



PROCEEDINGS OF THE GIBRALTAR PARLIAMENT

AFTERNOON SESSION: 3.00 p.m. – 7.00 p.m.

Gibraltar, Wednesday, 23rd October 2024

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The Gibraltar Parliament

The Parliament met at 3 p.m.

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

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

[ASSISTANT CLERK: K Balban Esq *in attendance*]

PRAYER

Madam Speaker

CONFIRMATION OF MINUTES

Clerk: Meeting of Parliament Wednesday, 23rd October 2024.

Order of Proceedings: (i) Confirmation of Minutes – the Minutes of the ninth meeting of the
5 15th Parliament, which was held on 25th and 26th September 2024.

Madam Speaker: May I sign the Minutes as correct?

Clerk: (iii) Communications from the Chair.

BUSINESS CONDUCTED

10 **Madam Speaker:** Yes. Against the substance of what is discussed in this House, and indeed the
importance of its general business, what I am about to say may seem insignificant to some of you.
Whilst I am not responsible for the content of questions, answers and debates, I am responsible
for the manner in which business is conducted in this Chamber.

In the May session, I reminded Hon. Members of the need to use the correct form of address,
and I specifically reminded Hon. Members that they should address each other through the Chair.
15 That reminder appears, to a large extent, to have been ignored.

In the last session in September, I counted 28 times in which Hon. Members referred to each
other as you, she, him, and her, and 11 times in which Hon. Members failed to use the prefix
honourable. Trite that that prefix should be used in address. He, she, him, her should never be
used to front a question or an answer.

20 'You' should never be used, as the rules of behaviour and courtesies of the House of Commons
point out this is not just an archaic convention, it is essential in maintaining the civil tone and
objectivity of debate. It also avoids personal attacks as opposed to political criticism.

I have gently reminded Hon. Members of this in the past. You will notice that I am looking at
the Mace and not at anybody on either side.

25 This is no longer a reminder, gentle or otherwise. It is a requirement. I insist on the correct
form of address being used, and I trust that due note has been taken.

Staying with the question of address, I have noticed that the Opposition Bench sometimes addresses the Government bench as hon. Member. I am cognisant that there is a view that this is perfectly proper because both Opposition and Government are *de facto* Members of this House.

30 Whilst that is true, and it is proper to refer to the House collectively as Members, Members is a wide term within which there necessarily must be differentiations. For example, I am a Member, but I am addressed as Speaker.

It is, in my view, important to identify the specific from the generic, and so Government Members should be addressed as the Hon. Minister or the Hon. the Chief Minister and Opposition
35 Members should be addressed as the hon. Member or the hon. the Leader of the Opposition.

Finally, but very importantly, I ask that all Hon. Members note and pay heed to the fact that when the Chair interrupts an Hon. Member who is on their feet, they should resume their seat immediately and give way to the Speaker without argument.

40 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I can rise on behalf of all Members to thank you for that salutary reminder. Although, as you say, it is a salutary reminder of what is now a requirement and say on behalf of all of us that I think we all recognise that form matters. In particular it matters on formal occasions and Parliament is, we must always remind ourselves, the most formal of occasions. I have no doubt that all of us will, on both sides of the House, seek to
45 do everything that we can to comply with that ruling.

Madam Speaker: Yes.

Clerk: (iv) Petitions, (v) Announcements, (vi) Papers to be laid – the Hon. the Chief Minister.

Chief Minister (Hon. F R Picardo): Madam Speaker I have the honour to lay on the Table:

1. The Annual Report of the Independent Monitoring Authority for Citizens' Rights on the 12-month period from January 1st to December 31st 2023;
2. The Integrated Tariff (Amendment No.3) Regulations 2024.

Madam Speaker: Ordered to lie

CHARITABLE ENDEAVOUR

50 **Chief Minister (Hon. F R Picardo):** Madam Speaker, before the rest of the proceedings come into play, I just note that one of our number – I will not say 'Members' – has suffered an accident and has broken his leg. And in particular, we will all want to remind ourselves that he has done that in the process of a charitable endeavour, trying to raise money by playing football, which just highlights how dangerous sport can be, Madam Speaker; and I am sure that all Members of the
55 House on both sides of the House wish Mr Origo well and thank him for taking part in the charitable activity, and hope that the next time he does so he is not dissuaded from doing so from the accident he has had this time round.

Madam Speaker: Yes.

60

Hon. D J Bossino: And simply on behalf of the Opposition, I would like to thank the Chief Minister for his very kind remarks in relation to one of our number who happens to sit on this side

of the House, and I am sure that he will receive that with gratification from the Hon. the Leader of the House.

65 **Clerk:** (ii) Reports of Committees; (iii) Answers to Oral Questions.

Questions for Oral Answer

HEALTH CARE AND BUSINESS

Q766-67/2024

Water Gardens Small Boats Marina – Mooring works and costs

Clerk: Questions to the Minister for Health, Care and Business.

Clerk: Question 766. The Hon. D J Bossino on behalf of the Hon. E J Reyes.

70

Hon. D J Bossino: Madam Speaker, the Order Paper, the notice of questions, in fact it is that the interim notice of questions which we received is not in chronological order. (*Interjection*) So it may take some time to identify where Question 766 is. Could the Clerk tell me which page? (*Interjection*)

75

Oh, it is in page 6. The Hon. the Chief Minister's assistance on that occasion was not of much help. (*Interjection*)

What works, and at what costs, were carried out at the Mooring situated at Water Gardens Small Boats Marina during the past financial year?

80

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I answer this question together with Question 767.

85

Clerk: Question 767. The Hon. D J Bossino, on behalf of the Hon. E J Reyes.

Hon. D J Bossino: Which on this occasion does follow 766!

What works and at what estimated costs are expected to be carried out at the moorings, at the Water Gardens Small Boats Marina during this financial year?

90

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

Hon. G Arias-Vasquez: Madam Speaker, works and associated costs incurred during this past financial year were £399,094. The works included:

95

- Dismantling current facilities and retirements to waste management in Spain
- Ten steel piles installed into sand
- One entrance aluminium gate/door 1.1 m wide and 2.2 m high
- 138.68 m floating aluminium pontoons that are 2 m wide (ECODECK TECHNOLOGY)

100

- 138.68 m floating aluminium pontoons which are 2 m wide

(ECODECK TECHNOLOGY)

- 18 Aluminium 6 m *0.3 m long fingers (ECODECK SYSTEM)
- 14 aluminium 7 m *0.3 m long fingers (ECODECK SYSTEM)
- 7 Aluminium 8 m *0.3 m long fingers (ECODECK SYSTEM)
- 1 basic lighting
- One Transport and Assembly.

105

No monies have been paid out in this current financial year. However, we are obtaining quotes for works to set up an electrical connection for lighting at this Marina.

110

Hon. D J Bossino: In relation to that final reply, may I ask the Hon. the Minister with responsibility for the port, whether the further works which are to be carried out for this financial year, what those will amount to? I think she has given a full report as to what has been done to date. But I would be grateful if the hon. Lady could answer what is expected to be done in order, presumably, to complete the works?

115

Hon. G Arias-Vasquez: Madam Speaker, as I just pointed out, we are in the process of obtaining quotes for the works, so I do not have an exact figure at this moment in time.

120

Hon. D J Bossino: I was not asking so much about the figure, but about what nature of works the hon. Lady is obtaining quotes for. In other words, certain works have been done to date, which have cost something in the tune of £400,000, give or take. But what else needs to be done?

125

Hon. G Arias-Vasquez: Madam Speaker, as I also set out in my answer to my question, is to set up an electrical connection for lighting at the Marina.

130

Hon. D J Bossino: Would the Hon. the Minister have an idea as to how long that is going to take? Presumably the time will start to run when she instructs the works to be done and she, the hon. Lady, has quotes in relation to that. But is she able now to say when she expects the whole works to be completed?

135

Hon. G Arias-Vasquez: Madam Speaker, I do not have a date for when the works are to be completed. I have been down to the Marina, along with the Captain of the Port, along with the [inaudible] to try and get a scope of what is necessary.

As I have said, we are now in the process of obtaining quotes for the works. When we get the quotes, we will sit down, we will look at the quotes and put it in next year is estimates. So no, I do not have a timeline.

140

Hon. D J Bossino: And is the Hon. the Minister able to give information to this House as to which company or companies are carrying out those works?

145

Hon. G Arias-Vasquez: Madam Speaker, as I have just answered in the previous question, we are obtaining quotes. So when we obtain the quotes, we will determine which is the best company to do the works.

150

Hon. D J Bossino: The hon. Lady, I am asking about the works which have already been done in respect of which costs have already been incurred. Who has done that? Was that done directly by the Port Department?

Hon. G Arias-Vasquez: Madam Speaker, I do not have that information to hand. The question relates to the works and the estimated costs. If you ask me that question for the next round, I will obtain that information.

155 **Hon. D J Bossino:** Whilst the hon. Lady may not have details of the company, is she able to say whether a company, in other words, whether that work has been outsourced. And I would be interested to have that information if she has it available. Surely she will have that information available to her now.

Hon. G Arias-Vasquez: No, ma'am, I do not have that information available to me.

160 **Hon. D J Bossino:** Fine, fine.

Madam Speaker: Fine for me.
Does the hon. Member wish to ask a further supplementary?

165 **Hon. D J Bossino:** Yes.

Madam Speaker: Yes.

170 **Hon. D J Bossino:** I am grateful. Is the Hon. the Minister able to state how many births are we talking about here in totality?

175 **Hon. G Arias-Vasquez:** Madam Speaker, I am sure the hon. Member opposite is aware of the procedure. If you ask me the specific question, I will provide you the specific information. If you do not provide me with the specific question, I am unable to answer the question off the cuff. And I do not want to provide this House with inaccurate information.

180 **Hon. D J Bossino:** Hon. Lady, it is with the greatest respect to her. This is a question which, in my view, arises from the answers which have been given as a result of the questions which are on the Order Paper. If there is a certain cost which has resulted in an outlay by her Department, then surely she does not know which company has done the works. She does not know whether it has been done by her Department or whether it is been outsourced.

Now she is telling this House that she does not know how many moorings we are talking about. I think with the greatest of respect to her, Madam Speaker, this is information which she should have available to her. She should have anticipated it.

185 **Chief Minister (Hon. F R Picardo):** Madam Speaker, the hon. Gentleman will forgive us for taking the view that we will be the judges of what we should or should not be prepared for in the context of answering a question which does not, in our view, lead to that final – I think it is final, final supplementary on the subject of these berths – and which relates to financial years before the hon. Lady was a Minister.

190 So the Government will, of course, Madam Speaker, not object, should the hon. Gentleman put a specific question within the six-month period, if you decide that it is permissible, which might elicit that specific information, which in our view does not arise at all from the first question that he has asked on behalf of one of his colleagues who is not here because he has done no injury to himself. *(Interjection)*

195 **Madam Speaker:** Next question.

Q773/2024
Agenda for Change –
Discussions between Government and UNITE

Clerk: Question 773. The Hon. D J Bossino, on behalf of the Hon. the Leader of the Opposition.
(*Interjections*)

200 **Hon. D J Bossino:** What progress – 773, yes? – has been made to date on the discussions between the Government and UNITE to amend the Agenda for Change?

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

205 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I have asked the GHA and UNITE to engage in a review of Agenda for Change. The scope of the exercise has been agreed in the Terms of Reference, and a completion date of 30th June 2026 has been set.
(*Interjection*)

210 **Hon. D J Bossino:** Does that timeline, which the Hon. the Minister has kindly given this House, meet with her requirements? In other words, is this something which in terms of the timings of this that she is satisfied with?

Hon. G Arias-Vasquez: ... [*Inaudible*] Therefore, of course.

215

Madam Speaker: Next question.

Q774/2024
Small Boats Marina –
Sale/allocation of berths

Clerk: Question 774. The Hon. D J Bossino, on behalf of the Hon the Leader of the Opposition.

220 **Hon. D J Bossino:** Is there a policy decision pending on the sale of berths or the method of allocation of berths in the Small Boats Marina? And if so, what are the nature of issues that Government is considering?

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

225 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the Government is reviewing the policy on sale of berths. A meeting has been scheduled to discuss this.

230 As to the method of allocation of the berths in the Small Boats Marina, the allocation process is clearly outlined in legislation, and there are no plans to change how berths are allocated at the current time.

Hon. D J Bossino: The Hon. the Minister for the Port advises this House that a meeting is scheduled to take place, which will in turn presumably influence the policy that the Government will be adopting in relation to the sale of these berths and that the Government, at this stage, as I understand her reply, is not committed either way in relation to that specific issue.

235

Can I ask her who the expected participants of that meeting are?

Hon. G Arias-Vasquez: Madam Speaker, the participants are the Captain of the Port John Ghio, and Kevin de Los Santos from Land Property Services.

240 **Hon. D J Bossino:** But presumably the results of the conclusions of that meeting will then be reported to the hon. Member based on which she will come to a decision, a policy decision in relation to the sale of the berths.

Is that understanding, as I have postulated it, accurate and correct?

245 **Chief Minister (Hon. F R Picardo):** No, Madam Speaker, that is not the way that Government works. The way that Government will work is that the meeting will actually also include the Minister with responsibility for the Port. And then the Cabinet will make a collective decision about around how we will take forward the commitment of the Government for the sale of berths.

250 The hon. Gentleman's previous supplementary was prefixed on whether or not the Government would have a commitment to sell berths. But the Government has a commitment to the sale of berths. It is about methodology, etc., that we are considering the issue. So, his preface was wrong, but his preference was not his question.

255 **Hon. D J Bossino:** I see, yes, and I am grateful to the Hon. the Chief Minister. This is not a question which I formulated, but was formulated by the Leader of the Opposition, for whom I am standing in for at the moment. But no, is it then the case that – because I was not corrected by his Hon. Colleague when I put the questions to her. But is it then the case that the Government is committed to a sale of the berths?

260 That is the policy decision of the Government that there is not going to be any shifting in relation to that such that the meeting which is to be held now, he tells us, by the Captain of the Port. I cannot remember who the other participant was, and indeed the Minister – the position will be that that meeting will only result in how that policy is going to be taking effect.

Is that the position?

265 **Hon. Chief Minister** Yes, Madam Speaker, and I commend the hon. Gentleman for the forensic manner in which his questioning has elicited the response of the Government, that it remains committed to the policy that I announced in a budget in this House.

Madam Speaker: Next question.

Q775/2024

Prostate cancer screening/prevention programme – Patients tested 2023/2024

270 **Clerk:** Question 775. The Hon. D J Bossino, on behalf of the Hon. the Leader of the Opposition.

Hon. D J Bossino: Do the GHA proactively offer high-risk men blood tests to measure levels of PSA as part of their Prostate Cancer Screening and Prevention Programme; and, if so, how many patients were tested during 2023 and 2024 to date?

275

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the GHA does *not* offer PSA testing as part of their Prostate Cancer Screening Programme. The PSA test is

280 not an accurate screening tool and is not offered by the NHS. However, a PSA test can be requested if a doctor thinks the presenting symptoms could be prostate cancer.

Men aged 50 or over can ask their GP for a PSA test, even if they do not have symptoms. If a patient is on treatment for a prostate condition, they may be offered regular PSA tests to check how the treatment is working.

285 Overall, the GHA has processed the following samples for PSA: In 2023, it processed 4,356 samples; in 2024 to date, it processed 3,097.

Hon. D J Bossino: The Hon. the Minister will forgive me if the Government has stated its policy public in relation to this. But she has given us certain figures which run into the thousands in respect of the 2023 and 2024 data. Is she able to say, as part of the screening process, whether there is an age demographic which is captured by another?

So what I am saying is, is there an age over beyond which one must be in order to receive the benefit of the prostate cancer screening?

295 **Hon. G Arias-Vasquez:** As I specifically said, it is not prostate cancer screening. It is not a screening programme, so anyone who thinks they present with symptoms of prostate cancer can request the test. It does not necessarily have to be anyone over an age. It is anyone that presents with symptoms. Or, if a doctor feels that they have symptoms, they will be sent for a PSA.

300 **Hon. D J Bossino:** Yes, and I am grateful to the Hon. Minister for that. Is therefore, by way of clarification, may I ask the figures that she has provided in relation to PSA specific testing as opposed to – and I misunderstood it, a general screening programme for prostate cancer?

Are those PSA tests, samples which have been requested and delivered by the GHA in respect of those two years?

305

Hon. G Arias-Vasquez: Sorry, I understood the question to be: is this part of a screening programme? Sorry, what? (*Interjection*)

310 **Hon. D J Bossino:** That is fine. Are those numbers representative of PSA tests which have been undertaken?

