions of 1.15% over the same period the previous year.

1500 The Mental Health Liaison Service had an average of 45 patient contacts per month. The lockdown between April and June 2020 saw a slight increase to an average of 48 patients per month. In the post-lockdown period between July and September 2020, patient contacts saw a rise to an average of 53 per month. As this is a new service, we cannot compare to the year before.

Counselling Services received a total of 274 referrals during the period April to September 2020. This is approximately 10 a week. During the period January to December 2020, Psychology Services received an average of seven per month.

1505 Patient referrals to Psychiatry Services in the period from January to December 2020 saw an average of 9.5 per month.

The number of patients prescribed anti-depressants from 1st March 2019 to 29th February 2020 was 2,652, and from 1st March 2020 to 28th February 2021 was 2,547.

1510 Those who were prescribed anti-anxiety medication: from 1st March 2019 to 29th February 2020, 4,093; and 1st March 2020 to 28th February 2021, 3,407.

Hon. Ms M D Hassan Nahon: Thank you for that answer.

Mr Speaker, can the hon. Lady tell us who is now monitoring trends when the doctors who formerly embarked on an audit over benzodiazepines resigned recently for unknown reasons?

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Hon. Miss S J Sacramento: Mr Speaker, again, I do not want to delve into conspiracy theories, as was attempted yesterday, so I do not accept that remark.

In relation to supervision, there are multiple safeguards within the GHA. Ultimately it would be the kind of thing that would be considered by the Director of Public Health and by the Medical Director of the GHA.

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Hon. Ms M D Hassan Nahon: Mr Speaker, how has the GHA managed to care for new and existing drug-related conditions or prescription drugs or otherwise when the two doctors with speciality in drug rehabilitation resigned a couple of months ago? Who is looking after Bruce's Farm patients? Who is taking care of this speciality now?

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Hon. Miss S J Sacramento: Mr Speaker, with respect, that supplementary question is completely unrelated to the initial question. It is completely unrelated.

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Mr Speaker: I agree. One final question.

Hon. Ms M D Hassan Nahon: Mr Speaker, I wanted to ask you why it is that you think it is unrelated when the two lead doctors who deal with drug addiction are no longer there ... that it is not in the public interest for an MP to ask who is taking care of the drug issue when those two doctors formerly charged to deal with that are not there anymore.

1535

Hon. Miss S J Sacramento: Mr Speaker, if I may: because Question 772 deals with anti-depression and anti-anxiety medication, admissions to Ocean Views and psychiatric or psychological treatment. Bruce's Farm is nothing to do with the GHA, and this question is in relation to the GHA and Ocean Views. Bruce's Farm has absolutely nothing to do with the GHA and is a centre for rehabilitation for addictions.

1540

Hon. Ms M D Hassan Nahon: Mr Speaker, I accept that, but my first question, which the Minister also did not seem to accept, was about who is taking care of the audit, because these doctors were dealing with that audit, so they were not just working for Bruce's Farm, clearly.

1545

Hon. Miss S J Sacramento: No, Mr Speaker, and I do not accept that, because doctors who work for Bruce's Farm, which is not connected to Ocean Views, would not be undertaking an audit of Ocean Views, so I am afraid that the hon. Lady has misunderstood, and once again we find ourselves in another conspiracy theory which is unfounded.

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Mr Speaker: We need to move on now. Next question.

Q773-74/2020

Children's home –

Number of residents and ages; number of counsellors

Clerk: Question 773. The Hon. Ms M D Hassan Nahon.

1555 **Hon. Ms M D Hassan Nahon:** How many residents are there in the children's home and what are their ages?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, I will answer this question together with Question 774.

Clerk: Question 774. The Hon. Ms M D Hassan Nahon.

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Hon. Ms M D Hassan Nahon: How many counsellors are there working at any one time in the children's home?

Clerk: Answer, the Hon. the Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs.

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Minister for the Health Authority, Justice, Multiculturalism, Equality and Community Affairs (Hon. Miss S J Sacramento): Mr Speaker, there are currently 10 children at the home, between the ages of one and 18. There is also one young adult over the age of 18, who is in the process of transitioning out.

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There are currently four counselling professionals working within Children's Residential Services. They are not based there, because it is a home, but they are assigned to the children there.

1580 **Hon. Ms M D Hassan Nahon:** Mr Speaker, I thank the Hon. Minister for that answer.

How do we monitor and evaluate the impact of taking children into care, in terms of once they have had this care? Do they carry out impact evaluations or any type of quality control? Does Government receive any information or feedback from past residents in order to improve delivery of care?

1585

Hon. Miss S J Sacramento: Mr Speaker, some four months ago I commissioned a working group to look at exactly this situation.

Unfortunately, a lot of the children who end up in care for some reason or another will have suffered some childhood trauma because of the reason why they have been taken into care, and I am very concerned about ... One of the running themes through a lot of the social policy that I am trying to develop in these new responsibilities is looking at breaking the cycle, whether it is in relation to victims or whether it is in relation to perpetrators. I have been working with a lot of the therapeutic professionals and some other professionals in other key stakeholder departments to look at the effect that trauma has on children and what we can do to help them break the cycle and help them become their best selves in future life.

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Mr Speaker: Next question.

ECONOMIC DEVELOPMENT, TELECOMMUNICATIONS AND THE GSB

Q775/2020

**NVQ Level 2 and 3 in Mechanical Engineering –
Number of trainees and method of assessment**

Clerk: We now move on to questions to the Hon. the Minister for Economic Development, Telecommunications and the GSB.

1600 We commence with Question 775 and the questioner is the Hon. E J Reyes.

Hon. E J Reyes: Mr Speaker, how many trainees are currently working towards obtaining their NVQs at either Levels 2 or 3 in Mechanical Engineering, and how are they being assisted to complete their course of studies if there is still no instructor/assessor presently delivering tuition in this grade?

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Clerk: Answer, the Hon. the Minister for Economic Development, Telecommunications and the GSB.

Minister for Economic Development, Telecommunications and the GSB (Hon. Sir J J Bossano): Mr Speaker, the number of trainees currently working towards obtaining their NVQs at either Level 2 or Level 3 in Mechanical Engineering is five at Level 2 and two at Level 3.