Hon. G Arias-Vasquez: Madam Speaker, yes, the numbers provided are the numbers of PSA tests carried out, but it is not representative of the number of patients. So one patient may have more than one test in any given year.

315

Hon. D J Bossino: And if I may push the Hon. Minister, does she have that information available to her, or is it simply that she may not have it available to her now, but is it information that she would have available should we pose the question specifically in this House?

320 **Hon. G Arias-Vasquez:** Madam Speaker, I am sure it is information which we probably could obtain.

Madam Speaker: Yes, the Hon. Mr Sacarello.

325 **Hon. C A Sacarello:** Thank you, Madam Speaker. Good afternoon.

Madam Speaker, it is my limited understanding on this matter that the blood test reveal the results with limited accuracy to. Would the Hon. Minister please indicate if there are other alternatives, such as MRIs available? And would these be available for the general public under the GHA?

330

Hon. G Arias-Vasquez: Madam Speaker, if the results came back positive, there are numerous tests which may be carried out otherwise, such as scans, blood tests, biopsies, MRIs. These are the other tests which may result if a PSA comes back positive.

335 **Madam Speaker:** Next question.

Q776-77/2024
Mpox vaccines –
Contingency measures purchased/reserved; enhanced surveillance

Clerk: Question 776. The Hon. D J Bossino, on behalf of the Hon. the Leader of the Opposition.

Hon. D J Bossino: I imagine it is articulated in this way. Mpox vaccines, are they being purchased or reserved for purchase by Gibraltar should these be needed?

340

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 777.

345

Clerk: Question 777. The Hon. D J Bossino, on behalf of the Hon. the Leader of the Opposition.

Hon. D J Bossino: What – I think it is monkeypox, I am told – contingency measures do the Government or GHA have in place to deal with any mpox cases should they arise; and to enhance awareness of risks by Gibraltar residents who may be visiting affected countries?

350

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

Hon. G Arias-Vasquez: Madam Speaker, the GHA has moved to enhance surveillance. This means we have reviewed the High Consequence Infectious Disease Plan and raised awareness of the signs and symptoms of mpox with both clinicians and in the GHA and in the private sector. For travellers to affected areas, information is available on the GHA Public Health website.

355

Hon. D J Bossino: In terms of, I mean, the reply that the Hon. the Minister has given the House, what private sector involvement in fact – or to put it in the past tense – has been sought and has been given in respect of this?

360

She mentions the public and the private sector. So I am interested if she could develop that point in by way of her answer to the supplementary.

Hon. G Arias-Vasquez: Madam Speaker, the High Consequence Infectious Disease Plan has been carried out, but the engagement with the private sector is one of enhanced awareness. So we have made the private sector aware of the signs and symptoms of mpox so that they are also aware of anyone turning up in their clinic and presenting signs and symptoms of mpox.

365

Hon. D J Bossino: Did the Hon. the Minister for Health provide any information about in respect of the question posed, number 776. She may have done and I may have missed it, but there was a specific question about quantity of vaccines purchased or reserved, for purchase by her Department. Did she answer that? (*Interjections*)

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375 **Hon. G Arias-Vasquez:** Madam Speaker, there was information given in the press release of
3rd August 2022, which was issued by the GHA specifically on this subject. So in that press
release – and I will assist the hon. Member, even though it is publicly available information, and I
would have expected the hon. Member to have read the press release – the vaccine is a vaccine.
380 There is no specific monkeypox vaccine, but there is a smallpox vaccine which the GHA had in
stock at the time. So it was felt that there was not needed to purchase any additional vaccines
because the GHA had this stock available at that moment in time.

Hon. D J Bossino: So has that position or decision by the Government changed in any way as a
result of what may be perceived as a heightened threat in respect of this particular condition?
385 The Hon. the Minister says that the answer in effect was zero, and that the Government was
relying on a different vaccine. But has that changed – and I am grateful to the Hon. Minister for
providing the answer – since the press release was issued?

Hon. G Arias-Vasquez: Madam Speaker, since the press release was issued, we have triaged
390 two possible mpox cases to date, and neither met the criteria for testing. Because of this, it has
been determined that we have sufficient stock in place.

Madam Speaker: Next question.

Q814/2024
Gibraltar Health Authority Act –
Incorporation of Care Agency

Clerk: Question 814. The Hon. A Sanchez.
395

Hon. A Sanchez: Could the Hon. Minister provide an update to the House on the progress of
the consultation regarding potential amendments to the Gibraltar Health Authority Act,
specifically in relation to incorporating the Care Agency into what could become the Gibraltar
Health and Care Authority?
400

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, since
I announced the Government's plan for a consultation process regarding a health and care
restructure, I have met regularly with both UNITE the Union and the GGCA as well as other
relevant stakeholders, including heads of service of the Care Agency.
405

The consultation process has allowed for an extensive engagement with all stakeholders on
the Government's proposal. These discussions have focused on the planned restructuring of our
health and care services, which aim to enhance patient care and efficiency in our health service.
410

This year, the Government has invested £211 million in our health and care sector and with
these proposed changes, we want to ensure that the taxpayer receives the best value for money.

The Government has taken into account all the feedback received from the meetings with the
unions and stakeholders, and we are prepared to adjust the proposed changes accordingly,
ensuring the best outcome for both the patient and staff. This is something I have repeatedly told
415 the unions and the stakeholders throughout my meetings with them over the summer.

The consultation period for the proposed restructure is now coming to an end, and I have
agreed with both UNITE the Union and the GGCA that I will be sending them the first draft of the

new proposed legislation in the coming days. I will also then meet with them to discuss the proposed legislation before bringing it to this House.

420 I would like to take this opportunity, Madam Speaker, to publicly thank UNITE and the GGCA for the way in which they have approached this consultation and the professionalism with which these meetings have taken place.

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

425 We have information that a particular union balloted its members in relation to this and in relation to the question of whether they wanted to continue with the consultation process and the creation of this authority, or to cease the consultation until a proper process was followed and a working framework was provided for consideration.

430 And from the information that we have available, the majority of the members voted in favour of ceasing the consultation. Is the Minister aware of this and could the Hon. Minister, clarify whether she has consulted the union on this and whether the consultation is actually going ahead, or is it being ceased for the moment?

Hon. G Arias-Vasquez: Madam Speaker, yes, the union did come to my office and we did discuss this. Like I said, there have been numerous consultations and I believe the last one with Unite and with the GGCA was on 8th October, and it was on or around that date that this happened.

440 We subsequently provided them with the paper which summarised what the proposed changes were likely to be, and they were going to go back to their members with that. They did not think that there was going to be an issue with that, so the consultation is proceeding as expected.

Hon. A Sanchez: Madam Speaker, can the Hon. Minister confirm whether the Union has gone back to their members and has the Union come back to the Minister with feedback from the members and whether they would like the consultation to go ahead?

Hon. G Arias-Vasquez: Madam Speaker, we had the meetings, the meeting was very pleasant. There was no request from them that we ended the consultation because a paper was given to them there and then. I would imagine that as any responsible union, they would have gone back to their members. But I cannot either confirm or deny this. I do not know whether they did or not.

450 I have not heard back from them since, but we have got another series of meetings scheduled in the next couple of weeks.

Madam Speaker: Next question.

Q815/2024
Care Agency respite services –
When tender is awarded

455 **Clerk:** Question 815. The Hon. A Sanchez.

Hon. A Sanchez: In relation to the tender for the provision of respite services for the Care Agency, could the Government clarify when it expects this tender to be awarded?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the tender was closed as there were no bids that addressed all of the needs of the service, which is continuing to be delivered as it was before. An initial review has been undertaken by the Care Agency to examine the current and projected demands of respite care.

465 The Care Agency is exploring a number of options to support the sustainability of this service.

Hon. A Sanchez: Madam Speaker, so by way of clarification, the Hon. Minister is saying that for the moment, the respite services will continue to be delivered by the Care Agency and will not be subcontracted as was the intention before.

Hon. G Arias-Vasquez: Madam Speaker, as I stated in my answer, that is correct.

At the moment, the Care Agency will continue to provide the services, but we are looking at different options in order to futureproof the service.

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Hon. D J Bossino: May I ask the Hon. the Minister, what are the options which are being considered? Because, from this perspective, one would have thought that one would be limited to either continuing running or providing the service in-house, so to speak, which I think is the current *status quo* provided by the Care Agency, which I have said in the past, certainly as a user of my son, I am very happy with to changing it, presumably, by going out to tender for those services to be provided privately, presumably under the very strict controls of the Care Agency.

480

Is there anything beyond that which the Hon. the Minister is considering with the Care Agency?

Hon. G Arias-Vasquez: Madam Speaker, the issue is that the users ... In fact, we had a meeting with the parents of the users of the service, and it was confirmed in that meeting that they are indeed very happy with the service provided.

485

The issue is that there are more parents that want the service that are unable to access the service because, as the hon. Member is aware, the facilities in which those services are provided are too small. The issue which we were facing is that with the tenders received there was no tenderer that provided the space and the care together.

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So there was a tenderer that provided adequate space but without the adequate care, and *vice versa* as well. So what we are looking at doing is looking at options to see how we can provide the service; how we can futureproof the service so that the demand does not go through the roof; and how we can assure affordability going forward for the service in the manner in which it is provided.

495

So when I say we are exploring all options, we are looking at all the options available in terms of *where* the service can be provided and *how* the service can be provided.

Hon. D J Bossino: Yes. And as far as futureproofing, as the Hon. the Minister puts it, there are very strong headwinds out there in the horizon. That we know because of the St Martin School figures that are coming up now.

500

So can I take it from that, that the reality is that the future means that the Government will be going towards a tender of the service at some point, that the possibility of the service provision being kept in-house, so to speak, is not really there.

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What the Hon. Minister is telling us, as I understand it, is that there will be a tender of the facilities at some point. And she mentioned now on at least two occasions the cost issue, which must be a very relevant issue for the Government, but that the reality is that we are looking towards a tender and that it will not be provided in-house.

510

What the hon. Member is telling us is that what she wants to do is for the space and the provision of the staff are conjoined together, so that forms part of one tender package as I understand it.

Hon. G Arias-Vasquez: Madam Speaker, that is exactly what I have not said! At no point in time have I said that we are looking to retender.

515 I am saying – and I will repeat – that we are looking at all options, we are looking to explore all options to see how we can continue to provide that service at a level where everyone continues to be happy with the service.

520 We have *not* said that we will be putting out to tender. We have *not* said that we are keeping it in house. What I am saying is that with the Care Agency, we are exploring all options at the moment.

Hon. D J Bossino: And I am grateful for the Hon. Minister's clarification in relation to that. And that is acceptable and respected.

525 Is she able to say now when she expects that review to be concluded, such that she is then in a position to then come with a decision and make it public?

Hon. G Arias-Vasquez: Madam Speaker, unfortunately, I am not able to give a date as the hon. Member requests. What we are able to say is that meetings are ongoing with the Care Agency as to the options available to explore every possible option.

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Madam Speaker: Next question.

Q816-20/2024

Lifecome Care Ltd –

TUPE transfers; business licence; carers' app; problems solved

Clerk: Question 816. The Hon. A Sanchez.

535 **Hon. A Sanchez:** Could the Hon. Minister confirm whether all employees previously subcontracted by companies providing home support and domiciliary care to the Care Agency, have now signed TUPE transfers under the new contract with Lifecome Care Ltd.

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

540 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will answer this question together with Questions 817-820.

Clerk: Question 817. The Hon. A Sanchez.

545 **Hon. A Sanchez:** Could the Government confirm the following details regarding Lifecome Care limited.

(1) The date on which Lifecome Care Ltd officially submitted its application for the business licence to the Office of Fair Trading, Gibraltar?

550 (2) The date on which the business licence for Lifecome Care limited was approved by the Office of Fair Trading (OFT)?

Clerk: Question 818. The Hon. A Sanchez.

555 **The Hon. A Sanchez:** Could the Hon. Minister confirm whether the carers employed by Lifecome Care Ltd, including those transferred from ADA and Meddoc, are now using a single app

for their work? If so, could the Minister provide the date on which this app became operational for the entire workforce and the name of the app?

Clerk: Question 819. The Hon. A Sanchez.

560

Hon. A Sanchez: Could the Hon. Minister clarify whether the contractual issues, specifically related to the terms and conditions for employees who transferred from Meddoc and ADA to Lifecome Care remain outstanding? If so, have these issues now been resolved?

565

Clerk: Question 820. The Hon. A Sanchez.

Hon. A Sanchez: Could the Hon. Minister provide assurances that the issues affecting service users, which were previously referred to as ‘teething problems’ during the transfer of home support and domiciliary care services to Lifecome Care Ltd have now been fully resolved?

570

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

Hon. G Arias-Vasquez: Madam Speaker, as the hon. Member knows, this is not a question for His Majesty’s Government of Gibraltar. It is a matter for Lifecome Care. However, in the interests of transparency, His Majesty’s Government of Gibraltar has requested an answer from Lifecome Care.

575

All staff contracts have been prepared and a schedule of the transferred staff sent to the Department of Employment. All employees have been invited to the Lifecome Care offices to sign their contracts.

580

Most of the contractual issues have now been resolved. Lifecome Care’s solicitors submitted a memorandum of understanding as agreed at a joint meeting with UNITE the Union, Lifecome Care and the Care Agency. I attended a series of meetings on 1st October, 3rd October, 8th October and a public meeting on 10th October with the employees which are to be transferred to Lifecome Care to ensure that the provision of care was not interrupted.

585

The pending issues relate to:

1. The date on which employees will be paid as the two companies ADA and MEDDOC had had two separate pay dates, and
2. An issue relating to whether the contractual provision relating to pay increases was ever honoured by the previous employer.

590

Lifecome Care first submitted its application for the business licence to the Office of Fair Trading via their Business Registration agents on 6th September; and the Office of Fair Trading then requested additional information which has since been submitted, so the application was approved on 17th October 2024.

595

In answer to Question 820, the issues affecting service users previously identified as ‘teething problems’ are being resolved on a daily basis as and when they arise, and this will continue as a work in progress, as they did in the context of all the former providers of the service.

The Care Agency deployed a team manager and an admin officer to Lifecome offices to ensure that communication, sharing of information, support with rotas and all complaints from service users were being dealt with in a timely manner.

600

As I mentioned during a GBC interview, there was a technical issue affecting the app where carers could view their rotas. I am advised that this issue has now been fully resolved.

Hon. A Sanchez: Madam Speaker, can I take them one by one?

605

In relation to Question 816, the Hon. Minister has advised that the employees have not yet signed the TUPE transfers. They are in the process of signing them. Is that what she has stated?

Hon. G Arias-Vasquez: Madam Speaker, I do not have an up-to-date, minute-by-minute – what I am advised and what I have stated in my answer is that they have been invited to the office to sign the contracts. I do not know how many have signed. I do not know how many have not signed.

610 But I am advised that they are invited to the offices of Lifecome Care to sign the contracts.

Hon. A Sanchez: And would the Hon. Minister happen to have the information available to her of when the employees signed their termination agreements with the previous contracting entities that they were employed with?

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Hon. G Arias-Vasquez: Madam Speaker, this is not a question for the Government. This is a question to be addressed to the previous companies.

Hon. A Sanchez: Madam Speaker, I tend to disagree because the Hon. Minister seems to want to not assume any responsibility for the transfer and the transition of the services from one entity to the other and obviously all the issues that we have seen in the transition.

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But evidently it is a Government that is subcontracting the services from the private entity. So obviously, if there are any issues during the transition, I do not agree with the matter not being one of the Government.

625

Now I am trying to establish when it is that the employees signed the termination agreement, I believe, from the information that we have and from contracts that I have seen – one that I have here actually – and they seem to have signed it on 2nd September. Now, given that the company was not registered with the OFT until 17th October, I just want the Hon. Minister to clarify who and under what company these individuals were employed in the interim period, perhaps as an explanation.

630

But I want her to clarify this for me.

Hon. G Arias-Vasquez: Madam Speaker, I appreciate that the hon. Member opposite is not necessarily a lawyer. We tendered the contract to Lifecome, we tendered the contract out. The contract was awarded to Lifecome care. The interaction between Lifecome Care and the previous entities that were supplying the workers is a matter for them entirely, and we cannot interfere, nor should we interfere in that process. So we are unable to obtain the data as to when those terminations were supplied by those companies *vis-a-vis* those workers.

635

Separately, in relation to the OFT, the company was already constituted when the licence was granted. The licence was granted a couple of weeks later because several questions were asked by the Office of Fair Trading, but the company was already constituted, the company was already in existence, and I would have expected the workers to be transferred there and then.

640

It is not a matter for us to get involved in that. I am providing this information, but in the interests of transparency. But it is a matter for the companies which we have tendered, which we have given the contract to, to deal with between themselves.

645

Hon. A Sanchez: Madam Speaker, so the Hon. Minister is saying that without a business licence the company was constituted, registered with the ETB, registered for tax purposes and ready to employ employees and grant them a salary and register them. The company was constituted to do all of that.

650

Is that what the Hon. Minister is saying? I am not a lawyer, but maybe she can explain.

Hon. G Arias-Vasquez: Madam Speaker, as was explained in my GBC interview, I fully appreciate what the hon. Member is trying to do. As was explained in my interview that I gave in GBC, there was a transition period from 23rd September to 20th October, in which Meddoc and ADA were helping the new company in the transition.

655

660 So whatever happened in that intervening period which, again, we are not involved in, there was a transition period in place, as agreed between the two companies for that transition to take place. So whether the company was constituted with the company, the two companies were working together to provide the services for the end users.

Hon. A Sanchez: What I am trying to get the Hon. Minister to explain to me – perhaps she can explain it to me because she is a lawyer and I am not, so perhaps she can explain it to me.

665 The termination agreements were signed on 2nd September. If most of these individuals had a one-month notice period, it would have elapsed on 2nd October. Now, who assumed responsibility for these employees after that period, given that the company was not licensed to trade in Gibraltar until 17th October? And in that interim period, who was responsible for providing these services?

670 If anything should have happened, if an accident should have occurred, if anything should have happened, what company would have been liable for this? Can she answer that question? Or is it a matter for the private companies? *(Interjection)*

Well, at the end of the day, the Government subcontracts them. *(Interjection)*

675 **Hon. G Arias-Vasquez:** Madam Speaker, (1) is definitely a matter for the private companies; but, (2), there is one termination which the hon. Lady claims that she has. We do not know when the contracts were terminated. We do not know what happened in the interim period, but there was an agreement between the two companies for those companies to work together in the transition period.

680 So what happened in that intervening period was a matter for the two companies. The contract was subcontracted to the two companies. So it is a matter for them to decide. One termination will not really determine the entire question.

Hon. A Sanchez: It is not one termination. It is several terminations.

685 These individuals are coming to speak to us, showing us the terminations. It is not one termination. The Hon. Minister cannot stop the employees from coming and showing us what is happening. It is not one termination.

690 I am asking a simple question during that transition when this company has not been licensed in Gibraltar, who has been responsible for these services? And if anything were to happen while these carers have been providing a service, who would have been liable? The Government or these private entities? Because at the end of the day, the Government is subcontracting these services. *(Interjections)*

695 **Hon. G Arias-Vasquez:** Madam Speaker, the very simple answer to the only question that she has asked in that entire clip is that the private companies are liable for their employees. Of course, they are liable for their employees. It is a trite matter of company law. *(Interjections)*

Madam Speaker: Do you have the supplementaries?

700 **Hon. D J Bossino:** Can't the Hon. the Minister realise and see what my friend is saying here? What we are being treated to here is a very clear sign of mismanagement, and ultimately she and her Government are responsible for this. She cannot simply wash her hands of the situation by saying, 'Oh, it has got to do with the private companies.'

705 This is a service in respect of which ultimately she has responsibility as the Minister responsible for this. And we are dealing with vulnerable people who are receiving the service directly and indeed their families who have been very concerned and have come to my Hon. friend in relation to these concerns and my hon. Friend, she may not be a lawyer but she has been very astute in asking the relevant questions.

710 What is clear, does she not agree that there has been a huge deficiency on the part of the Government, because there has been a huge, gaping abyss between the termination of employment in respect of one employer, Meddoc/ADA on 2nd September, to hearing from the Hon. Minister this afternoon that the company which was the beneficiary of the tender process, worth many millions of pounds, no doubt, Lifecome Care Ltd was not actually legally constituted to provide to carry out a business in Gibraltar until 17th October, for goodness sakes.

715 Can she not accept that there has been a dereliction here on her part, or at least her Department?

The Chief Minister (Hon. F R Picardo) Madam Speaker, let us talk about derelictions.

720 If there has been, to take the hon. gentleman's example, a dereliction on our part, because there have been – as they say, but we do not accept – a number of potential inconsistencies as to dates, some instances where there were what has been described as teething problems, etc. then nothing is perfect.

725 But let us compare that *alleged* dereliction, which means that the taxpayer that we represent is spending £3.2 million this financial year in giving people care in their homes with what the situation was when they had, instead of the power of speech, the power to do. And they were spending just over half a million pounds a year.

So imagine, Madam Speaker, the number of people who would have needed care who were not getting it then. Imagine, Madam Speaker, the number of people in the level of need that there were then who were not getting it. Let us measure that, Madam Speaker. That is £2.7 million almost worth of care that they were derelicting in providing.

730 And so, Madam Speaker, the hon. Gentleman will understand that we do not accept the point that he is making, however vociferously he may try to make it for the purposes of his and the hon. Lady's Facebook clip to come, because that is clearly what we are playing at here. We are playing at social media politics.

735 Because there can be absolutely no basis to criticise the migration of one contract from a private sector provider to another private sector provider, which the Government has undertaken simply on the basis of what Hon. Members say is what they have seen are the dates on some contracts being one, and the day that they have for a particular aspect of the operation of the company being another.

740 And, Madam Speaker, I would also say one does not have to be a lawyer to know that a lot of the questions that are being asked of the Government are not just questions that should be asked of the private company, but that actually the Government has the information.

The Government has the information as the data controller at the employment service. But that information is subject to data protection. And so we cannot give that information, but we have access to it.

745 And therefore we can monitor these things and we can satisfy whoever is watching, that might for one moment have been put in fear by the hon. Gentleman's tone – by the suggestions, by the gesticulation that we saw – that their relatives might somehow have been at risk of any dereliction, that the only dereliction that there was, Madam Speaker, was one was when people who needed this care were not getting it, which was when they were in power, not us.

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Hon. D J Bossino: The Hon. the Chief Minister is honestly becoming less convincing as time passes. But as I had said in the last session of the House, I will certainly miss him when he is gone and we expect that to be happening during the course of the lifetime of this Parliament, as he has said so in the past, although he may change his view in relation to that as well as he does with many things.

755 But does he not appreciate? I give the opportunity to the Hon. the Minister who is answering this questions in this House, and who is ultimately or at least directly responsible in relation to the provision of this service – the Hon. the Minister for Care – another opportunity to at least accept

760 with some humility that there has been, let's not call it dereliction, although we still stand by that, because this is not for the sake of the Facebook clips.

Look, if it fits, if it is coming from the hon. Member, it is because that is what he thinks. It is certainly not crossing our minds. It is not crossing *our* minds, but he has a guilty conscience in relation to that because that is something that he would do, and I am sure he did when he was in Opposition.

765 But to describe this like a number of instances, this is serious stuff.

Madam Speaker: I press the hon. Member for the question. (*Interjection*)

Hon. D J Bossino: Madam Speaker, this is serious stuff.

770 So I simply rise and give the Hon. the Minister, the putative leader of the GSLP, to rise and rise above what the Hon. Chief Minister has said, and at least accept with some humility. She has started on the right track to at least provide information in relation to Lifecome Care and the other companies, because another Minister is not here today, would have probably said 'No', saying it has got nothing to do with the Government. Like when I asked questions about Knightfield Holdings –

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Madam Speaker: I need to press the hon. Member for a supplementary, or I am going to ask the hon. Member to take his seat.

780 **Hon. D J Bossino:** But I give the Hon. the Minister the opportunity here and now not to fall in the trap of smokescreens and history lessons – because we can have those as well – and ask her to please accept with some humility that there have been errors here which have had a net effect on those users of the services and their families.

785 **Hon. G Arias-Vasquez:** Madam Speaker, let me start by saying that if the actual leader of my party were ever not to be here, he will be sorely missed by all of those on this side. (*Interjections*) Absolutely, let's not forget that one.

Hon. Chief Minister: Just more than half, though, and that is the key. Just more than half!

790

Hon. G Arias-Vasquez: Madam Speaker, I want to address the core of this question. Right? The core of this question comes to those 512 packages of care that are actually being offered to those service users. And I want to assure people that each and every one of those 512 packages of care were called on the weekend after my interview on GBC to make sure that the service was being received.

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We now have markers of the standards of care that are being received. We now have markers of how happy people are on a scale of 1 to 5, and whether the service is being received or otherwise. We now have data from each and every one of those service users telling us whether the service user arrived, whether the service user has not arrived, and every other day the Care Agency is giving me this data.

800

So let me not talk about dereliction of duty, because a Care Agency steps up to that putative dereliction of duty, which you are talking about. Now, every single package of care has been called about. (*Interjection*)

805 **Hon. D J Bossino:** Madam Speaker, point of order, if I may?

I refer to the ruling which you gave before the start of the session. The Hon. Minister – because now I have failed to meet the Bar – has referred to me as you in the third person. (*Interjection*)

810 **Madam Speaker:** The Hon. Member is quite right. But if the hon. Member would like the Chair to intervene, I have noted already 14 infractions. Not all of the hon. Member, but most. *(Interjection and laughter)*

815 So I have been reluctant to intervene. I was going to speak to Hon. Members behind the Chair on this but I continue *(Interjection)* – well, over a coffee and a biscuit, perhaps – but I am not going to draw individual attention just yet. But if we have to resort to my interrupting the flow as we go, I will.

Needless to say, I remind all Hon. Members of my ruling at the start, and I will now invite the Hon. Minister to finish her answer. *(Interjection)*

820 **Hon. G Arias-Vasquez:** Madam Speaker, I apologise to the hon. Member Opposite for referring to him in the incorrect fashion. However, the point I was trying to make was that the Care Agency takes their duties very seriously.

825 The Care Agency has called each and every one of the service users who have received a care package, and the Care Agency looks to continue to receive feedback from each and every one of those service users to make sure that the standard of service is sufficient – or is actually excellent – because 67% of the people that were contacted said that they were very happy with the service being received.

One point which I would make is that the level of complaints, there has been an ongoing level of complaints, but with the change. So we received complaints previously and we receive complaints now, but obviously with the change of company, that is what is happening.

830 We are receiving input and we are very much on top of it because we now have a contract with which to measure the standards that we are we are requiring from the service provider. We are on top of this, and we want to make sure that each and every one of those service users knows that we are on top of the fact that they are receiving the standard of care required.

835 **Madam Speaker:** Yes. The Hon. Mrs Sanchez.

Hon. A Sanchez: Madam Speaker, in relation to Question 818.

Can the Minister confirm whether the issues with the app, she mentioned that the issues with the app have been resolved and that there are no more issues with the app now?

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Hon. G Arias-Vasquez: Madam Speaker, again, this is a question for the company, but I have quizzed the company on this and there is an app called Adacare. Nothing to do with ADA, the company that previously provided the care, but the app is called Adacare and they inform me that the issues are now actively being resolved.

845

Hon. A Sanchez: Madam Speaker, the information that we have is that the app has now been launched for a second time and that the app is still not working, and that the issues are still creating problems for the service users, and that these problems are affecting the care that is being delivered to the service users.

850

But obviously when the Hon. Minister gives an interview on GBC and says that the app, and the issues that were persisting were related to the app and that all these issues have been resolved. She gives the impression that all matters have been resolved and there are no more teething issues.

855

But the information that we have and the information that we are seeing is that the issues with the app persist.

Madam Speaker: Question?

860 **Hon. G Arias-Vasquez:** Madam Speaker, that is actually not what I said. What I said was that the issues were actively being resolved. That does not mean that the issues are resolved.

We are questioning Lifecome Care on a regular basis. We have bi-weekly meetings scheduled with them to make sure that all of the issues are actively resolved. *(Interjection)*

865 **Hon. A Sanchez:** What are the issues? Can the Hon. Minister outline what the issues are? I am failing to understand how the Hon. Minister can give an interview in June where she announces, with a great deal of fanfare a tender, the awarding of a tender to a company and assures a seamless transfer. And yet all we are seeing is issues that are affecting the daily lives of service users. It seems much more than 'teething issues'.

870 **Hon. G Arias-Vasquez:** Madam Speaker, in every walk of life, when there is a transfer of care from one provider to another, there are always going to be issues. Always.

And I understand why the hon. Member wishes to make a meal out of this. I understand that the reality is that all of the issues are being dealt with. They are actively being dealt with. The Care Agency is on top of the issues and they are actively being dealt with.

875 I do not know what the issues are with the app. The issues with the app are rota issues. I am not involved in the nitty gritty. The Hon. Members opposite, consistently tell me that I should not be involved with the nitty gritty of these things.

We have been told that there are issues with the app. That means that the employees are struggling to get their rotas. That is the level of information I had, and that is the level of information that I gave on GBC.

880 The Care Agency are involved in meetings. I have been involved in meetings, but now the Care Agency are actively involved in bi-weekly meetings.

885 **Hon. A Sanchez:** Madam Speaker, the Hon. Minister attended a meeting in John Mackintosh Hall where she addressed all the carers in person. She is evidently involved with the nitty gritty. She heard from them, she heard about the issues that they are having, about the contractual issues that they are having, about all of that concerns, the same concerns that I have heard about from them.

890 How can she say that she is not in tune with the issues that they are facing? It baffles me, honestly.

Hon. G Arias-Vasquez: Madam Speaker, what I have said is I do not know what the issues are with the app. Yes, I attended a meeting at John Mac Hall. I assure you that at no point in the meeting in the John Mackintosh Hall was the issue of the app raised.

895 We were dealing with contractual issues, TUPE issues, and I felt it was important to be there to oversee the entire process, to make sure that the union was happy, that the Care Agency was happy, that Lifecome was happy, and that the employees were happy.

900 My interest there is to make sure that the service user is not affected, and that the service user is not affected by any contractual issues which are happening. That is why I went to a meeting. That is why we want to make sure that this gets sorted very quickly. But I am not involved in the nitty gritty of an app which the carers use.

Madam Speaker: Next question. *(Interjection)*

No, we have had 5 questions and 12 supplementaries on the 5 questions. It is time to move on.

Q821-22/2024

Skye Ward –

Air conditioning repairs cost; Ocean Views works planned/scheduled

905 **Clerk:** Question 821. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, what was the cost incurred in respect to the repairs to the air conditioning system in Skye Ward?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this together with Question 822.

915 **Clerk:** Question 822. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, are there any refurbishment, beautification or maintenance works planned and or scheduled to take place at Ocean Views in the next 12 months? If so, please provide specifics as to:

- 920 (1) The nature of the works to take place and the aims
(2) In what areas/wards is work to take place?
(3) Whether contracts have been awarded in respect of such works, and to whom, and whether there was a tender process
(4) For the amount of the tender(s) awarded, and
925 (5) The projected completion times for the project(s).

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

Hon. G Arias-Vasquez: Madam Speaker, in answer to Question 821, the total cost in respect of
930 repairs to the air conditioning system in Skye Ward amounts to £48,891.

In answer to the Questions in 822, the works planned and or scheduled to take place at Ocean Views are as follows:

- 1) Replacement of the air conditioning system of Skye Ward and Rockside Flats.
935 The nature of the works are:
Installation of new systems and removing of old from roof level
Installation of new external system and degassing
Installation removal of all bs boxes, 19 of them, and installation of new ones
Installation of new refrigeration pipework where required
940 Charge refrigeration gas to system
Builder works to any damage areas
Commissioning and testing by Daikin Engineers

The aim of all of the works which have been highlighted above, is to resolve the air conditioning issues that have been affecting Skye Ward and Rockside Flats.

945 In answer to Question 822, the Ocean Views managing company (E&M) conducted an internal tender process and quotes were sought from five different companies. E&M subsequently submitted a tender evaluation report to the GHA executive for its perusal. DesElec was then selected by the GHA in accordance with the tender evaluation recommendations.

950 The components are expected to arrive in Gibraltar within the next couple of weeks. Installation and commissioning are expected to take approximately 7 to 10 days after that.

2) Separate works are the process to convert a room in Horizon Ward into a further seclusion room, with the main bulk of the works being performed by Ocean Views maintenance staff. Cladding of the rooms is required and therefore quotes from different providers have been requested.

955 And separately, repairs to damaged flooring in the Horizon Ward and that is currently taking place. GJBS are carrying out the works after quotes were requested from three different contractors, and the cost of repairing this is estimated at £716.60.

Hon. J Ladislaus: Madam Speaker, I am grateful to the Hon. the Minister for that indication. Can the Hon. the Minister confirm whether the system was under warranty at the time of which it began to fail?