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A trainee assessor was selected in January 2020 and entered Government of Gibraltar employment at the end of February. Due to COVID-19, he was deployed to the COVID Support Reaction team. Towards the end of May, he was redeployed back to the Gibdock Training Centre prior to the start of the new intake of Level 2.

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The new trainee assessor has been registered with EAL for the award of Certificate in Assessing NVQs (Mechanical). He has undergone induction training into the award and is now working towards achieving the certification by June 2021. All current Level 2 and Level 3 candidates will be assessed by the new qualified assessor, with the exception of those candidates who completed in December 2020, who are currently being assessed by a local external qualified assessor.

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Hon. E J Reyes: Thank you, Mr Speaker. I am grateful to the Father of the House. I wish to add that it is extremely good news to know that this is in place.

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I think it is implied, but just to make sure, is it now established that this individual will remain in a permanent position at the Gibdock Training Centre, or is it just a short-term contract taking on the new instructor/assessor?

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Hon. Sir J J Bossano: It is not a question of short-term contract, it is a question of whether he is successful in getting the qualification he requires – and there is every indication that he will be successful. Of course, it is a good thing because otherwise we would have to start the process all over again and look for someone. It is not easy to recruit someone. We have avoided, so far, bringing people from outside and have used local resources, and we want to continue doing that.

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Mr Speaker: Next question.

Q776-797/2020

Public finances –

Cost and financing of proposed hostel on MoT site; Sinking Fund balances; public, gross and aggregate debt, and cash reserves and net debt; effect of COVID on annual GDP and forecast; cost and financing of Post-Brexit National Economic Plan; GSBA Ltd shareholdings; GoG or GDC-owned companies under investigation re financial irregularities; Barclays Bank loan facility; GIB facility drawdown; Gibraltar National Mint Ltd audit, turnover and profit and loss, economic purpose and reason for joint venture with Gib 3000 (International) Ltd

Clerk: Question 776. The Hon. R M Clinton.

1640 **Hon. R M Clinton:** Mr Speaker, can the Government advise the total anticipated cost of the proposed 20-storey, 665-bed hostel on the site of the MoT centre, and how does the Government expect to finance its construction?

Clerk: Answer, the Hon. the Minister for Economic Development, Telecommunications and the GSB.

1645 **Minister for Economic Development, Telecommunications and the GSB (Hon. Sir J J Bossano):** Mr Speaker, I will answer together with Questions 777 to 797.

Clerk: Question 777. The Hon. R M Clinton.

1650 **Hon. R M Clinton:** As expected, Mr Speaker. There are 22 questions, so I will be as fast as I can. Can the Government advise the balance on the General Sinking Fund on the following dates: 1st June 2020, 1st July 2020 and 1st August 2020?

1655 **Clerk:** Question 778. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise the balance on the General Sinking Fund on the following dates: 1st September 2020 and 1st October 2020?

1660 **Clerk:** Question 779. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise the balance on the General Sinking Fund on the following date: 1st January 2020 and 1st December 2020?

1665 **Clerk:** Question 780. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise the balance on the General Sinking Fund on the following date: 1st January 2021?

1670 **Clerk:** Question 781. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise the balance on the General Sinking Fund on the following date: 1st February 2021?

Clerk: Question 782. The Hon. R M Clinton.

1675 **Hon. R M Clinton:** Mr Speaker, can the Government please provide the total gross debt, aggregate debt after application of the Sinking Fund to gross debt, cash reserves and net debt figures for the public debt for the following dates: 1st June 2020, 1st July 2020 and 1st August 2020?

1680 **Clerk:** Question 783. The Hon. R M Clinton.

Hon. R M Clinton: Can the Government please provide the total gross debt, aggregate debt after application of the Sinking Fund to gross debt, cash reserves and net debt figures for the public debt for the following dates: 1st September 2020 and 1st October 2020?

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Clerk: Question 784. The Hon. R M Clinton.

Hon. R M Clinton: Can the Government please provide the total gross debt, aggregate debt after application of the Sinking Fund to gross debt, cash reserves and net debt figures for public debt for the following dates: 1st November 2020 and 1st December 2020?

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Clerk: Question 785. The Hon. R M Clinton.

Hon. R M Clinton: Can the Government please provide the total gross debt, aggregate debt after application of the Sinking Fund to gross debt, cash reserves and net debt figures for public debt for the following date: 1st January 2021?

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Clerk: Question 786. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government please provide the total gross debt, aggregate debt after application of the Sinking Fund to gross debt, cash reserves and net debt figures for public debt for the following date: 1st February 2021?

1700

Clerk: Question 787. The Hon. R M Clinton.

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Hon. R M Clinton: Mr Speaker, can the Government advise what it estimates as the likely negative impact the COVID-19 crisis will have on annual GDP on a percentage basis?

Clerk: Question 788. The Hon. R M Clinton.

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Hon. R M Clinton: Mr Speaker, can the Government provide a forecast for GDP for the financial year end 2020-21 and 2019-20?

Clerk: Question 789. The Hon. R M Clinton.

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Hon. R M Clinton: Can the Government advise how much it expects its Post-Brexit National Economic Plan will cost and how it intends to finance it?

Clerk: Question 790. The Hon. R M Clinton.

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Hon. R M Clinton: Can the Government provide a list of all company shareholdings owned by GSBA Ltd at 31st December 2020, showing company name and percentage of each company owned?

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Clerk: Question 791. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise if any Government or Gibraltar Development Corporation owned company is currently under investigation for any financial irregularities?

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Clerk: Question 792. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise if the Barclays Bank £50 million loan facility was repaid on 29th June 2020, and has it been replaced with new borrowing; and, if so, with whom and on what terms?

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Clerk: Question 793. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise how much has been drawn down, as at 31st August 2020, of the £150 million facility provided by the Gibraltar International Bank?

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Clerk: Question 794. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise if the Gibraltar National Mint Ltd has been externally audited; and, if so, by which firm and for which financial years ended?

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Clerk: Question 795. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise the economic purpose of Gibraltar National Mint Ltd, and what has been its turnover and net profit/loss in each of the last five full financial years of operation?

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Clerk: Question 796. The Hon. R M Clinton.