Hon. G Arias-Vasquez: Unfortunately, I do not have it in my notes, but the question was asked at the time and it was out of warranty.

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Hon. J Ladislaus: Can the Hon. the Minister confirm whether the works to the specific air-con system in Skye Ward? Were those works included in the works which are tendered for the refurbishment?

970 So, has the tender been awarded in respect of everything to include the works undertaken on the air-con system, or was there a tender awarded for the refurbishment, and then thereafter we paid extra, so to speak, for the air-con system?

Hon. G Arias-Vasquez: Madam Speaker, I think I understand the question is meaning was any damage done by the air conditioning system and the replacement of the air conditioning system included in the quote? And the answer to that question is yes, it was included.

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Hon. J Ladislaus: Madam Speaker, as to the air conditioning system, can the Hon. the Minister clarify perhaps why it took so very long to fix that air conditioning system? Because the information that we received is that the issues were ongoing for some time, and they had been raised on a number of occasions by staff. Because obviously this is world where windows cannot be opened, I was informed, due to safety reasons and therefore we were talking about the height of summer.

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So could the Hon. the Minister please clarify the reasons why it took so long for that air conditioning unit to be fixed?

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Hon. G Arias-Vasquez: Madam Speaker, initially what was attempted was to fix the air conditioning units and indeed, in the height of summer, the air conditioning units were fixed on a temporary basis. It was then, I think, sometime in September, when the view was taken that the entire system had to be replaced because it broke down again.

990 What was done in the intervening period was that patients were transferred out of that ward to make sure that nobody was affected by the air conditioning issue.

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

995 Could the Hon. the Minister confirm whether any industrial action was threatened as a result of this failure in the air-con system?

Hon. G Arias-Vasquez: Madam Speaker, I think there is a question later on that relates specifically to industrial action, and I do not think this one is included in there. And I think that that is because even though there were rumblings of possible industrial action, there was never any actual ... the process was never commenced, if that makes sense.

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Hon. J Ladislaus: I am grateful again for the for the clarification, but if I can just press a bit further on that last point.

1005 Can the Hon. the Minister confirm what she means by, 'There were rumblings, but no action was taken?' I understand that no formal action was taken, but were any written communications, for example, received from the Union which threatened industrial action if these works were not undertaken immediately.

1010 **Hon. G Arias-Vasquez:** Madam Speaker, again, I am cognisant of the fact that there is an answer to a question relating to threatened industrial actions, and that one is not in here. So what I mean to say is that even if there was industrial action, the formal process was never commenced.

Madam Speaker: Next Question.

Q823/2024

Public access defibrillators – Locations; information updates

Clerk: Question 823, the Hon. J Ladislaus.

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Hon. J Ladislaus: Madam Speaker, when was the last time that the information on the GHA's website as to the location of public access defibrillators available in Gibraltar was updated? How often is that information updated?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I am advised that the GHA website was last updated in July 2024 and the regularity of any updates is subject to any changes in the Public Access Defibrillator network.

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Madam Speaker: Next Question.

Q824/2024

External phone lines – Policy on answering

Clerk: Question 824. The Hon. J Ladislaus.

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Hon. J Ladislaus: Madam Speaker, does the GHA have a policy in place as to answering external phone lines? If so, please outline that policy.

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): The GHA's policy is to answer all external phone lines as soon as is practically possible. However, there may be occasions when, due to clinical priorities, phones are not answered as quickly as we would like. But I reiterate the policy is to answer calls as soon as possible.

1040 **Hon. J Ladislaus:** Madam Speaker, unfortunately we have received various complaints from members of the public who are not having phone lines picked up when they are ringing the GHA. Could the Hon. the Minister clarify whether this is because perhaps the admin staff, there is not enough within the admin complement?

1045 **Hon. G Arias-Vasquez:** Madam Speaker, there are some wards that have ward clerks. There are some Departments that have clerks at the desk and there are switchboard staff as well, which can answer the phones on a regular basis.

Now, what happens is that it depends on what is going on in the hospital physically at the point in time when someone calls. For example, there are many cases that they find themselves attending to the public, or clerks find themselves popping in and out of clinics to speak to the doctors and/or the nurses.

1050 So it is not a case of not having enough admin staff – indeed, the complement is forever increasing in relation to admin staff. The question is: how do you make sure that there is someone permanently by the phone without moving to attend a more urgent need on the ward, etc.?

1055 **Hon. J Ladislaus:** Madam Speaker, again, this is happening with quite alarming regularity that we are receiving these complaints and it is across the board. There are not specific Departments, it is very much across the board.

And so therefore I would once again ask the Hon. the Minister whether perhaps it could be that further staff need to be employed specifically for the purpose of perhaps picking the phones up and passing on information to the relevant parties or clarifying information. Because this is of grave concern, particularly to those who suffer mobility issues and the elderly in particular who regularly use the service.

1065 **Hon. G Arias-Vasquez:** Madam Speaker, the number of admin staff employed in the Hospital is currently being reviewed. I do not think that it is a matter of there not being sufficient admin staff to answer the phones.

Whether people are calling through and are not getting the phones answered is a separate question that might need to be looked into in further detail, but I do not think that it is because there is not sufficient admin staff in the GHA.

1070 **Madam Speaker:** Next question.

Q825/2024
GHA health cards –
Uni students annual renewal

Clerk: Question 825. The Hon. J Ladislaus.

1075 **Hon. J Ladislaus:** Madam Speaker, for what reasons are university students required to renew their GHA health cards on an annual basis?

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

1080 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the requirement for university students to renew their GHA cards on an annual basis serves to check whether a student continues in full-time education or otherwise.

Hon. J Ladislaus: I am grateful. We suspected that was the case.

1085 The information that we have filtering through is that the Department of Education must provide students with a letter to the GHA, individually, confirming that they have passed and are eligible to have their health card renewed on an annual basis.

1090 Would the Hon. the Minister not agree that that is somewhat of a convoluted process for the Departments involved, and also for the students who are sometimes left in limbo for some time until their health cards are renewed?

Hon. G Arias-Vasquez: Madam Speaker, the issue is that we have had issues in the past relating to fraud, and that is why we asked the students to turn up once a year in the GHA to renew their card. Turning up once a year is not particularly onerous, I would argue, and if it is going to combat fraud, I would suggest that that is an adequate requirement.

1095 **Hon. J Ladislaus:** I am grateful for that indication, Madam Speaker.

1100 Nevertheless, we have heard a lot made of the new systems in place in recent years that the Government have rolled out across Departments – I am talking about IT systems – and therefore I ask the question: why is there not a centralised system within which this information is automatically uploaded so that Departments all have access to that system?

1105 **Chief Minister (Hon. F R Picardo):** Madam Speaker, there is a centralised system. There is data in the Department of Education; there is data in the Health Authority. But all of that data, because of the law on data protection, is held in relative silos and we are not permitted to have that data just speak to itself and confirm that one person has continued in X and has continued in Y to the extent that that is possible. We try and do it by having agreements between Departments.

1110 Nonetheless, there still is occasionally a need to set up what one might call an ‘analogue check’ in order to ensure that we are also confirming both parts of the data. And sometimes that is helpful and people can slip through the net if we only rely on data.

1115 So the hon. Lady’s question, I hope, is answered by the overview I have given of how Government data is managed. And I hope that has been of assistance.

1120 And I am very worried, Madam Speaker, that I have seen you lift your notepad and make a note as I address, and I hope I have not for one moment failed in the form of address. And if I have, I pre-apologise.

Madam Speaker: The Hon. the Chief Minister must know or should know that I do not just record infractions in my notepad. There are other things I keep record of as to how many supplementaries for each question (*Interjection*) and the like.

1125 But to ease his concern, no, the Hon. the Chief Minister has not been responsible for an infraction. Yes.

Any more supplementaries from the Hon. Mrs Ladislaus? The Hon. Mr Sacarello has one.

1130 **Hon. C Sacarello:** Thank you, Madam Speaker; and thank you to the Hon. Minister and Chief Minister opposite, for their replies.

1135 My question comes more from a practical stance, Madam Speaker. There are roughly – and I stand to be corrected, but it is only a rough figure anyway – 600 students per annum. So that is potentially 600 letters and meetings that the Department of Education have to have every summer. And the same with the GHA in renewing the cards, not just the meetings, but the time that it takes to process the application and then the cost of printing the cards, of course. So there is a lot of bureaucracy tied up in this.

1140 Would it be possible – and I am asking this as a question, not understanding the centralised system limitations of some of the data breaches – when the student signs a contract at the

beginning, there is an undertaking by the students to deliver certain terms, such as coming back to Gibraltar, for example, to study, and then that is countersigned by a guarantor.

1135 Would it not make sense at the beginning, Madam Speaker, to ensure that the student also commits to notifying the GHA in the event of failing so that the few do not result in the masses suffering of law-abiding and successful students, which everyone is put through every summer. It is just a crazy system that does not really operate.

1140 Would the Government commit to looking at it and reviewing the process, to seeing if there is something could be done to try and change it to a more efficient use of time?

Hon. Chief Minister: Madam Speaker, we should not have an argument about it, but the hon. Gentleman might wish to look at the number of students that he is given us. From memory, I think the number is closer to 900 or 1,000 students at any one time. But I cannot empirically tell the House what the number is. He may be right, but I think it is much more than 600.

1145 And in fact, he would say, well, if that is the case, that gives even more force to my point, because instead of being 600 letters, it is 900 letters or 1,000 letters. But actually, Madam Speaker, I think it will give more force to the response I would give the hon. Gentleman, which is this: this community is probably now unique in the European continent, in providing tuition fee-funding and maintenance funding for all students who undertake an undergraduate degree qualification and now also a First Master's degree.

1150 We also provide what would probably be described as an overly generous public health authority covering, in some instances, more universal free healthcare than the national health system in the United Kingdom, which I understand was the first free national healthcare system of universal application to contributors.

1155 The numbers, Madam Speaker, broadly in the context of the budget debate, are £21 million spent on scholarships and £158 million, I think, was the figure in the budget for the health authority.

1160 The total, Madam Speaker, represents £179 million, almost £180 million of spending, not all of which of course is spent on students. But £21 million is spent on students, and a part of the £158 million is spent on students.

1165 If in Gibraltar, Madam Speaker, what Gibraltarian students are asked to do is not to pay as they are in the United Kingdom and in other parts of the European Union, the £9,500 a year of tuition fees, which we all understand from reading UK newspapers, is likely to go up, and find the way of getting themselves to university and paying their rent in university. All of that is paid for with a total cost to the taxpayer of £21 million a year across the board.

1170 And in Gibraltar they get dental treatment as well as the health treatment and all that we are asking them to do – and I am therefore inverting the question for the hon. Gentleman – is to write in once a year and confirm one Department to another, and the student that they are still there, so that we keep the £21 million at £21 million and make it more only if we have more students, not if we have somebody who has dropped out and they are still receiving funds. Or, on the other side, if they have dropped out, that they are only receiving healthcare if they are entitled to receive healthcare.

1175 The hon. Gentleman will forgive me for saying that I think that although it might at first blush appear laborious, what we have is a system that is designed to protect the public purse, which is one of the things that Hon. Members would no doubt wish to agree with us. Bureaucracy is therefore we must never have red tape that we do not need to have, but there are sometimes things that could be derisively described as red tape that are there for a reason.

1180 And the reason is to ensure that the £21 million does not become £22 million unless we have more students, and that the £158 million does not become £159 million or £160 million unless it needs to, and not because people are falling between the cracks.

So the hon. Gentleman is not going to find that we believe that he is right in suggesting that this is inefficient, or that there is a magic wand that we can use to provide another check and

1185 balance that might otherwise deliver the same result. We are doing it for a reason, and we are
doing it to protect the public purse, something that I am sure that we all agree is the right thing
to do.

Madam Speaker: Yes.

1190 **Hon. C Sacarello:** Thank you, Madam Speaker, and thank you to the Hon. the Chief Minister
for his reply.

I am afraid, though, Madam Speaker, the Chief Minister had my question all wrong. He
answered it for whatever reason from the perspective of the students. My argument was from
the perspective of the cost, which he very clearly explained was something that the Government,
1195 rightly so, is very cautious about.

My argument was that the 900 letters that have to be written by the Department of Education,
the 900 meetings that the Department of Education potentially has to have, plus then the
900 meetings that the GHA has to have and the 900 cards that have to be printed every year,
potentially, by these students because the cards need to be renewed. They only give them for
1200 12 months, Madam Speaker.

What I am asking for is: would consideration be given for some up-front measure to be taken
to avoid all of that? Bearing in mind, Madam Speaker, that there are only around 30 or 40 students
that drop out and not all of them fail to pay the money back, so that they then get jobs assumably
or sign on.

1205 So like I said, there is the few who are jeopardising or causing these huge amounts of costs and
workloads additional for the civil servants involved unnecessarily, and it is that which I am seeking
to be addressed.

Thank you.

1210 **Hon. Chief Minister:** Yes but, Madam Speaker, that is exactly the answer. That is exactly the
question I did answer with an answer that he appears either not to have liked ... that the
hon. Gentleman, Madam Speaker, appears not to have liked or understood.

With respect, I did see your pen move there, Madam Speaker.

1215 The point is this: it is the 900 meetings. It is the printing of the 900 cards and the 900 letters
that keeps it to £21 million and £158 million. If you did not have that and any of the 30 – and that
is to use his figure – were to get through, you could find that either of those two figures slips. So
the £21 million and the £158 million includes the cost of the meetings, the letters and the cards.

1220 Could we find a system, Madam Speaker – and I think this is the point that the hon. Gentleman
is trying to make, and I would happily agree with him on if he were to tell me that this is the point
that he is trying to make. Could we find a system that does not require the 900 meetings, the
900 letters, and the 900 new cards; and protects against any of the putative 30 – it maybe more,
maybe less – falling through the net.

1225 Well, Madam Speaker, I am never going to be one to say that just because I have not thought
of it there is not a better system out there, but we are supported by a magnificent team of public
servants in each of these Departments, none of whom would be wishing to have 900 meetings or
print 900 cards, or write 900 letters unless they had to. And if any of them were to propose to the
Government a change that provides the guarantees that are necessary, the Government will be
very willing to listen.

1230 And indeed, if any of the hon. Members opposite were to wish to write to the Government
with the suggestion that those who advise the Government were to agree would work, we would
be very welcoming of it. This is about protecting our common public purse in a way that works.

Madam Speaker: Next question.

Q826/2024
GHA dental treatment –
Private dental treatment options

1235 **Clerk:** Question 826. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, please clarify who is entitled to dental treatment under the GHA and what options are open to service users who are unable to afford private dental treatment for themselves or their minor dependents?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, this is publicly available information. I am sure if the hon. Lady opposite had known that she would not have asked.

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In order, therefore, to assist, I would point out that the entitlement to dental treatment under the GHA is reflected under section 8A of the Medical (Group Practice Scheme) Regulations, 1973. For users who are unable to afford private dental treatment for themselves, there are provisions under regulation 6A of the Medical (Group Practice Scheme) Regulations, so long as their income is less than such an amount as the Government may from time to time determine.

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Hon. J Ladislaus: I am grateful for that indication, Madam Speaker.

I simply raise the question to the Hon. the Minister, because we have had again an approach by a pensioner who was forced to prove the level of funds in their bank accounts when they sought emergency dental treatments at the GHA. And the reason I ask that question is that.

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So could the Hon. the Minister perhaps clarify the reason for this individual being asked to prove to prove funds in their bank account?

Hon. G Arias-Vasquez: Of course, Madam Speaker,.

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As I pointed out, Regulation 6A states that private dental treatment is available for people that are exempt. So in order for the individual that approached the hon. Lady to be able to access free dental care, they have to prove that they are beneath the minimum threshold that the Government sets. The minimum threshold which the Government sets is the old age pension.

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So they have to prove that they have no funds coming into their bank account, which are over and above the old age pension. Now, free dental care is extremely valuable and therefore providing us with evidence to the effect that they are meeting this threshold is a reason that they asked for this information.

Madam Speaker: Yes, the Hon. Mr Sacarello.

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Hon. C Sacarello: Thank you, Madam Speaker.

Would the Hon. Minister please clarify whether dental care includes emergency extractions under that section?

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Hon. G Arias-Vasquez: Madam Speaker, this is all set out in detail in the Regulations that I have pointed out. However, in order to assist the hon. Gentleman, I would say that it does not. Emergency dental treatment is treated separately.

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There is a charge of £4, which we are looking to review, for emergency dental treatment to the GHA. The emergency dental treatment has a specific definition and what a person is entitled to under emergency dental care is quite different. But they are two separate questions dealt with

separately by two sections of the Medical (Group Practice Scheme) Regulations. And the criteria are quite clearly set out in those Regulations.

Madam Speaker: Yes.

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Hon. D J Bossino: Yes, if I may. One very brief point.

The Hon. the Minister refers to a review of the charge that she has explained just now. Is she able to provide any further information as to what type of review her Department is looking to effect?

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Hon. G Arias-Vasquez: Madam Speaker, the charge is currently £4 and the last time this was reviewed was in the 1980s. So we are looking to review it to make sure that it is concurrent with current economic measures.

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Madam Speaker: Next question.

Q827/2024

St Bernard's Hospital cath lab – Fitting and cost of equipment

Clerk: Question 827. The Hon. J Ladislaus.

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Hon. J Ladislaus: Madam Speaker, has the new cath lab at St Bernard's Hospital already been fitted with all the necessary equipment, and what was the cost of all the equipment that has been fitted? Has the entirety of the cost been borne by the GHA?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, yes, the cath lab has been fitted with all the necessary equipment. There are still some minor works in progress and we are awaiting delivery of all relevant consumables. The cost of the equipment is circa £1.1 million and the cost has been borne in its entirety by the GHA.

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Hon. J Ladislaus: Madam Speaker, can the Hon. the Minister confirm that there have been no donations of any equipment or funds for such equipment from any local charities?

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Hon. G Arias-Vasquez: Madam Speaker, to my knowledge there have been no donations from any charity to the cath lab. As in answer to the question, the cost has been borne in its entirety by the GHA.

Madam Speaker: Next question.

Q828/2024

University of Gibraltar nursing graduates – Numbers and GHA contracts offered

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Clerk: Question 828. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, how many students successfully completed the BSc in Adult Nursing at the University of Gibraltar in August 2024, and how many from that cohort have been offered employment as staff nurses at the GHA under (1) zero-hour contracts, (2) fixed-term contracts, (3) permanent full-time contracts and (4) permanent part-time contracts, broken down by nationality and current country of residence. Have those contracts already commenced?
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Clerk: Answer, the Hon. the Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, 15 students completed the BSc in Adult Nursing at the University of Gibraltar in August 2024. 13 of those students have been offered employment as registered nurses at the GHA on permanent full-time contracts on successful completion of a 12-month probationary period. 2 will be offered a bank contract. The 13 permanent contract employees are British Gibraltarian nationals resident in Gibraltar, and their studies have been funded by the GHA or the Department of Education. All 15 individuals are British nationals resident in Gibraltar, with the exception of one individual who resides in Spain.
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Hon. J Ladislaus: Madam Speaker, we see that only two were denied employment and, again, we see both are foreign nationals, as has been confirmed by the Hon. the Minister. Could the Hon. the Minister give reasons? We find that there is a great shortage of nursing staff in Gibraltar, and also worldwide but we particularly seem to be having a problem with the numbers in our nursing cohort. Could the Hon. the Minister therefore confirm the reasons for turning down two individuals who successfully completed the course?
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Hon. G Arias-Vasquez: Madam Speaker, the Ministry does not get involved in HR issues, but the two individuals who were not successful in being offered full-time permanent employment were offered bank contracts with the GHA. What I am told is that the two individuals who have not been offered permanent posts were found suitable at interview and therefore were offered the bank positions and not permanent full-time contracts. The reality is that the vacancies were filled by the 13 nurses who completed their studies, and these 13 nurses are supernumerary to the complement because they will actually be doing a preceptorship for the next 12 months. So, the 13 nurses that are that are currently being employed will be offered a permanent full-time contract on the completion of their preceptorship in 12 months' time, but they are currently on a supernumerary basis in the GHA.
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Hon. Dr K Azopardi: Can I just ask the Minister does she have a have of number of how many nursing vacancies there are currently in the GHA?
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Hon. G Arias-Vasquez: Madam Speaker, as the hon. Member knows, if he wants specific information we need notice of the question. If the hon. Member were to ask me that question, we would, of course, provide that information.
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Hon. Dr K Azopardi: I appreciate that. I was just wondering whether in her notes the officials had given an indication. She is given quite a full answer on the intention to for these 13 to fill vacancies at the end of 12 months, so I thought perhaps she had a note in front of her that indicated how many vacancies there were now.
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Hon. G Arias-Vasquez: Madam Speaker, the stated intention, as I have said in numerous interviews, is to fill all locum posts, which include nurses on locum contracts, with full-time permanent contracts. These preceptorships, once they are completed, will be doing the same
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thing, so we intend to fill any vacancies that are currently covered by bank or locum with the full-time registered nurses who have completed their studies at the University of Gibraltar.

1375 **Hon. J Ladislaus:** Just one further question, and it may be that the Hon. the Minister does not have the answer in front of her; if so, I would then file. Is it correct that the nursing qualification that is provided by the University of Gibraltar is only valid in Gibraltar for practice within Gibraltar, or can nurses use the qualification elsewhere?

1380 **Hon. G Arias-Vasquez:** I do not have that information in front of me, but I am aware of what the answer is to that question. At the moment, if you complete a qualification at the University of Gibraltar, you are able to do a top-up in the UK. You do not have to do the full course; you are able to do a top-up to be able to practise in the UK as a nurse. We are currently in discussions with the Nurses and Midwifery Council in the UK in order to try to convince them to accept our qualification, because the course that you do in Gibraltar is the same course as you would do at a UK university. It is a question of recognition. But you are able to do a top-up to be able to practise in the UK.

Madam Speaker: Has the Hon. Ms Ladislaus finished? Yes, the Hon. Mr Sacarello.

1390 **Hon. C Sacarello:** Thank you, Madam Speaker. For the purposes of those watching, me included, would the hon. Member please clarify what she meant by bank contracts?

1395 **Hon. G Arias-Vasquez:** The GHA has a contingency of people it calls on when somebody is sick or on maternity leave etc., to cover the individual. We have a bank of people available to call as and when they are required.

Hon. C Sacarello: I thank the Hon. Minister for her explanation. It sounds rather like supply, Madam Speaker. Would that mean that it is effectively a zero-hours contract?

1400 **Hon. G Arias-Vasquez:** Madam Speaker, bank is used for a very specific purpose. It is on an as-and-when-required basis. We call those people as and when they are required. *(Interjection)*

Madam Speaker: Any other supplementaries?

1405 **Hon. D J Bossino:** Yes, zero-hours contracts.

Chief Minister (Hon. F R Picardo): And in exactly the same way as it was –

Madam Speaker: Next question.

1410 **Hon. Chief Minister:** – for 16 glorious years between –

Hon. D J Bossino: You are just calling it something different.

1415 **Hon. Chief Minister:** No, it has always been called that, before the term ‘zero-hours contract’ existed.

Hon. D J Bossino: Ah, it is a zero-hours contract.

1420 **Hon. Chief Minister:** No, not necessarily, because usually – *(Interjection)*

Q829-30/2024
Nurses and nursing assistants –
Numbers employed by GHA

Clerk: Question 829. The Hon. J Ladislaus.

Hon. J Ladislaus: Please provide figures as to the number of nurses and nursing assistants that were employed by the GHA and in post as at 15th August 2023 and 15th February 2024.

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 830.

Clerk: Question 830. The Hon. J Ladislaus.

Hon. J Ladislaus: Please provide figures as to the number of nurses and nursing assistants that were employed by the GHA and were in post as at 15th October 2024.

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

Hon. G Arias-Vasquez: Madam Speaker, in answer to Question 829, the GHA had the following nurses and nursing assistants employed and in post on 15th August 2023 and 15th February 2024. On 15th August we had 389 nurses and 106 nursing assistants. On 15th February 2024 we had 412 nurses and 99 nursing assistants.

In answer to Question 830, the GHA had 390 nurses and 92 nursing assistants in post as at 15th October 2024.

Hon. J Ladislaus: I am grateful. Madam Speaker, could the Hon. the Minister confirm whether that is full complement or we are under full complement at the moment for nursing staff?

Hon. G Arias-Vasquez: Madam Speaker, I do not have that information available to me, but it is publicly available information. You can check the Estimates Book and see what the complement is, and contrast and compare. (*Interjection*) Apologies, but it would be normal to be under complement.

Hon. J Ladislaus: Could the Hon. the Minister confirm whether it is normal to be over 200 nurses under complement? That is, again, the information that we are receiving, that we are over 230 nurses under complement as it stands, which is quite troubling to hear, so could the Hon. the Minister perhaps confirm whether that is the case?

Hon. G Arias-Vasquez: Madam Speaker, it is slightly concerning that we are relying on information that they are receiving when we have a Book that actually gives you the information on a concrete basis. I would suggest that we look at the Book. That is not the information that we have, and therefore we are not concerned.

Madam Speaker: Supplementaries?

Hon. J Ladislaus: Madam Speaker, could the Hon. the Minister perhaps confirm whether we are understaffed in terms of nursing staff, both nurses and nursing assistants?

1470 **Hon. G Arias-Vasquez:** Madam Speaker, all the vacancies that I receive which are in complement are approved.

Madam Speaker: Any other supplementaries?

1475 **Hon. J Ladislaus:** Madam Speaker, from what we can see in the Book, it appears that the full complement would be 518 nurses. Perhaps my figure is slightly off, but we do seem to be a significant number under complement from reading the figures in the Book. 106 nurses is a significant number, would the Hon. the Minister agree?

1480 **Hon. G Arias-Vasquez:** Madam Speaker, far from the 200 we were initially accused of having under complement two minutes ago, if you actually check the Book ... Let me take the hon. Member to page 203. Let me do the hon. Member's homework for her. At page 203, there is a complement of 518.5 nurses. If you add 390 and 92, the answer is 482. This is not 200. In actual fact, let me take the hon. Lady to the figures as the complement was in 2011. In 2011, the complement was 305 nurses and 71 nursing assistants, so the complement has actually increased
1485 by 25% in 12 years. I would strongly suggest that in the future the hon. Member opposite looks at the Book and the figures and does not rely on hearsay. (*Banging on desk*)

1490 **Hon. J Ladislaus:** I am grateful for the lecture on that. Madam Speaker, 2011, as we can see, is a good while ago. It is 13 years ago and therefore a lot of things have happened, not least the growth of the population. The complement still appears to be approximately – and my maths is not great, but it still appears to be approximately a fifth under, because there are 500 and odd and we are almost a hundred under, no? So, would the Hon. the Minister please confirm that she is happy with the number of nurses available at the moment within the complement. (*Interjection and banging on desk*)

1495 **Hon. G Arias-Vasquez:** Madam Speaker, let's do the quick maths. We are 36 nurses under complement and let me repeat that each and every vacancy that we get that is in complement is approved. Thirty-six is 164 of the 200 vacancies that we were informed about five minutes ago.

1500 **Hon. Dr K Azopardi:** Taking the emotion out of this debate, if I may for a second, I am not sure I am following the hon. Member's reading of the numbers, because on page 203, at the bottom, there is a figure of 492 full time, full-time equivalents 518, as I understand it. The Hon. Minister has given the figure of 390 nurses, so perhaps she will explain why she says it is 36.

1505 **Hon. G Arias-Vasquez:** Madam Speaker, that figure at the line includes 97 nursing assistants, so the figure I have given is 390 nurses and 92 nursing assistants.

Madam Speaker: Any other supplementaries? Next question.

Q831/2024
GHA staffing levels –
Contingency plans re land Frontier disruption

1510 **Clerk:** Question 831. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, what contingency plans are in place to ensure that the GHA remains at optimal staffing levels in the event of disruptions at the land Frontier?

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

1515 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the GHA has been working extensively to minimise risk and ensure staffing levels remain safe in the event of disruptions at the land Frontier. The work includes reviewing all rotas to ensure locally based staff are on duty for the week beginning on 10th November 2024; additional staff training in the event of staff redeployment for critical services; the deployment of newly qualified staff has been reviewed, and all clinical staff in managerial leadership roles are able to step into clinical care if necessary; and accommodation options to support staff are being reviewed.

1520 **Hon. J Ladislaus:** I am grateful. Could the Hon. the Minister confirm where the staff would be accommodated?

1525 **Hon. G Arias-Vasquez:** Madam Speaker, the GHA is looking at short-term accommodation at Europa Suites should this be required? This is not a question that it will be used, this is a question of should it be required. We are looking at all available options in case we require it.

1530 **Hon. J Ladislaus:** Madam Speaker, could the Hon. the Minister confirm what the capacity of that accommodation is, and will staff who do not live in Gibraltar be expected to remain in Gibraltar when they are on duty on consecutive days?

1535 **Hon. G Arias-Vasquez:** Madam Speaker, we are looking at possible accommodation for the staff. There is availability of up to 50 suites, should these be required. We are not looking at actively booking these suites. We are looking at these options in the case that they are required.

Madam Speaker: The Hon. Mr Clinton.

1540 **Hon. R M Clinton:** Thank you, Madam Speaker. If I may ask the Minister, just for enlightenment: Europa Suites is not a place I am familiar with. Is this private sector accommodation or is this somewhere that Government has some new facilities being given this name that I am not aware of and is owned by the Government?

1545 **Hon. G Arias-Vasquez:** Madam Speaker, Europa Suites is university accommodation.

Madam Speaker: The Hon. Mrs Ladislaus.

1550 **Hon. J Ladislaus:** Madam Speaker, just one further question. Has the GHA made concerted efforts to recruit from outside Gibraltar and Spain, and how successful have those efforts been?

1555 **Hon. G Arias-Vasquez:** Madam Speaker, it depends on the role. The GHA is consistently making concerted efforts to recruit, in some roles, outside Gibraltar and outside the GHA. It depends on what vacancy it is that we are looking for. For example, speech and language therapists is one which automatically comes to mind. Speech and language therapists are incredibly difficult to recruit, so we do recruit outside Gibraltar. It depends on the speciality and it depends on what is required.

Madam Speaker: The Hon. Mr Bossino had a question.

1560 **Hon. D J Bossino:** Yes, if I may, and I am grateful to the Speaker for this opportunity. The Hon. the Minister for Health has enlightened this House about the Government's plans in relation to the potential temporary accommodation which is to be made available in the event that we

1565 endure difficulties at the Frontier as it impacts on medical staff. Is she able to give more details
beyond the location of what the Government is considering? She says that the Europa Suites are
available within the Gibraltar University complex. Is she able to, at this stage, give an idea of what
the likely cost of the Government is going to be, if any, to provide this accommodation which,
depending on how the negotiation in relation to the deal progresses ... and if it goes pear shaped
we may be facing that eventuality sooner than we think in a no deal outcome scenario?

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Chief Minister (Hon. F R Picardo): Madam Speaker, zero.

Madam Speaker: Next question.

1575

Q832/2024
St Bernard's Hospital nursing staff –
Shortages in last six months

Clerk: Question 832. The Hon. J Ladislaus.

1580 **Hon. J Ladislaus:** In the past six months, have there been any issues relating to shortages of
nursing staff within any of the wards at St Bernard's Hospital? If so, in which wards? Please provide
specifics as to the nature of the issues, whether they have now been resolved and how.

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

1585 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, there have
been a number of multifaceted issues with regard to shortages of nursing staff within St Bernard's
is, such as recruitment and retention of specialised nurses, including restrictions pertaining to a
post-Brexit era where worldwide demand for nurses is increasing more quickly than supply. For
these reasons, HMGoG has placed an emphasis on the University of Gibraltar's Adult Nursing
1590 degree, as well as the Advanced Healthcare Practitioners MSc, to deal with rising patient demand
now and into the future.

Unfilled vacancies across generic wards and in specialised areas such as maternity and Calpe,
have been filled by bank and agency staff as short-term stopgaps to ensure patient safety and care
delivery to patients. The short-term use of bank and agency staff to cover immediate gaps in
1595 service sits alongside a wider nursing workforce strategy. This strategy includes developing a
skilled local workforce that embraces the use of digital technology and specialist roles.

1600 **Hon. J Ladislaus:** I appreciate that recruitment may be an issue and that there are worldwide
shortages. Can the Hon. the Minister clarify what has been done in order to retain individuals once
they are actually employed at the GHA, because there seems to be a problem with retaining staff
at the GHA?

1605 **Hon. G Arias-Vasquez:** Madam Speaker, that is a very generic question. It depends what area
we are looking at. If the question is in relation to, for example, psychiatrists, on which I know there
is a follow-on question, the issue is that psychiatrists very often want an academic value to be
added to their practice. So, it is difficult to retain psychiatrists in Gibraltar because we do not have
that academic side to offer them.

1610 In terms of nurse retention, we actually retain a lot of nurses. Yes, sometimes there are
shortages in wards, but these shortages in the wards are the same shortages as would be
experienced in any other workplaces. There are shortages relating to illness and everything else,

and the organisation makes sure that those pressures are covered by either bank or supply staff, or indeed pulling staff from other wards. These are general working difficulties that any organisation faces, especially an organisation the size of the GHA.