Hon. R M Clinton: Mr Speaker, can the Government advise the economic purpose of Gibraltar International Mint Ltd and why is it a joint venture between the Gibraltar National Mint Ltd and Gib 3000 (International) Ltd?

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Clerk: Answer, the Hon. the Minister for Economic Development, Telecommunications and the GSB.

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Minister for Economic Development, Telecommunications and the GSB (Hon. Sir J J Bossano): Mr Speaker, I cannot advise the cost of the proposed 20-storey hostel, and the Government does not expect to finance its construction.

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The balance on the General Sinking Fund on the requested dates was the same as in May 2020. The gross public debt and the aggregate debt on the requested dates were: June 2020, gross £537.7 million, aggregate £525.6 million; July and August 2020, £567.7 million and £555.6 million; September to December 2020, £597.7 million and £585.6 million; January and February 2021, £622.7 million and £610.6 million.

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The cash reserves and net debt on the requested dates were: June 2020, cash reserves £53.7 million, net debt £471.9 million; July 2020, £ 66.6 million reserves, £489 million debt; August 2020, £32.3 million reserves, £523.3 million debt; September 2020, £38.1 million reserves, £547.5 million debt; October 2020, £81.7 million reserves, £503.9 million debt; November 2020, £55.5 million reserves, £530.1 million debt; December 2020, £44 million reserves, £541.6 million debt; January 2021, £45.3 million reserves, £565.3 million debt; February 2021, £26 million reserves, £584.6 million debt.

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I cannot provide an estimate of the COVID-19 negative impact on the GDP or a forecast of the GDP for the current financial year.

1780 With regard to the Post-Brexit National Economic Plan, this information has already been provided.

The GSBA owns 100% of the Gibraltar National Mint.

No Government or GDC company is under investigation to my knowledge.

The Barclays Bank loan was repaid and replaced by a loan from the GSB at 3.15% interest with maturity of five years.

1785 By 31st August the whole of the £150 million facility had been drawn down.

The Gibraltar National Mint has not yet been audited and therefore has not filed accounts.

The economic purpose of the Gibraltar National Mint is the production and sale of Gibraltar coins for the numismatics market.

1790 The company's turnover and net profit/loss ratios in each of the last five full financial years of operation will be available after the audit is completed.

The joint-venture Gibraltar International Mint was the entity that introduced the Gibraltar coins into the international market.

1795 **Hon. R M Clinton:** Mr Speaker, I beg your indulgence, as with 22 questions technically I could have 44 supplementaries, but I am only going to focus on some very specific questions, as most of them were just seeking technical number updates.

1800 If I can turn the Minister Question 776, where he advises the House that he cannot give an estimate of the costs of the hostel and that the Government will not finance it, can he advise the House how this will be built? Is it that he is proposing to use the model that he explained to the House in respect of the Rooke nursing home, in which the land will be purchased by GSBA Ltd and a developer will build the building at their expense and then it will be rented to the Government? Is that what the intention is?

1805 **Hon. Sir J J Bossano:** The first thing, of course, is that the hostel has not gone to planning permission, and therefore whether it will remain with 20 floors or not is not known and we still have not got to the stage of being able to have an idea of the costs. I hope that it will be going to planning permission within a matter of one or two weeks, and then we will see what happens after that.

1810 The intention is the same model, and therefore what the Government will be doing, in effect, is renting space in the hostel like they would be renting space in the home. The intention is that the long-term lease on the land will be held by GSBA. Clearly, the development will have the support of my Ministry, which will be sponsoring the project and providing support and backup, like I am doing already with the old people's home, and that will be true of all the other projects as they are delivered, all of which should have been proceeding at a much faster rate than they are, regrettably, but I hope to start catching up later on this year.

Hon. R M Clinton: Mr Speaker, I am grateful to the Minister for that clarification, and that he is in fact using the same business model or structure as he is for the Rooke nursing home.

1820 Can I ask him: has GSBA already purchased the land that has been identified, i.e. the site of the MOT Centre, I guess the site of the MOT Centre is still in use, has anything actually been put in place, and so is the purchase. At the moment, is he able to identify who would be building, or who would be dare I use the word 'partnering' in this project to construct this hostel?

1825 **Hon. Sir J J Bossano:** There has been no transaction, again because the transaction will start once we know that it is going to happen because it has been approved. We may find that we need to adjust where it was going to be on the original site in the light of objections that had been put and that kind of thing. Once we have a definitive decision on where the footprint is going to be, then we will have the negotiation with LPS to get the valuation of what the land is.

1830 In terms of the actual nature of the construction, this will be modular, so it will be the same company that is doing the elderly residential home – which is not a nursing home, incidentally; a

nursing home is for people who are basically at the later stage, in terms of deteriorating health, and this is really for ... There may be a need to provide some part of the home for people with less mobility and that kind of thing. It is not intended to be a place where you have doctors as part of the staff of the place, but there will be, and there is already, provided a room for doctors to be able to come and deal with patients in the home and the home not having to have people being taken to hospital, even though it is very near.

Hon. R M Clinton: Mr Speaker, just one final one on this one. I am grateful to the Minister for his answer. He may not have the information available, but can he advise what the expected lifespan is for modular-construction buildings? I notice that this building, 20 storeys of it, is obviously a lot more than the Rooke nursing/care home, whichever way we want to describe it, although on the architect's drawings I must point out it is called a nursing home. Does he have an idea what the lifespan of these sorts of building methods is compared to the more traditional, concrete/mortar type approach?

Secondly, is it then exactly the same entity that is doing the Rook site as will be doing this one? By that, I mean not the method of construction but the actual developer.

Hon. Sir J J Bossano: The modular building is very advanced. You can have a type of modular building that will have a guaranteed life of a thousand years, and the cost is commensurate with that sort of guarantee. We would not expect to be using stainless steel with a thousand-year life to build a hostel, but it is available in the sources that we have accessed. We are looking at something that will have maybe a 60- or 70-year life in terms of the hostel.

The modular components have not yet been identified because the design and everything else has to receive approval, but it will be the joint venture that we have here that will be responsible for actually putting it together. It is likely to be different, in terms of methodology, from the other one. It will be what is called a flat pack. The rooms will not be ready-made, there will be there more assembly needed here, but it could be that the whole thing is a steel structure, as opposed to the home, which is going to have a concrete structure and the individual rooms will be modular components.