1615 **Hon. Dr K Azopardi:** The hon. Lady gave an indication about the importance that she places on
the qualifications of the University of Gibraltar to deal with these issues, but I guess that is a
medium- if not long-term strategy because I imagine that the qualification at the University is
maybe ... I do not know if it is a three-year course or whatever. I think it used to be a three-year
1620 course in my day when we used to train what became RGN nurses, but presumably at the end of
that they are standard, non-specialised nurses because they would then need to go for specialised
training. If one of the core issues that the hon. Lady indicated at the beginning of her answer was
that particularly in some areas of specialisation they are having a problem, how is that going to be
dealt with? The cure of the university will not be that, because it will deliver general nurses and
presumably at a medium pace only.

1625 **Hon. G Arias-Vasquez:** Yes, Madam Speaker, the Hon. Leader of the Opposition is quite correct
in saying that the courses are three-year courses and therefore it will take three years to deliver
the current cohort of nurses, but the courses have already been running. One of my previous
answers refers to the previous cohort, which is now out and in the Hospital doing their
1630 preceptorships in these 12 months, so that is already a rolling programme. The basic nursing
course is a three-year course, but then there are courses that can be done, for example, for breast
care nurses, and those breast care courses are three-month courses. We are currently looking at
different options in order to provide those top up qualifications, so that we have specialised breast
care nurses, for example.

1635 In the case of specialisations and consultants, it is harder, but what I reiterate we are looking
to do is that if there is a need to employ a locum, then we do provide a locum, but what we are
trying to do is every time we employ a locum we are simultaneously trying to issue a notification
of vacancy so that that post is covered on a longer-term basis. I think the hon. Member opposite
and I are *ad idem*, in that we agree that indefinite contracts are the preferable way forward for
1640 our consultants. What we are looking to do is to make sure that we have a longer-term strategy
for all of our consultants in the Hospital, and slowly but surely this is being achieved.

Hon. Dr K Azopardi: Can she give us an indication, if she has the information with her, as to
the kind of area of specialisation where they have encountered more recent problems?

1645 **Hon. G Arias-Vasquez:** Madam Speaker, I am aware from my discussions with the GHA and the
Director General in particular that, for example, diabetes specialist nurses are very difficult to
recruit. I have referred previously to speech and language therapists. They are particularly difficult
to recruit. We are talking here about global problems, and the UK is experiencing the same
1650 difficulties in trying to recruit these specialisations.

Hon. J Ladislaus: Just to pull on that thread of specialisations, I appreciate that there is a
shortage and diabetes is one that I did have in mind, which has been filtering through as well, but
can the Hon. the Minister perhaps clarify whether there are any incentives in place for these
1655 nurses to be going towards a specialism, so to speak? Again, the information that I have is that
sometimes they lose, for example, allowances when they go off and train for this qualification and
specialism. What happens is that some individuals find themselves with less salary at the end of
the month, and that is not attractive to anyone. Could the Hon. the Minister clarify whether there
are any incentives that are being looked at in order to attract these nurses those specialisms?

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1665 **Hon. G Arias-Vasquez:** Madam Speaker, that is exactly the point that I was going to make. The incentive really is career progression, but what we are doing on a case-by-case basis is looking at what is happening. For example, diabetes specialist nurses: when we have one, we realise that there may be an issue of the nature that she is referring to, and we take it on a case-by-case basis and look at what that nurse would lose or stands to gain, or otherwise, but the incentive should always be career progression.

1670 **Hon. J Ladislaus:** Again, I do appreciate that, but if it is the case that they have been looked at on a case-by-case basis, could that not perhaps breed resentment within the cohort itself? Career progression is, of course, very important to many people, but unfortunately a lot of people have mortgages and bills and they have the cost of bringing up children to think about and factor in. Therefore, is it a financial bar to them to go down these routes, and should there be perhaps an equal footing for all nurses, rather than taking it on a case-by-case basis?

1675 **Hon. G Arias-Vasquez:** Madam Speaker, I would disagree with that analysis, respectfully, of the hon. Member opposite. I actually have a lot of people coming to see me personally because they want to go on specific courses to enhance their qualifications, so I do not think it is a bar in any way, shape or form, and I think that a lot of people do view it as career progression and have a longer-term view of where their career is going.

1680 **Madam Speaker:** Next question.

Chief Minister (Hon. F R Picardo): Madam Speaker, before you – I do not know what other word to use –

1685 **Madam Speaker:** You are all going to start making me very nervous if we are focusing –

Hon. Chief Minister: – call the next question, I wonder whether this might be a convenient moment for all hon. Members to take a short break and we might come back at 25 past the hour.

1690 **Madam Speaker:** Yes, let's come back at 25 past the hour.

The House recessed at 5.10 p.m. and resumed its sitting at 5.25 p.m.

Q833-35/2024
Consultant psychiatrists –
Temporary contracts, terminations and resignations

Clerk: Question 833. The Hon. J Ladislaus.

1695 **Hon. J Ladislaus:** Since 1st January 2019, how many psychiatrists employed by the GHA have not had temporary contracts renewed, and for what reasons?

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

1700 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will answer this question together with Question 834 and 835.

Clerk: Question 834. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, how many psychiatrists employed by the GHA have had their contracts terminated from January 2019 to date, and for what reasons?

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Clerk: Question 835. The Hon. J Ladislaus.

Hon. J Ladislaus: Since 1st January 2019, how many psychiatrists employed by the GHA have resigned?

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

Hon. G Arias-Vasquez: Madam Speaker, from January 2019 to 17th October 2024, 10 temporary locum contracts have not been extended, as the reason for cover has been resolved. This cover was in respect of long-term sick or vacant post whilst recruitment was being carried out.

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From January 2019 to 17th October 2024, the GHA has not terminated any consultant psychiatrists.

Two consultant psychiatrists employed by the GHA have resigned from 1st January 2019 to 17th October 2024.

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Hon. J Ladislaus: I am grateful. Madam Speaker, I know I ask this question quite regularly, but I ask it again: can the Hon. the Minister confirm whether she feels or is informed that the complement of psychiatrists is in fact what it should be and not below?

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Hon. G Arias-Vasquez: Madam Speaker, factually, the complement of psychiatrist is where it should be.

Madam Speaker: Do you have a supplementary? Next question.

Q836-37/2024

Neurodevelopmental pathway –

Time from referral to diagnosis; number of child referrals and time from referral to assessment

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Clerk: Question 836. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, what is the predicted timeframe within which a diagnosis can be expected following a referral under the GHA's neurodevelopmental pathway?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Question 837.

1740

Clerk: Question 837. The Hon. J Ladislaus.

Hon. J Ladislaus: Madam Speaker, to date, how many children have been referred for assessment under the recently established neurodevelopmental pathway; and, on average, how long is it taking for an assessment to take place from the time of referral?

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

Hon. G Arias-Vasquez: Madam Speaker, it is difficult to predict the timeframe, as the GHA is currently working through the waiting list.

1750 Since the publication of the pathway, eight children have been referred for a suspected neurodevelopmental condition. However, we are currently working through the waiting list and as such are unable to accurately say how long it is taking for an assessment to take place from the time of referral. Additionally, it is not possible to determine how long it takes for the assessment to take place, as this is dependent on the specific needs of the child and their development.

1755 **Hon. J Ladislaus:** Madam Speaker, can the Hon. the Minister perhaps provide numbers as to how many children are on that waiting list?

1760 **Hon. G Arias-Vasquez:** Madam Speaker, since September 2023 when funding was approved for the ADOS which is the Autism Diagnostic Observation Schedule, 77 children have completed the pathway. Diagnoses for these 77 children include autism spectrum disorder (ASD) and ADHD. Additionally, some of these 77 children were not diagnosed with any condition. There are currently a further 25 children on the ASD waiting list.

Madam Speaker: Next question.

Q838-40/2024

UK Infected Blood Compensation Scheme – Scheme and inquiry to mirror UK; number of cases in Gibraltar

1765 **Assistant Clerk:** Question 838. The Hon. J Ladislaus.

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

1770 **Hon. J Ladislaus:** Madam Speaker, is there a compensation scheme in Gibraltar mirroring or similar to the Infected Blood Compensation Scheme in the UK which will provide financial compensation to victims of infected blood on a UK-wide basis, under which GHA service users who were infected by contaminated blood and/or blood products can apply for compensation?

1775 **Assistant Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Hon. G Arias-Vasquez: Madam Speaker, I will answer this question together with Questions 839 and 840.

1780 **Assistant Clerk:** Question 839. The Hon. J Ladislaus.

1785 **Hon. J Ladislaus:** Madam Speaker, will there be an inquiry in Gibraltar to mirror the infected blood inquiry in the UK which was set up to examine why service users in the UK were given infected blood and/or infected blood products; the impact on their families; how the authorities, including government, responded; the nature of any support provided following infection; questions of consent; and whether there was a cover-up?

Assistant Clerk: Question 840. The Hon. J Ladislaus.

1790 **Hon. J Ladislaus:** How many people in Gibraltar were infected after having received contaminated blood transfusions and blood products under the care of the GHA?

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

1795 **Hon. G Arias-Vasquez:** Madam Speaker, the GHA is aware of one patient who has received contaminated blood transfusions or blood products whilst receiving care in the UK. I can also confirm that the UK's infected blood compensation scheme is applicable to Gibraltar, and that Gibraltar, as with other British Overseas Territories, has been included in the legislation.

1800 As a consequence of Gibraltar being included in the UK legislation and the UK compensation scheme, the Government will not be conducting a separate inquiry. The fact is that the infections did not arise here and there is therefore nothing to inquire into here. Additionally, unfortunately, although Gibraltar did receive blood and plasma from the NHS Blood and Transplant Service during the 1970s and 1980s, we do not have records for this period, so cannot accurately say how many people may have received contaminated products.

1805 **Hon. J Ladislaus:** I am grateful. Madam Speaker, I am just taking apart what has been said here. There are no people, as far as the Hon. the Minister is aware, who have been contaminated by blood products in Gibraltar. Nevertheless, we do not have records going back that far – am I understanding it correctly? – so we cannot know, really, the scale of whether there are any infections locally or not. Is that correct?

1810 **Hon. G Arias-Vasquez:** Madam Speaker, it is highly unlikely that we would not have found out that there is someone suffering or that someone that had received the contaminated blood and that we would not have found out about it to this date. The answer to the question is that there is one patient who has received contaminated blood transfusions whilst receiving care in the UK. It is a problem that the UK had, and it was not a problem that Gibraltar ever had.

1815 **Hon. J Ladislaus:** Madam Speaker, could I urge the Hon. the Minister perhaps to look further into this, because I certainly am aware of at least one individual who has received such products, and therefore would the Hon. the Minister commit to looking to looking into this matter further? If there are no records that date back that far, perhaps there is some need for inquiring further, because this is a serious issue. If there are no records, perhaps there are individuals who have indeed been infected by blood products received from the NHS.

1825 **Hon. G Arias-Vasquez:** Madam Speaker, in this very session this afternoon we have relied on one instance of hearsay and have realised that the actual results are significantly incorrect. It is highly unlikely, with respect to the hon. Member opposite, that she would have heard of one case that we have not. The advice that I would give any patient who thinks that they may have received contaminated products is to contact the GHA and make the GHA aware of the fact that they fear that they have received contaminated blood and the GHA will, of course, carry out any relevant tests. We are aware of one patient who has received contaminated blood whilst receiving care in the UK, and that is the knowledge that we have to date.

1835 **Hon. J Ladislaus:** I am grateful. I certainly will be passing the information on to the individual in question, and of course if there are any further individuals who approach I will certainly send them the GHA's way. Can I just press on with one further question? If the GHA then finds that it is the case that there are more individuals who were infected by blood products – and we are saying obviously that they came from the NHS into Gibraltar – in the past, would the Hon. the Minister commit to perhaps an inquiry into this?

1840 **Hon. Chief Minister:** Madam Speaker, the hon. Lady's question spans from long before the Hon. Minister being Minister for Health from what I can sense. The answer the Government has given is that in the 1970s and 1980s we received blood from the United Kingdom. We have not

got records going back that far. Therefore, it is impossible for us to answer a question about that period of time. The hon. Lady has had an answer from the Government that says we know of one case where there has been contamination; it happened in the UK. She has got up and I think she said, 'We know of one case.' It may be the same case. Or is she saying that the case that they became aware of is another case, a different case, and that it happened in Gibraltar? If that was what she was saying, the Hon. the Minister told the hon. Lady we are not aware of that case. The GHA may be investigating that and many other cases of many related issues, but there have been no cases reported as being cases of contamination.

The thing I would say to the hon. Lady is that it would be remarkable – in fact, it would be extraordinary – if somebody believed that they had received contaminated blood and they go to see the hon. Lady, or any hon. Member opposite, instead of going to see a practitioner at the Gibraltar Health Authority to say, 'I believe I have received contaminated blood.' It would be really beyond the realms of what is likely that we would not be aware of such an instance, if it is in fact infected blood, and hon. Members opposite would be. That, Madam Speaker, is not something that I would consider to be at all within the realms of possibility and I would like to give comfort to people at home that they should not believe that there is the possibility that this is more widespread than has been the case identified by the Hon. Minister in her answer.

I would ask the hon. Lady and hon. Members opposite generally to reflect on what I have said. We have, of course, different ideologies, we defend different politics, but we are all in politics because we want to defend the people of Gibraltar. If somebody came to me and told me, as a politician, outside this House, that they believed they had received infected blood from the GHA, I would ask them, 'Which doctor have you been to who has told you that, and have you gone back to the GHA?' None of us would think that that is an issue that any Member of this House, on either side, would wish to tolerate, support or cover up. And so can I gently just ask hon. Members – and the hon. Lady knows I have the highest regard for her and for the way that she conducts herself in this House ... that actually this is not an area where it is very likely that the Government would be playing politics or doing anything other than giving the information that we have received empirically in respect of this very sensitive issue, where we entirely associate ourselves with the words that were shared by the chairman of the inquiry with the victims in the United Kingdom of the infected blood scandal, which unfortunately includes one Gibraltarian.

Madam Speaker: Next question.

Q841/2024
GHA and NHS –
Reciprocal arrangements

Assistant Clerk: Question 841. The Hon. J Ladislaus.

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Hon. J Ladislaus: Madam Speaker, what reciprocity arrangements are in place between the GHA and the NHS?

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, as has already been publicly announced, the United Kingdom and Gibraltar have a bilateral reciprocal health agreement under which residents of Gibraltar are entitled to receive free healthcare in the UK on the same terms as eligible UK ordinary residents, including access to elective treatment. This agreement applies only to citizens residing in Gibraltar who do not intend to stay in the UK

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for more than 30 days. Additionally, Gibraltar may refer an unlimited number of patients to the UK for free elective treatment, with the exception of planned maternity care.

Madam Speaker: Next question.

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Assistant Clerk: Question 842.

Madam Speaker: I had not spotted you, sorry.

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Hon. Dr K Azopardi: Sorry, Madam Speaker, I was having an aside with my hon. colleague.

My understanding is that some of these reciprocal arrangements go back a long time. Has there been any sort of review of these arrangements? Is the incarnation of the current agreement the same as was put in place many years ago, or is there a more modern reviewed set of arrangements? I am just really asking for the date of the agreements, if she has it with her, because it might just be the old agreements that I was familiar with, or there might be a more modern reviewed set of arrangements.

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Chief Minister (Hon. F R Picardo): Madam Speaker, if it is helpful to the House, this also pre-dates the Hon. Minister's appointment as Minister and relates to the post-Brexit arrangements. At the time that the Hon. the Leader of the Opposition was Minister for Health, we were members of the European Union, we had a bilateral relationship with the United Kingdom, we also had common membership of the European Union, and there were all sorts of issues that therefore came into play. These are post-Brexit arrangements agreed between Gibraltar and the United Kingdom after the coming into effect of the Withdrawal Agreement, so that Gibraltar continued to have the arrangements it had had since the 1970s but with such modification as was necessary as a result of our now bilateral relationship, which is not covered by the European Communities Act.

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Madam Speaker: Next question.

Q842/2024
GHA service level agreements –
Medical institutions

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Assistant Clerk: Question 842. The Hon. J Ladislaus.

Hon. J Ladislaus: Can the Hon. Minister please provide a list of the medical institutions with which the GHA has service level agreements in place?

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

Hon. G Arias-Vasquez: Madam Speaker, I now hand over a schedule with the information requested.