Hon. K Azopardi: Mr Speaker, if I may, just before my hon. colleague moves on to a different subject, I think the last time there was an exchange on the issue of the hostel was last year some time, so I wanted to ask the hon. Member if, because of the size of it – it is 665 rooms – that project would be affected in any way if the Government were to enter into a post-Brexit agreement, if the framework agreement matures into a treaty? The hon. Member I think expressed both publicly, and indeed I think in this House, that part of the rationale might have been for workers and so on, cross-frontier workers who may be based here, maybe because of difficulties. If, however, there is a treaty, does the hon. Member think that would affect in any way the project's size, if not the project?

Hon. Sir J J Bossano: The answer is no. There are no plans to reduce the size if there is an agreement that provides fluidity at the Frontier. I think there is a need for a hostel here in Gibraltar independent of how many people come or do not come across. Of course, if they did not come across, we might need 10 of them.

Hon. R M Clinton: Thank you, Mr Speaker. I will move on to other questions.

I am grateful to the Minister for providing all the Sinking Fund, net debt, gross debt and cash reserve numbers, which I obviously ask at each session but they are all lumped together in this one.

At the risk of stating the obvious, the net debt figures are off the scale compared to normal years, but I think we all know the reason for that. My question would be not in relation to that, but in relation to the Sinking Fund. Does the Minister have an intention of increasing the level of

the Sinking Fund so as to be in a position, for example, to repay the RBS facility which will come due in three years' time?

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Hon. Sir J J Bossano: The hon. Member will have already worked out that we have not contributed to the Sinking Fund since 2019, and that the House provided for a contribution both in 2019-20 and 2020-21, which has not yet happened. I wish that it would happen, but it may not be possible for it to happen. The hon. Member is provided with the same numbers that I am provided with, so I do not need to persuade him of what the numbers look like – he can do that as well as I can.

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I think it would be difficult, in the context of the revenue and expenditure situation we are facing today in terms of recurrent expenditure and recurrent revenue, to think that we are going to have money left over in order to increase the contributions to the General Sinking Fund. I would hope to at least be able to retain the level we were having before, but even that may not be possible. We are two weeks away from closing the financial year and anything that we might project for next year will be estimates that would be better described as guesstimates, because there are not based on facts, they are based on speculation about probability of things happening over which we have no control. We know what is happening in the labour market today but we do not know what is going to be happening in the labour market in a year's time. We do not know whether there are going to be cruise liners in a year's time. We know that we have airlines saying they are coming, but we do not know how full they are going to be or how empty they are going to be, or how long they are going to be around. The last two years have seen a situation where, for example, when our visitor arrivals from the UK reached their peak, the next month Monarch disappeared and we lost 40% of our traffic overnight. Things like that mean that you cannot realistically expect to get a particular outcome. I think at this stage of the game we can only say what we would like to be able to do as a minimum, and as a minimum we would like to see a continuation of what we have been able to put aside for [Inaudible], but if it is not possible, it is not possible.

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Hon. R M Clinton: Mr Speaker, I am grateful to the Minister for his analysis. I will move on to other questions of less purely debt-related numbers.

In respect of GDP, Questions 787 and 788, the Minister advises that he can neither give an estimate as to the effect of COVID on GDP or in fact what the GDP might be for the financial years 2019-20 and 2020-21, but can the Minister advise the House ...? What is his sense of the economic impact on Gibraltar? Is it worse than the UK? The UK is already talking about -9% or -10%, or maybe even more. Are we in that realm, or double that? Does he have a sense of the ...? There is obviously a negative impact, but how negative would he think it could be? I know he says he cannot give an estimate to the House, but he must have his best guesstimate as to what he thinks the position will be. In fact, has the Statistics Office produced a draft of the GDP for 2019-20?

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Hon. Sir J J Bossano: I think [Inaudible] does, but we use a different methodology of calculating the GDP than they do in the UK in terms of the data that we have, not in terms of the component [Inaudible] but how we arrive at calculating those elements. In the UK, they have surveys of a small percentage of businesses and so on covering all the different sectors all together. This is then revised many times. Ours is only revised because of late delivery of information, not for any other reason. So, because we say the GDP is composed of self-employed earnings, company profits and employed people's earnings. So, those are the four elements. If the companies are late, then the system thus makes an assumption about whether the ones that have not yet reported are going to be showing the same performance as the ones that have already reported. That is the only element in it that is guesswork, and this is the only kind of revision that ever takes place.

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On that basis, when we are talking about COVID, in fact it is not COVID, of course, it is the lockdown. Even if we had had no COVID in Gibraltar, the fact that other people had it and stopped travelling would have affected us.

1935 I think we are going to do better than the UK. That is my gut feeling, but I do not have any numbers to make me believe it is something that I can say is a prediction – and since my predictions have always been 99%, I am not going to make a prediction that is going to be out.

1940 I also need to remind the hon. Member that in the election campaign and in the National Economic Plan I have made a point of saying we are focusing on a different metric rather than on GDP, where we are saying GDP keeps on growing because we keep on having more people coming in. And to some extent it is not an entirely accurate picture of what is happening in Gibraltar because the calculation of the GDP of Gibraltar on a per capita basis is based on residents, whereas the output is not the output of the residents, it is the output of twice the number of resident workers because half of them are on the other side. It is not something we have invented, it is something that happens in Luxembourg, happens in Singapore and happens in all these places that have a large frontier worker population. The emphasis that I think we should be having is on efficiency and output per worker. I think it is better for Gibraltar to have the same GDP one year after another, but the second year it is produced by fewer people and therefore shared on a per capita basis at a higher level.

1950 So it is a different approach. We are still going to publish all the statistics that we have published in the past with the same things, but in fact as far as the Economic Plan is concerned, what it is trying to do is increase output per person, not increase global output by adding more input of more workers.

1955 **Hon. R M Clinton:** Mr Speaker, I am grateful, as always, for his analysis and commentary on the GDP.

1960 If I can move on to Questions 789, in relation to his Post-Brexit National Economic Plan he tells the House that it has been published. Can he clarify what he means by that? Does he mean in the election manifesto? If so, I must confess I did not see a number in there. There was a debate we both participated in, where the number £500 million came up and then subsequently there was perhaps some confusion as to what the £500 million represented, whether it was a number of investment or a GDP growth number, but certainly I do not have any recollection of an actual number being put in the plan in terms of the total costing. Certainly there is a methodology in the manifesto, but not costing per se. So, if the Minister could clarify what he means by ‘published’,
1965 or where it was published, in terms of financing again.

Hon. Sir J J Bossano: Mr Speaker, I told him when he was sitting next to me on GBC that it would not be financed by the Government, and the position has not changed. If it changes, I will let him know.

1970 In terms of the value, the quantum of £500 million is the impact on the output, which is the value of the money that is going to be invested in creating the assets. It will have that initial impact and then it will have a subsequent impact depending on whether the product is one that ... For example, if we are creating storage and people buy storage, that has an initial impact on the economy, but it is ultimately financed by the people who buy the storage, and then, depending
1975 on what the storage is used for, it has additional impact if it creates employment because somebody employs storemen, or it does not create employment because the guy who buys it is putting all his stuff in his house, for which he has no room.

1980 We are at a stage now which is very little advanced from where we were in the election, I regret to say, because the lockdown has simply brought every movement in the construction sector to a halt, and the sourcing of materials – we would have gone through stages of sending people and visiting the place where the materials were being made and so forth – has not happened because travel is not possible, and therefore we are having to be more careful if we are doing things remotely and online than if we could go and see it for ourselves. We have not been able to pursue the idea of having a facility in which we would be investing, which would be supplying Gibraltar
1985 and would be nearer to Gibraltar than where we are coming from.

All those things mean that we are at the same starting point we were at when we were sitting next to each other in the studio, basically. I still am determined to believe that in three years what should have happened in four.

1990 **Hon. R M Clinton:** Mr Speaker, if I can move on to some other questions, not the economy but some other general questions, in terms of Question 791 the Minister has answered no. Can he advise if any have been under investigation in say the last two or three years, and what has been the outcome of those? And has the Government got full confidence in GJBS?

1995 **Hon. Sir J J Bossano:** So, this was a underhand way of asking about GJBS, yes? All right, well, the answer is the Government has no reason not to have full confidence in GJBS. GJBS is a company that has proved to be so good and so efficient that the GSD, who tried to eliminate everything that I had started, kept it going for 15 years. It is as good now as it was in those 15 years and as good as when those dedicated workers, when the dockyard closure happened in the 1980s, were wise enough not to take the redundancy pay and instead accept retraining and move from being the joiners' shop in the naval dockyard to being the joinery and building company that has been responsible for delivering many of our projects here. Okay, it has had recent problems with contracts, but nothing as bad as all the important companies have had before, including the companies that GJBS had to step in and salvage Government projects from when the GSD was in government. When the GSD was in government, the companies that went bust included companies that were getting money from the Government after they went bust – and owned by foreigners, not owned by the state.

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2005 The only safe way to do construction, in my view, is modular, so I hope everybody adopts my philosophy.

2010 **Hon. R M Clinton:** Mr Speaker, I am grateful to the Minister for his answer. Can he advise, in terms of the problematic contracts he mentioned, whether any of those have occurred in the last three years and what the quantum of the problem was or is? And, if so, can he confirm or deny whether anybody from Treasury has been seconded to GJBS?

2015 **Hon. Sir J J Bossano:** Mr Speaker, it is not for me to say what the company has problems with its customers. We have companies that have been doing things for us that are now saying we have to pay them more money because there were things that we had to change, or we wanted to change, which were not in the original ... These things happen in construction. In some cases, it makes the result of the project not as profitable as was originally envisaged – and I am not talking about GJBS, I am talking about people who have been building things for us who are now in dispute with us over whether we owe them money because we asked them to change things and then we did not pay them. That kind of thing happens in the construction industry. With GJBS it has happened on some occasions, less than with almost any other construction company in Gibraltar.

2020
2025 As far as I am concerned, Mr Speaker, I am answering the hon. Member's questions as the Minister for Economic Development, and I am not the shareholder of GJBS, nor its general manager; nor am I here to answer questions over the performance of the company.

2030 **Hon. R M Clinton:** Mr Speaker, then I must ask the Minister why he is answering my question if he is not responsible for any company that is under investigation of any financial irregularities. I would point out to him that GJBS is owned by Gibraltar Holdings, which is a Government company.

2035 **Mr Speaker:** I think that is an unreasonable –

Hon. R M Clinton: No, not at all, Mr Speaker.

Mr Speaker: Yes, it is. The Father of the House is a person who likes to explain. He does not hide behind the questions, so he is very helpful, but I think you are digressing.

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Hon. R M Clinton: Mr Speaker, I respectfully disagree, but anyway he did not have an answer to –

Hon. Sir J J Bossano: I have said there are no investigations. If there were, I would know.

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Hon. R M Clinton: Okay, just one final one on this, Mr Speaker. I did not hear an answer on whether anybody had been seconded from Treasury to GJBS.

Hon. Sir J J Bossano: I am not aware of anybody being seconded to GJBS, Mr Speaker.

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Hon. K Azopardi: Can I just ask, because I think it is in the public domain that people have been drafted in to GJBS. If it is not an investigation, it is to assist them with what exactly?

Chief Minister (Hon. F R Picardo): Mr Speaker, I think the issue has been touched upon by the Hon. the Father of the House. The difficult trading circumstances in which we find ourselves have meant that projects have not been able to continue in the normal way, and that requires assistance to ensure that this particular company, which is owned by the taxpayer, does not experience the problems that other companies in the sector may be experiencing.

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In this context, although in many instances the client of this company is the Government, there are some instances where the client is not the Government and those projects which have been the operational work of GJBS have also been impacted by the pandemic and other usual building difficulties. Some of the projects have been impacted by the pandemic where the client is the Government and we just need to make sure that this company is able to trade through this difficult period in a way that all of the shareholders of the company, all the taxpayers of Gibraltar and all the citizens of Gibraltar would expect, which is to ensure that we are supporting the company through this very difficult period – difficult for all companies in our economy, not just this one.