Answer to Question 842/2024

The Gibraltar Health Authority currently holds service level agreements or MoU's with the following providers:

Spain

Vithas Xanit International — General Specialist Tertiary Services

Vithas Parque San Antonio — Paediatric Services
HLA Jerez - General Specialist Tertiary Services
Quiron Marbella - General Specialist Tertiary Services
Quiron Campo de Gibraltar - General Specialist Tertiary Services
Clinica Universidad de Navarra — Specialist Oncology services
Genesis Care — Radiotherapy/Oncology
Clinica Medrano IVF Treatment
MD Anderson - Oncology
Miranza - Ophthalmology
Opivision – Ophthalmology

UK

Guys and St Thomas NHS
Moorfields NHS
Kings College NHS
UCLH NHS
Royal Marsden NHS

Under the UK/ Gibraltar Reciprocal arrangements we have access to all NHS providers the following ones are the most used, apart from the above listed:

GOSH NHS
Evelina NHS
Leicester Royal Infirmary NHS
Royal Brompton NHS
St Georges NHS

1925 **Madam Speaker:** Let's move on to the next question and I will allow supplementaries on this later.

Q843/2024

**Tertiary and private healthcare providers –
Pathways re advice and recommendations**

Assistant Clerk: Question 843. The Hon. J Ladislaus.

1930 **Hon. J Ladislaus:** Does the GHA have pathways in place to act upon advice and recommendations provided by medical professionals from tertiary healthcare providers? If so, is there a distinction between the policy relating to advice obtained from tertiary healthcare providers that service users have been referred to by GHA medical professionals and private healthcare providers from which medical advice has been directly sought by service users?

1935 **Assistant Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

1940 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the GHA operates a comprehensive and robust system of pathways to act upon the advice and recommendations provided by tertiary healthcare providers. This is an extensive and multifaceted topic, as it touches upon the entirety of our healthcare system and its capacity to integrate expert input into patient care at all levels.

1945 The GHA collaborates closely with a wide range of tertiary centres through formal mechanisms such as multidisciplinary team meetings and remote clinics to ensure that our patients receive the most appropriate care. In addition to this, there are more informal, yet equally vital, channels of communication, such as ad hoc telephone consultations and emails between GHA clinicians and their counterparts in NHS centres. These pathways are crucial for ensuring that the latest expert

advice is incorporated into our care protocols. Moreover, the GHA regularly commissions specialist consultants from tertiary health centres to see patients directly in Gibraltar, offering advice not only to local healthcare teams but also to patients themselves. This allows for high-level tertiary input without requiring patients to travel abroad, ensuring streamlined and timely care.

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When it comes to medical advice obtained privately, the GHA takes a case-by-case approach, recognising that different scenarios require different responses. For instance, if a patient receives a cancer diagnosis in the private sector, supported by biopsy results or imaging, the GHA will often incorporate these findings directly into our treatment pathways without the need for repeat investigations. This ensures that urgent treatment is not delayed. However, in cases where a patient has received advice for elective procedures, such as surgery, from a private provider, it is standard practice for the GHA to conduct its own assessment before proceeding. This ensures that the decision aligns with our clinical guidelines and standards, and that all necessary resources are in place for optimal patient outcomes.

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In summary, the GHA has a sophisticated system of pathways in place to act upon both tertiary and private medical advice, always prioritising patient safety, quality of care and the need for careful clinical oversight.

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Hon. J Ladislaus: I am grateful for that comprehensive answer. I am not sure whether it is something that the Hon. the Minister has in front of her, but could the Hon. the Minister perhaps confirm what happens when the instance arises where somebody has been seen at a tertiary institution and then comes back to the GHA and the doctors are not in agreement? What happens at that point in time? Are they sent for a further assessment elsewhere?

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Hon. G Arias-Vasquez: Madam Speaker, there is a slight nuance in that question in that it depends how the patient goes to the tertiary institution in the first instance. On numerous occasions, patients will go to a tertiary institution and the advice received, particularly in respect of neurosurgical procedures, differs to the standard NHS practice. In that instance, we would always go with the advice received from our own clinicians and often get a second opinion from the UK. It is very unlikely that, other than in neurosurgical procedures, we would differ from the advice provided from a tertiary institution, but what often happens is that patients will go privately to a tertiary institution that is sometimes used by the GHA and get advice which our own clinicians would disagree because procedures in the NHS are different to procedures in that tertiary institution.

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Madam Speaker: Next question. Did the hon. Lady have a further supplementary? Yes.

Hon. J Ladislaus: Simply one point, just because I am pulling on the thread of what has been answered. The incident that I am aware of is to do with a patient who has been seen, my understanding is at Quirón and the doctors were not in agreement as to a procedure to be undertaken, which, as the Hon. the Minister will appreciate, now leaves the patient somewhat in limbo, and therefore I ask what would occur in that situation when it is not, for example, an English establishment, perhaps a Spanish establishment – what occurs there?

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Hon. G Arias-Vasquez: Madam Speaker, what often happens is that the GHA doctors usually seek a second opinion from the UK institutions, and in that instance we would go with whatever the clinicians would advise us to proceed with.

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Madam Speaker: Next question.

Q844-45/2024
GHA industrial action –
Action taken or threatened in past six months

1995 **Assistant Clerk:** Question 844. The Hon. J Ladislaus.

Hon. Dr K Azopardi: Madam Speaker, can we go back to the schedule on Question 842?

2000 **Madam Speaker:** Question 844 has been called, so let's have that question and then I will revert to Question 842 after that.

2005 **Hon. J Ladislaus:** Madam Speaker, can the Hon. Minister confirm whether any industrial action has been threatened by any employees of the GHA in the past six months, and, if so: (i) which departments have threatened to take industrial action and for what reason or reasons; (ii) the nature of the action they are threatening or have threatened to take; and (iii) whether resolutions have been reached in every one of those instances of threatened industrial action, or resolutions are still being explored?

2010 **Assistant Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

Hon. G Arias-Vasquez: Madam Speaker, I will answer this question together with Question 845.

2015 **Assistant Clerk:** Question 845. The Hon. J Ladislaus.

2020 **Hon. J Ladislaus:** Madam Speaker, can the Hon. Minister confirm whether any industrial action has been taken by any employees of the GHA in the past six months, and, if so: (i) which departments have taken industrial action and for what reason or reasons; (ii) the nature of the action taken; and (iii) whether resolutions have been reached in every one of those instances of industrial action, or they are still ongoing?

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

2025 **Hon. G Arias-Vasquez:** Madam Speaker, the administrative team from Ocean Views have recently threatened to take industrial action as they feel they are working beyond their pay grade. They threatened to work to rule. A review is currently taking place.

2030 The following departments have declared trade disputes at the GHA. On 20th September 2024, the ERS catering staff took industrial action regarding delays in the recruitment of the ERS catering manager role. Staff are currently working in union tee-shirts. The resolution is ongoing and we expect that to be resolved shortly.

On 1st October 2024, the GHA's general operatives declared a dispute, claiming they wanted an increase in salary as a result of working in a healthcare environment. No action taken as yet. The resolution is ongoing.

2035 On 4th October 2024, the St Bernard's Hospital catering staff claimed that the differential in pay with other grades has been absorbed by the new minimum increase across the public sector. Staff are seeking to restore the difference in pay. Staff are currently working in union tee-shirts. Resolution is ongoing.

Q842/2024

**GHA service level agreements with medical institutions –
Supplementary questions**

Madam Speaker: Let's revert to Question 842. Any supplementaries on Question 842?

2040 **Hon. J Ladislaus:** Can the Hon. the Minister confirm that when a service user is referred to a tertiary institution, it is just the institutions which I have been provided in this list where they are sent to, or whether they can be sent to another institution or establishment where they do not have a service agreement?

2045 **Hon. G Arias-Vasquez:** Madam Speaker, the institutions that are provided in this list are institutions where there is a service level agreement or an established relationship. In very exceptional circumstances, there will be people sent to other institutions.

2050 **Hon. Dr K Azopardi:** In terms of the Spanish institutions that are listed, I think there had been an indication at some point in the past – before she was the Health Minister, so I am not relying on her memory, clearly, but the corporate memory of the Government – that there might be a review of certain of the Spanish SLAs. May I just ask whether she has the information – if she does not, I will file a question – of the date of these agreements in respect of these Spanish health institutions?

2055 **Hon. G Arias-Vasquez:** Unfortunately, Madam Speaker, I have not been provided with the dates of these agreements. I know that there was a review ongoing, but I do not have the dates that the last agreements were signed with each of these institutions.

2060 **Hon. Dr K Azopardi:** That is fine. I will file a question, or we will anyway. May I ask on the UK MoUs bit of the principal answer: on the SLAs in respect of those five very well-known hospitals in London, can she give us a bit more information? I was not aware they had in place specific SLAs, so can she give an indication of why they have it? Clearly, I understand the speciality of some of these, but can she give us an indication of why they have specific SLAs and the purpose of them, and again, if she has the information, when those agreements were entered into?

2070 **Hon. G Arias-Vasquez:** Madam Speaker, I do not have the information on when the specific SLAs were signed, and I have not reviewed the content of those SLAs. What I can say is that recently on a visit to Guy's and St Thomas, for example, I know that the agreements between hospitals go beyond purely sending patients over. There are MDTs, there are training opportunities that are taken up by staff, so the service level agreements, I imagine, cover all these opportunities. There are specific areas which specific hospitals specialise in. For example, Guy's and St Thomas do urology and cardiac. Evelina is part of Guy's and St Thomas. Evelina covers most children's cases other than those that we specifically still send to Great Ormond Street Hospital (GOSH). There are specific reasons why we enter SLAs with specific institutions, but they do go beyond just the sending of patients over, to cover training opportunities, to cover MDTs, to cover the use of facilities – where the staff at the GHA have joined MDTs with the staff from Guy's and St Thomas, for example.

2080 **Hon. Dr K Azopardi:** I am grateful for that indication. It is just that in her answer now, in the supplementary, she has given the example of Evelina, and of course Evelina is the part of the answer that refers to the UK-Gibraltar reciprocal arrangements. It does not indicate that they have a specific SLA, although if that is the indication that the Hon. Minister is giving me, obviously we will take it on board. That is really why I was enquiring why specific SLAs have been put in place in

2085 relation to those institutions, because obviously access to institutions has been done under the traditional UK-Gibraltar arrangements in terms of patients, but if it is wider, then I am grateful if ... I appreciate she has given a broad answer. If she does not have specific information and if it is helpful, we will file more specific questions if that is better.

2090 **Hon. G Arias-Vasquez:** Madam Speaker, I would welcome the opportunity to provide more detailed answers and review the agreements to provide the information that the hon. Member is requiring, but to add to that, for example Evelina might not have a specific SLA, which is why it has not been included in that list, but they still send, for example, a paediatric cardiologist to Gibraltar who comes over regularly, so the SLA, I expect, covers those sorts of agreements.

2095 **Madam Speaker:** Next question.

Q846/2024
Start-up hub –
Progress update

Assistant Clerk: Question 846. The Hon. C Sacarello.

2100 **Hon. C Sacarello:** Could the Minister please provide a progress report on how their start-up hub is progressing?

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

2105 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the first part of the start-up hub will be a digital hub where businesses can link in and transact with government services. These are services that are presently spread across various government departments, and we are working towards bringing them under the same roof within the same department.

2110 **Hon. C Sacarello:** Madam Speaker, I would like to thank the Hon. Minister for her answer, which is slightly confusing. I was referring to the start-up hub in the manifesto, as per their commitment to get this going within 12 months of being elected. This was more customer facing from a government perspective. It was aimed at young companies, providing them an opportunity in a centralised location at nominal rent with staff helping out. Perhaps that is where the Hon. Minister was heading. Would the Hon. Minister be able to clarify that? Also, would the Hon.
2115 Minister be able to clarify the timing of this, seeing as this centralised-location start-up hub was meant to start within 12 months? Thank you.

2120 **Hon. G Arias-Vasquez:** Madam Speaker, we have frequent discussions with retail boards and with the Small Business Advisory Board, and the feedback that we got from these boards was that actually what they really wanted was a digital place where the services could be provided under one roof. So, whilst we are simultaneously exploring having a small hub centrally located, where people can go in cases where they have a problem with business, what we are really trying to drive and what we are really trying to achieve is an online portal whereby a business can obtain all the licences that that business needs, for example, where a business can interact with the
2125 Government for every licence it needs to start up, and also to continue their businesses, so any annual renewals etc. can be done online. That is what we are told by business is their priority.

2130 **Hon. C Sacarello:** Madam Speaker, I am grateful for the reply. That may be the case for established businesses. However, this promise of theirs, this manifesto commitment, was specifically directed at new companies. For new companies starting up, the biggest challenge is the one of cost, and what their commitment admirably look to tackle was to drive down costs by providing them with premises at a nominal rent. What the Hon. Minister is talking about here is somewhere where they can cut through red tape a little bit faster, where they can access the services a bit better, but it is completely different to what my question was. So again, I ask the
2135 Hon. Minister to clarify what the Government's position is on their start-up hub, as per page 47 of their manifesto commitment.

Hon. G Arias-Vasquez: Madam Speaker, we did commit to having a centrally located hub. We are looking to provide that centrally located hub in terms of providing businesses with a place
2140 where they can do business. Indeed, the feedback that we are getting from the GFSB and from the Chamber of Commerce is that even start-ups wish to obtain all their licences from one centrally located online hub, which is what we are trying to progress.

Hon. C Sacarello: Madam Speaker, I am afraid the question still has not been answered. I will
2145 ask it one last time: has the Government rescinded its decision and commitment to provide cheaper rent for start-up companies?

Hon. G Arias-Vasquez: Madam Speaker, no, we have not.

2150 **Hon. C Sacarello:** Sorry, I just want to add to that, Madam Speaker. In that case, when would the Government be willing to provide this, or when are they committed to provide it given their manifesto commitments was within 12 months?

2155 **Hon. G Arias-Vasquez:** Madam Speaker, there is a hub, which is located opposite the John Mackintosh Hall in a central location, where people can go for advice and interaction with government departments. There is a separate commitment, which I think is what the hon. Member is enquiring about, in relation to start-up rent, which we are looking into, which we have not complied with yet, but we have no intention to rescind from.

2160 **Madam Speaker:** Next question.

Q847/2024
Emergency potable water pipeline –
Update on rollout

Assistant Clerk: Question 847. The Hon. C Sacarello.

2165 **Hon. C Sacarello:** Could the Government please provide the House with an update on their rollout of the backup emergency potable water pipeline supply from Spain?

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

2170 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the position remains the same as set out in answer to Question 334/2024.

Hon. C Sacarello: Madam Speaker, thank you very much to the Minister for her brief answer. The way I understand it – please correct me if I am wrong – is that 80% of the pipework had been laid, it went up to somewhere like Landport and the rest of the pipe was yet to be built. My follow-up questions are: has the Government entered into a contract with any Spanish based supplier; and have the works accelerated at all, and is there any intention to?

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Hon. G Arias-Vasquez: Madam Speaker, I will proceed to read my answer to Question 334/2024. The second part of that answer states:

The cost to the taxpayer, both monetarily and in disruptive terms, means that the timing of this last section

– the 20% that the hon. Member is referring to –

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is currently under review. However, AquaGib is already in a position where the remaining section could be laid, under emergency conditions, before Gibraltar suffered any widespread outage of the potable water supply. It should be noted that this contingency option would never be immediately available, because Spain does not have a water supply point at the border and works to connect would be required at the Spanish side of the border.

As I have confirmed, the position remains the same.

Hon. C Sacarello: So, just for clarification purposes, Madam Speaker, what the Government is saying here is that this emergency backup supply line is not, in fact, an emergency backup supply; it is a plan for an emergency backup supply line.

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Hon. G Arias-Vasquez: Madam Speaker, I refer the hon. Member to my previous answer.

Madam Speaker: Next question.

Q848/2024

Business Nurturing Scheme – Number of applications and number successful

Assistant Clerk: Question 848. The Hon. C Sacarello.

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Hon. C Sacarello: How many companies have applied for and how many companies have been successful in applying for a loan under the Government's Business Nurturing Scheme since October 2023?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the Gibraltar Business Nurturing Scheme was replaced by the Gibraltar Enterprise Scheme that was launched by the Hon. Vijay Daryanani on 16th August 2023. Therefore, no applications have been received under the Gibraltar Business Nurturing Scheme since October 2023.

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Hon. C Sacarello: Madam Speaker, thank you to the Hon. Minister for her reply. In that case, could she kindly supply the figures for the replacement Enterprise Scheme?