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Hon. K Azopardi: That explanation suggests almost a role as a quasi-administrator. Is that what the Chief Minister is talking about?

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Hon. Chief Minister: Mr Speaker, absolutely not. Here, the shareholder is providing assistance, that is not an administration by any stretch of the imagination. Hon. Members know the consequences of the words they use. ‘Administrator’ has a meaning in company law which has absolutely no application whatsoever by any stretch of the imagination to GJBS, ‘financial irregularities’ has a meaning which has absolutely no application whatsoever to GJBS, and ‘investigation’ has a meaning which has no application whatsoever to GJBS. Here, what we are dealing with is a representative of the shareholder providing its assistance to a company where we are the shareholder, to ensure that through the particularly difficult period they are able to continue trading as successfully as they have done in the past in the assistance of successive administrations of Gibraltar, the first GSLP administration, the first – and I hope only – GSD administration, and the second GSLP Liberal administration.

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Mr Speaker: Will the hon. Gentleman continue with his supplementaries?

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Hon. R M Clinton: Mr Speaker, I just have one final question on this matter. Can the Government advise whether they have made any kind of capital injection into GJBS, or any loan?

Hon. Chief Minister: Mr Speaker, no, sir.

2090 **Hon. R M Clinton:** Mr Speaker, I want to move on now to Question 792 in respect of the repayment of the Barclays Bank facility. The Minister has kindly advised the House that the Savings Bank has in fact replaced Barclays Bank in providing £50 million to the Government. The Minister may have it in front of him, and I know at the end of the session I will get the Savings Bank's accounts, but can he advise what the total amount of lending to the Government now stands at
2095 by the Savings Bank, in terms of holding Government debentures?

Hon. Sir J J Bossano: No, I cannot, but it will be what it was before plus £150 million, obviously. The rest has [Inaudible]

2100 **Hon. R M Clinton:** Mr Speaker should be delighted to hear I am coming towards the end of my supplementaries.

The Gibraltar National Mint Ltd, as the Minister has already said to the House, is owned by GSBA Ltd, but the House may not remember the GSBA Ltd is in turn owned by the Savings Bank 100%.

2105 I must admit I was very surprised by the Minister's answer, saying that the National Mint had not yet been audited. This is a company that was incorporated in April 2013. This is a company that deals with precious metals, I presume, or gives out contracts for the minting of coins made in precious metals, in gold, silver, presumably platinum or any other precious metal, and the margins on this sort of business ... Looking at the sort of margin the Government can earn on just circulating
2110 coins, which is in the Book, the turnover could be quite significant, as could the profits or losses.

Is the Minister comfortable that there has been no audit at all of this entity, an entity which, at least as per Companies House, has an issued share capital of £850,000? This is a company probably, I would estimate, with a net asset value, I would hope, of more than £1 million. Is the Minister seriously telling this House he is not concerned that this company gets properly audited
2115 and files accounts at Companies House? And if it is not audited, how on earth is the Principal Auditor going to come to a view of the assets of the Savings Bank, when this significant subsidiary of GSBA has not been audited?

Hon. Sir J J Bossano: I do not think the Principal Auditor will have any problem, because if he
2120 had had a problem he would have said so himself. But in any event, given that the Principal Auditor audited the accounts of the GSD for 15 years without any one single company having had its accounts completed or audited, and the only accounts they audited were the ones I left in 1996, which they criticised me for ... As is the norm in the methodology of the GSD, they criticised me for being late because I was a few years late when we were in government, so they came in and
2125 since they were better at everything than we were, they did it for 15 years, so they were 15 years late. This is no more desirable, undesirable or reprehensible and unprincipled than what the previous Government was doing, except that we have still got time to catch up with the 15-year record they have.

2130 **Hon. R M Clinton:** Mr Speaker, that kind of response is getting a bit tired; we have heard it time and time again.

This is a company that he himself, or presumably under his Ministry's direction, incorporated, because it comes under the Savings Bank and he is responsible for the Savings Bank. But the Savings Bank has the people's money in it and this is an entity which is using the people's money,
2135 I presume – unless he is borrowing from somebody else – and making investments.

This week, we have seen this boxing coin produced in London. Throughout the pandemic we have seen all sorts of coins being produced, so his business has not stopped because of the pandemic – in fact, it just continued with business as normal, which is great, but I would like to share in congratulating him on his success by seeing exactly what results it is producing. There is
2140 no point in him sitting on that side of the House as the Government, managing the people's money and not wanting to tell us what he is doing with it. That is not the way it works.

2145 As to what may have happened 20 years ago, I do not think people care. People want to know what he is doing in his administration. This is an entity that he has incorporated. This a business that is really active, by the looks of it, and frankly, every other week on Facebook we see a new coin being launched, and yet since 2013 – 2013, Mr Speaker, we are talking eight years – you have not had time to have this entity audited. Is there an issue with it? Frankly, I have to ask the question: is there an issue? Was the audit too expensive? Could you not find an auditor willing to do it? Do you not believe in audits? I do not understand, Mr Speaker. How can he have an entity as important –?

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Mr Speaker: Can we have the question now, please?

Hon. R M Clinton: Well, fine, I will give you the question, Mr Speaker: is there any reason why this company has not been audited?

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Hon. Sir J J Bossano: Mr Speaker, people will not be interested in what happened in the previous 20 years, but people have to be reminded of the standards of the Members opposite and the U-turns that upset so much the colleague he has next ... but whatever he may think about the U-turns I do, their U-turn is that when they were in government they spent 15 years not auditing one single company. We come in, we audit all their companies, and this one is late. If it is such a terrible crime that this one should be delayed, then it is a miniscule crime by the same criteria being applied to the party in government to which he belongs. He cannot say that people are not interested in what was happening before. I am saying the judgement that you make of what you do when you are in government is a judgement that I am entitled to judge you by when you are in opposition and you try to change the colour of your skin [Inaudible] But I can tell him that, so far, I have a record of making money and not losing money. When the accounts come out, he will be, I am sure, very happy to see how well it has done, but I am not prepared to talk about how well it has done until an auditor certifies that it is true, correct and accurate.

2170 **Hon. R M Clinton:** Well, Mr Speaker, I look forward to the day when he will judge me, when I am in Government. *(Laughter and interjections)*

Mr Speaker, can I ask the Minister – moving on to hopefully my last supplementary and the last question – in terms of the Gibraltar International Mint Ltd, what is the actual commercial relationship with the National Mint? Is there a contract in place? What value does it add? Is there any cost to the Gibraltar National Mint? Is this company active or dormant? Has it made a profit? What expertise does it provide to the Gibraltar National Mint?

2180 **Hon. Sir J J Bossano:** When we started, we were making profits in the thousands, a few thousand pounds, and we had no knowledge of what the potential of the market was. We were approached by somebody who was interested in marketing our clients and indeed helping us to expand the work that was being done in coinage. Initially, we were looking also at creating not just collectors' coins but coins that people would invest in for their metal value. The result of that joint venture, which actually has finished up not making a profit because it was marketing and teaching us how to market and introducing us to different companies – introducing me, basically. I went out with the team of people who were introducing me to where we could sell coins, and then we started, with them, the first presence at the Berlin World Money Show, which is the biggest one in the world, attended by something like 30,000 people, and we had a stand there. Then, when I learnt everything that was to be learnt, I decided that we could do better by ourselves, so we then terminated the relationship.

2190 At the end of the day, nothing we are doing now, frankly, would have been possible for me to do if I had not learnt how to do it with a partner, but we came to the conclusion eventually that, other than having made the contacts possible for us, there was no other expertise there which justified us paying a fee to the joint venture for all the marketing; we could do it on our own. Thus,

2195 what we do now is go once a year to the Berlin Money Show and we take people from the Treasury, and we are now doing more business than when we were with a partner. The partnership is no longer functioning, and once the accounts are finished, probably the joint venture will no longer be needed.

Mr Speaker: Next question.

Q798-99/2020
Government-owned companies –
Early exit schemes

2200 **Clerk:** Question 798. The Hon. K Azopardi on behalf of the Hon. D A Feetham.

Hon. K Azopardi: Mr Speaker, how many employees of Government-owned companies since November 2011 have been the subject of an early exit scheme, identifying the company concerned?

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Clerk: Answer, the Hon. the Minister for Economic Development, Telecommunications and the GSB.

2210 **Minister for Economic Development, Telecommunications and the GSB (Hon. Sir J J Bossano):** Mr Speaker, I will answer with Question 799.

2215 **Hon. K Azopardi:** In relation to those employees of Government-owned companies who have been the subject of an early exit scheme, please state how many of those were (a) aged 60 or over, (b) aged 45 to 62, (c) below 45 years of age, and what correlation there has been between age and lump sum payable?

Clerk: Answer, the Hon. the Minister for Economic Development, Telecommunications and the GSB.

2220 **Minister for Economic Development, Telecommunications and the GSB (Hon. Sir J J Bossano):** As at 30th November 2020, a total of 69 employees of Government-owned companies have been subject of an early exit package since November 2011. The breakdown of employees by Government-owned companies is as follows: Gibraltar General Support Services Ltd, 44; Gibraltar Mechanical and Electrical Services Ltd, 16; Gibraltar Cleansing Services Ltd, nine. Of the 69
2225 employees of Government owned-companies subject to an early exit scheme, the following is a breakdown by age group: 62 and over, 12 individuals; 45 to 62, 57; and there are none below 45.

The correlation between the payment and the age of the recipient is as follows. At age 61 the payment is a lump sum equivalent to one year's basic salary if under 64. If over 64, then the lump sum is equivalent to the basic salary for number of weeks left to the 65th birthday. At age 52 to
2230 61, the lump sum is equivalent to the basic salary for the weeks remaining to the 61st birthday, subject to a maximum of three years and a minimum of one and a half.

Mr Speaker: Next question.

Q800-01/2020

**Intended funding re supported employment for persons with learning disabilities –
Median income in Gibraltar 2015-20**

Clerk: Question 800. The Hon. K Azopardi.

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Hon. K Azopardi: Mr Speaker, what plans and funding is Government putting in place in terms of sheltered or supported employment for persons with learning disabilities from 1st January 2021?

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Clerk: Answer, the Hon. the Minister for Economic Development, Telecommunications and the GSB.

Minister for Economic Development, Telecommunications and the GSB (Hon. Sir J J Bossano): I will answer this question with Question 801.

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Clerk: Question 801. The Hon. K Azopardi.

Hon. K Azopardi: What was the median income in Gibraltar in each calendar year from 2015 to 2020?

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Clerk: Answer, the Hon. the Minister for Economic Development, Telecommunications and the GSB.

Minister for Economic Development, Telecommunications and the GSB (Hon. Sir J J Bossano): Mr Speaker, Government intends to maintain the provision of funding for the Supported Employment Company. Sheltered employment is normally paid for by the private sector employer after an initial training period.

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The median income derived from the Employment Survey Reports for the years 2015 to 2018 are as follows: 2015, £21,091; 2016, £21,230; 2017, £21,995; and 2018, £22,807.

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Hon. K Azopardi: Can I start with that one first? I think the hon. Member said from 2018 – did he? Or from 2015? I have four. I made a note of four instead of five.

Mr Speaker: That is correct, it is four.

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Minister for Digital and Financial Services (Hon. A J Isola): Fifteen to eighteen.

Hon. K Azopardi: Yes, but I asked for 2015 to 2020.

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Hon. Sir J J Bossano: Well, yes, Mr Speaker, the answer says the source of information is the Employment Survey, and the last Employment Survey we have got finished is the 2018 one.

Hon. K Azopardi: Okay, so the answer is you are unable to provide those figures for that reason. Okay, I understand.

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In terms of the sheltered supported employment, the Minister confirms the maintenance of the Supported Employment Company, which I am grateful for. The reason for this question was that I had read ... Perhaps there has been a misinterpretation, but I heard a remark made, I thought attributed to the Minister, as to the period after 2021, almost suggesting that post our departure from the EU it would have an impact on the plans for supported employment. But he confirms that that is not true, that the Government will continue the programme – is that correct?

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2285 **Hon. Sir J J Bossano:** There are two elements: the ones where the Government gives an indefinite contract to somebody, and that is 100% funded by the House, by the money voted to the departmental budget; and the other one is where we are helping people by putting them into private sector employment and, in effect, providing a subsidy. That subsidy was being done with EU funding. We have now got £500,000 from the UK initially – hopefully, we will get more, but in any event we are committed that if there is any retrenchment in terms of the volume that we do, it will not be for those people. They are a very small part of the overall expenditure that we have in giving work subsidies and in giving training. There are no circumstances in which that element of the package is at risk.

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Mr Speaker: Next question.

Q802/2020

**Bishop Caruana Road residential home for the elderly –
Outdoor facilities**

Clerk: Question 802. The Hon. Ms M D Hassan Nahon.

2295 **Hon. Ms M D Hassan Nahon:** What outdoor facilities will be available at Government's planned project for the elderly at Bishop Caruana Road?

Clerk: Answer, the Hon. the Minister for Economic Development, Telecommunications and the GSB.

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Minister for Economic Development, Telecommunications and the GSB (Hon. Sir J J Bossano): Mr Speaker, there are no outdoor facilities within the area of the plot on which the new elderly persons residential home is planned to be built, but there will be, hopefully, an extensive public garden area on the Rooke site if one of the proposals is approved and proceeds as planned.

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Hon. Ms M D Hassan Nahon: Mr Speaker, will the Government be consulting stakeholders in terms of ensuring that the design achieves the quality of life that these residents merit? I do remember that the DPC it was shared, and I quote from the *Chronicle* on 4th September – by one of the architects, I believe – that it is 'purely a functioning nursing home; we cannot have restaurants or amenities'.

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There is a lot of concern in the community that there is going to be very little community space. Can Government make us rest assured that there will be a thought process that goes into ensuring that the speculation that this care home might just be a 'warehouse' – and I quote again one of the respondents in the DPC ... that there will actually be thought going into the design to ensure that the residents do have quality of life?

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Hon. Sir J J Bossano: The facilities that are planned are better than anything that exists today. That is something that I can tell the hon. Lady. Each individual room will be bigger than anything that exists today, and each one has the facilities such as showers and everything in the room, and there are common areas.

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It is of course something that is intended to be privately owned and privately operated, and we are just making sure that the standards that are being applied are the best standards taken from the standards that are required by the care organisation of the government in the United Kingdom that inspects these places and makes sure that there is the level of facility that gets them the qualification to be considered to be providing good, very good or unsatisfactory ... We have asked the people who have designed it to look to the UK for the design, and indeed to go to the

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2330 UK for everything that is going to go into the building down to the last nut and bolt by ensuring British standards as part of the ... The reason why the preparatory part has been taking as long as it has been is because we are checking that everything that is being done is being done to the best standards required in the United Kingdom.

Mr Speaker: Next question.

DIGITAL AND FINANCIAL SERVICES AND PUBLIC UTILITIES

Q803/2020 Cyber security – National strategy

Clerk: Question 803. The Hon. Ms M D Hassan Nahon.

2335 **Hon. Ms M D Hassan Nahon:** Can the Government confirm whether a national cyber security strategy is being developed; and, if so, when we can expect this to be in place?

Clerk: Answer, the Hon. the Minister for Digital and Financial Services and Public Utilities.

2340 **Minister for Digital and Financial Services and Public Utilities (Hon. A J Isola):** Mr Speaker, the Government is currently updating and upgrading its National Cyber Security Strategy in order to build upon our digital society, which will continue to increase resilience to cyber threats and will be equipped with the knowledge and capabilities required to maximise opportunities and manage risks.

2345 Gibraltar, as any other country, is critically dependent on the internet. However, the internet is inherently insecure. Although the threats can never be eliminated, the risk can be mitigated, and the systems are in place to respond to such a breach were it to happen. The Government hopes to complete, the implementation of the new strategy, within the next 12 months.

2350 **Hon. Ms M D Hassan Nahon:** Mr Speaker, I thank the Hon. Minister for his answer. He is right that it is a crucial policy that we need in place and that virtually every government in the modern world has already developed a national cyber security strategy.

2355 I ask him if he would be forthcoming in assuring us how we will manage to have a cyber-strategy in place within the next 12 months. I know that, like I said earlier, since 2017 the RGP has been crying out for one, and in their Policing Plan of 2020 they repeated the call, so what can the Minister tell us in terms of what has changed, in that over four years there has been such a demand for it and now we are assuring people that it will be completed within the next 12 months?

2360 **Hon. A J Isola:** Mr Speaker, what will be completed in the next 12 months is the *new* cyber strategy. There has always been a security policy in place and there continues to be one today. That is what ITLD work towards. What we are doing is reviewing it, updating it and making it more secure, mitigating the risks, improving the processes, so that in the event of a breach we are able to respond to it quickly.

2365 I think we need to be clear that you never finish. The minute this is fully implemented we will need to begin to work on the next one because, as you know, these risks and these threats are changing as technology moves and you need to be vigilant. You have to assume you are going to be breached, and therefore you need to also improve, at the same time, the processes, the systems and how you are going to respond.

2370 What the police report is seeking to call for is a co-ordinated approach, not a new strategy but
a co-ordinated strategy, which is coming through down from the Civil Contingency Council, where
it is feeding down to all the different Departments to ensure there is cohesion and co-ordination,
so that if there is a significant breach, the process that you use to deal with that breach is to
engage with all your stakeholders in the community, all the different Departments in Government
2375 and elsewhere to ensure that you are best placed to deal with that breach.

My point would be that we do have a strategy today. It is in place today. We are improving and
enhancing, and we hope that will be done within the next 12 months, but it will remain a live
document in the sense that it is always being worked on and always being improved.

ADJOURNMENT

Chief Minister (Hon. F R Picardo): Mr Speaker, I move that the House should now adjourn to
2380 Monday the 22nd at 3.30 in the afternoon. I wish all hon. Members a restful weekend.

Mr Speaker: I now propose the question, which is that this House do now adjourn to Monday,
22nd March at 3.30 p.m.

I now put the question, which is that this House do now adjourn to Monday, 22nd March at
2385 3.30 p.m. Those in favour? (**Members:** Aye.) Those against? Carried.

This House will now adjourn to Monday, 22nd March at 3.30 p.m.

The House adjourned at 6.30 p.m.