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Hon. G Arias-Vasquez: Madam Speaker, I would advise the hon. Gentleman opposite to ask me about the Gibraltar Enterprise Scheme and I will reply about the figures relating to the Gibraltar Enterprise Scheme.

2210 **Madam Speaker:** Next question.

Q850/2024
MT Ecoglory –
Update re collision at North Mole

Assistant Clerk: Question 850. The Hon. D J Bossino.

Hon. D J Bossino: Please provide an update to this House as to the collision of a vessel at the North Mole which we understand occurred on 16th October 2024.

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, on 16th October, *MT Ecoglory*, a vessel operated by Green Ports Gibraltar Ltd, came into contact with the extension jetty at approximately 0710hrs. As a result of this contact, the vessel suffered a localised area of damage to the hull, well above the waterline. No pollution or injuries were caused by the contact. The vessel is undergoing preparations to proceed to Gibdock for the consequent repairs.

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Hon. D J Bossino: I am grateful to the Minister for that answer. Is she able to enlighten the House as to the circumstances of how ... I just find it funny how it has been described by her officials. The 'contact' in my language is a crash against the jetty, because I have been shown photographic evidence and I have seen the not unsubstantial gash that was caused on the vessel. Is she able to enlighten this House as to how that happened? Was it any deficiency in terms of the systems that we have in place in the Port, or things like that, which would give rise to concern to her, and whether anything needs to be put in place as a result?

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Hon. G Arias-Vasquez: Madam Speaker, interestingly, I have the answer to that question. The master of the vessel explained that as he proceeded to cast off from the berth, a squall affected the area with an increased gust of wind which caused a temporary loss of control of the vessel. At the time, the vessel was in an unladen condition, making it more susceptible to influence by high winds. So, nothing to do with the port infrastructure.

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Hon. D J Bossino: So, basically what the Hon. Minister is saying is that it was an accident, in effect, that could not have been in any way addressed by any of the systems that the Port would have available to it to avoid such an incident from having occurred?

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Hon. G Arias-Vasquez: Madam Speaker, this was an act of God, it was an incident. However, as a result of this incident, the pilotage exemption certificate has been suspended by the Gibraltar Port Authority because it is unacceptable.

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Madam Speaker: Next question.

Q851/2024
GHA IVF treatment –
Access for single women

Assistant Clerk: Question 851. The Hon. the Leader of the Opposition.

2250 **Hon. Dr K Azopardi:** Madam Speaker, can single women access IVF treatment on the GHA?

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

2255 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the eligibility
criteria for IVF require that the woman be either in a heterosexual or same-sex partnership where
at least one partner must be a biological female with a uterus. The GHA's policy follows the
guidelines set out by the National Institute for Health and Care Excellence (NICE), which generally
recommend offering IVF to women in established relationships. These guidelines highlight the
significance of support systems in the parenting process. The Government is, nonetheless,
2260 reviewing this policy in partnership with the Ministry for Equality.

Hon. Dr K Azopardi: I am grateful. So, to be clear, the policy does not require the woman to be
married. That is how I understood it. That is correct, yes?

2265 **Hon. G Arias-Vasquez:** That is right. The woman either has to be in a heterosexual relationship
or a same-sex partnership. There is no question of marriage.

Madam Speaker: Next question.

Q852/2024
GHA complaints –
Numbers by month for 2021-24

Assistant Clerk: Question 852. The Hon. the Leader of the Opposition.

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Hon. Dr K Azopardi: Madam Speaker, how many formal complaints and informal complaints
(enquiries) were received by the GHA in the calendar years 2021, 2022, 2023 and 2024, breaking
down the totals for each respective calendar year by calendar month?

2275 **Assistant Clerk:** Answer, the Hon. the Minister for Health, Care and Business.

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

2280 **Madam Speaker:** All right, in the meantime, we will progress to Question 853.

ANSWER TO QUESTION 852

Year	Month	Complaints	Enquiries
2021	January	2	56
	February	6	154
	March	10	46
	April	9	41
	May	10	63
	June	5	46
	July	1	29
	August	4	10
	September	1	27
	October	3	16
	November	4	12
	December	4	22
2022	January	6	25
	February	1	24
	March	8	16
	April	0	74
	May	6	81
	June	8	57
	July	12	62
	August	8	76
	September	6	62
	October	4	79
	November	3	74
	December	6	46
2023	January	10	65
	February	13	57
	March	8	54
	April	4	30
	May	6	50
	June	2	35
	July	4	7
	August	6	35
	September	11	76
	October	7	62
	November	12	69
	December	9	50
2024	January	19	88
	February	15	67
	March	15	74
	April	8	96
	May	16	107
	June	7	102
	July	18	126
	Year	Month	Complaints
2024	August	18	142
	September	15	108

Q853/2024
Former Acting Pathology Services Manager –
Investigation re allegations

Assistant Clerk: Question 853. The Hon, the Leader of the Opposition.

2285 **Hon. Dr K Azopardi:** Madam Speaker, has the disciplinary hearing following the investigation of allegations concerning the conduct of the former Acting Pathology Services Manager been held; and, if so, what have the results of the disciplinary process been?

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

2290 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the GHA will not comment on individual internal HR investigations. However, it does confirm that all cases are dealt with in accordance with established policies.

2295 **Hon. Dr K Azopardi:** Madam Speaker, it is in the public domain that there has been an investigation in this case. It is in the public domain not least because there was an application for judicial review against ... I think it was the GHA, and certain details, although not details of the specifics, were uncovered but the chronology was clear. The ruling is available on the courts website. I am sure the Hon. Minister is aware that in that particular case there was an investigation where a person was interdicted with full pay on 30th March 2023 and at the time that the court considered the application for judicial review, the case was pending and the GHA had decided not to progress the disciplinary pending the outcome of the application for judicial review. She will be aware that the application for judicial review was dismissed. I am simply asking whether it has now concluded.

2305 **Hon. G Arias-Vasquez:** Madam Speaker, I refer the hon. Member to my previous answer.

Hon. Dr K Azopardi: Is the application still pending? Is the disciplinary hearing still pending?

2310 **Hon. G Arias-Vasquez:** Madam Speaker, the policy in these instances is that the Ministry does not get involved at all. Again, the Ministry did not get involved in the application, so the answer is I do not know whether it is still pending or otherwise. We do not comment on individual internal HR investigations and the Ministry certainly will not get involved in any HR issues related to the GHA.

2315 **Hon. Dr K Azopardi:** So, the Minister is saying that the Minister is not aware whether the disciplinary hearing is still pending on a matter on which there has been some interest in the sense that the particular person filed an application for judicial review against the Health Authority and was fairly high profile in that sense. Is the Minister really saying that she is not aware whether the disciplinary hearing is still pending?

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Hon. G Arias-Vasquez: Madam Speaker, the individual involved is no longer employed by the GHA. Therefore, there cannot be a disciplinary pending by the GHA. However, we are not going to comment on this issue any further.

2325 **Hon. Dr K Azopardi:** It is obvious from the application that was made for judicial review that this involved very serious allegations, which I am not going to repeat here but they are clear from the ruling that the court made on the application for permission, at least some of them are indicated there because there are serious allegations of conduct relating to that particular

2330 individual who worked in Pathology. We struggle to see on what basis the disciplinary hearing would not be taking place now, and that the Minister would not be aware, that she has not taken an interest in the particular case. This case has been in the public domain. It involves very serious allegations, one of which involves an allegation relating to something that happened that affected the former Director General, allegedly. Has she really not taken an interest in finding out whether the disciplinary was going to happen, or its conclusion?

2335 **Hon. G Arias-Vasquez:** Madam Speaker, the individual involved has resigned from the GHA and therefore there cannot be a disciplinary procedure by the GHA. The disciplinary procedure of the GHA bites on GHA employees. If the individual resigns from the GHA, there is no disciplinary procedure which the GHA can have against that individual.

2340 **Hon. Dr K Azopardi:** Given that the Hon. Minister is aware that the individual has resigned, can she confirm that the individual has been engaged by the GDC?

2345 **Chief Minister (Hon. F R Picardo):** Madam Speaker, the Hon. Minister is not responsible for the GDC, I am; and I am not responsible for the GHA, other than having overall superintendence in respect of who has their portfolios. So, if the hon. Gentleman wants to ask me a question in future about a particular individual in the GDC, and he does it in a way that is in keeping with the rules and you approve, then as Chairman of the GDC I shall, of course, answer.

2350 **Hon. Dr K Azopardi:** But given that he is on his feet, given that this case has been in the public domain at least because of the court decision, given that the Minister has indicated that the person has resigned, and given that he has responsibility for the GDC, is he not aware? If he is not aware, I will file a question, but is he not aware that that person has been engaged by the GDC?

2355 **Hon. Chief Minister:** Madam Speaker, there are a number of people who are engaged in the GDC at different times. If there were a concern about that person not being suitable to be engaged by the GDC, that person would not have been engaged by the GDC, or I would have been advised that that person should not be engaged by the GDC and that person would not be engaged by the GDC.

2360 As I have said to the hon. Gentleman, we do not mention names of people across the floor of the House, which sometimes makes it harder to know who we are talking about, but if he files the question and describes the person in terms that you are satisfied are adequate without offending the rules of the House about naming someone, and therefore I am able when I receive the question, with my team officials also, to sufficiently identify who we are talking about, I will then be able to give him an answer.

2365 Madam Speaker, somebody could do something that is very serious in one organisation and would render him not fit to be a part of that organisation, potentially. I am not making any judgement. Apparently it was a resignation here, there was not a resolution of a disciplinary, and the Hon. Leader of the Opposition will know that we should not prejudge things which are not judged by relevant determinative bodies, but they may still be people who can do other jobs of different, equal, more or less responsibility. Therefore, we should not just make the assumption that there would be any impropriety that somebody is employed by a statutory organisation which is designed to provide services to the Government across the board just because they might have determined for themselves, for whatever reason, that they are no longer able to discharge a clinical function in a different statutory organisation which is designed to provide patient care or analysis. Those two are completely different things. It is almost like saying, 'The person who resigned as a postman has now been engaged in another organisation to do something which has nothing to do with post: is the Hon. the Chief Minister aware?' If the hon. Gentleman gives me

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2380 the information, I may be able to give him a fuller answer, but at the moment I think we are flying a little blind on the subject.

2385 **Hon. Dr K Azopardi:** Madam Speaker, I am making no assumptions. I am happy to file a specific question, but can I just ask him this, as hopefully my final question on this particular question: is he saying today, on 23rd October, that he has not been involved in the decision to engage this person at the GDC?

Hon. Chief Minister: No, Madam Speaker, I am saying I would need notice of who the person is.

2390 **Hon. Dr K Azopardi:** Well, the notice is that it is the former Acting Pathology Manager and the name of the person is known to the person immediately to his left and she can whisper the name to him.

2395 **Hon. Chief Minister:** That is not appropriate parliamentary procedure, Madam Speaker, and as you have reminded us in the context of the ruling – which the hon. Gentleman missed because he was, I understand, engaged in a matter in the Supreme Court, which is his profession and where he makes the bulk of his remuneration, which is entirely appropriate – form does matter and therefore I am not going to rely on anything being whispered in my ear.

2400 I am going to ask that the hon. Gentleman, if he wants an answer to the question, files it appropriately so that we recognise whether or not the description he has given is an appropriate one and we are referring to the same person, because what might have been whispered in my ear, if anything had been whispered in my ear, might have been a Chinese whisper, Madam Speaker.

2405 **Madam Speaker:** Last question on this.

Hon. Dr K Azopardi: Yes, last question, Madam Speaker, and let's stop beating around the bush, shall we? We all know who we are talking about. Isn't it the case that the Minister and the Chief Minister are fully aware of the engagement of this person at the GDC and sanctioned it?

2410 **Hon. Chief Minister:** Madam Speaker we are aware that a few moments ago the hon. Gentleman referred the Hon. Minister to an issue which arose from a question that he had asked – I think it was standing in his name – and that when I have asked the Hon. Minister for an identity, she has given me a name, which is a whisper, and that he has said that that person – 'We are aware,' he has said – is engaged in the GDC. The GDC today involves a number of hundred people. I would need to check whether there are such terms of engagement. Given the name I have been given, Madam Speaker, I know that there potentially would be other issues in play, not the issues that the hon. Gentleman is referring to, which would mean that that person actually is not in direct government service. Therefore, Madam Speaker, it is all much more complex that the hon. Gentleman would wish us to be able to say confidently on our feet in a way that does not in any way expose us to being told subsequently that we have somehow misled Parliament, because the least of our intention would be to mislead Parliament. Therefore, the hon. Gentleman will want to ensure that we can give him the correct, full and proper answer to the question that he says he is so interested in, and no doubt following the proper parliamentary form, if you permit it, in a way that you might permit, he can file a question next time round, which will come to me as Chairman of the GDC for answer.

2425 **Madam Speaker:** Next question.

Q848/2024

Procedural –

Supplementary questions to Questions 848 and 852 to be taken later

2430 **Hon. C Sacarello:** Madam Speaker, apologies for the interruption. Could I raise a point of order regarding Question 848, please? I understand that the Hon. Minister informed the House that the Business Nurturing Scheme was no longer in existence. However, if you refer to the Government's website, in bold and up to date, at today's time, is a whole page on the Business Nurturing Scheme with £250,000 and an application form. I am certain that the Hon. Minister would not be misleading this House, but for *Hansard* and for the record, could we state that this scheme is –?

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Madam Speaker: First of all, I would ask the hon. Member to point me in the direction of which rule has been contravened, so that I can deal with the point of order correctly.

2440 **Hon. D J Bossino:** Well, the rule which the Opposition wishes to avail itself of is Rule 16(5)(i), which deals with the ability on the part of the Opposition to ask supplementary questions, and with your permission, Madam Speaker, we would want to give the Hon. the Minister the opportunity to correct the response.

2445 **Madam Speaker:** Then it is not a point of order. The hon. Member is asking for leave to ask a further supplementary question after this question has been closed, because he has further information that may be of public interest, but that is not a point of order.

2450 **Hon. D J Bossino:** I am grateful for that clarification, and yes, I think if the question could be allowed ... There is no rule which sets out when the supplementary question should be asked. Ordinarily, it is asked after the hon. responder has provided the answer. We do so in order to give the Minister the opportunity to clarify the position, so that we avoid her falling into the trap of misleading the House, perhaps, in an innocent way and unintentionally.

2455 **Madam Speaker:** All right, I will come –

2460 **Chief Minister (Hon. F R Picardo):** Madam Speaker, if I might, just in the context of what the point of order has been, the Government that I lead has never taken the point that supplementaries need to be asked after the question, and we rely on Madam Speaker's discretion to determine whether, for example, when we pass a schedule, it is convenient to look at matters and then have the opportunity to come back to them. In this instance, of course, it is a matter entirely for Madam Speaker's discretion, as ever, but we have to be careful that we do not find ourselves constantly going back on the Order Paper because a Member of the Opposition has looked at something on a website and wants to come back.

2465 In this instance, I would generously accept that it is an attempt by hon. Members to permit a Minister not to fall foul of the most heinous of parliamentary offences, which is to mislead the House, but we would have to be very careful not to be going backwards constantly. Indeed, as I am fully aware of what the answer is, and it will demonstrate that the ones who might have ended up misleading the House if they had pursued the point further might have been them, I would urge that Madam Speaker does exercise the discretion in this instance to permit the
2470 supplementary.

2475 **Madam Speaker:** The Hon. the Chief Minister and the Hon. Mr Bossino are both right in that there is no rule that says that further supplementaries cannot be allowed, but I do caution myself against falling into the trap of revisiting questions, because in this digital age questions can be followed up *ad nauseam*, almost, and I do not propose to do that. On this occasion I will allow the

supplementary to be put for the reasons that the Hon. Mr Bossino has given, but I would propose that we finish this tranche of questions and before we move on to the next Hon. Minister I will allow this supplementary to be put. We were moving on to Question 854. After that, I will allow supplementaries to Question 852 and after that we will revisit Question 848. *(Interjection)* You can remind me of that ... Let's take Question 854 and then you can point me in the right direction.

Q854/2024

**Former Acting Pathology Services Manager –
Report following investigation re allegations**

Assistant Clerk: Question 854. The Hon. the Leader of the Opposition.

Hon. Dr K Azopardi: Madam Speaker, has the Minister seen a copy of the report following the investigation that examined allegations concerning the conduct of the former Acting Pathology Services Manager?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): No, ma'am.

Hon. Dr K Azopardi: May I ask why not?

Hon. G Arias-Vasquez: Madam Speaker, whilst I was made aware of the ongoing investigation in my biweekly meetings with the Director General, I was never provided with a copy of the report. It is not for me, as a Minister, to get involved in these types of matters. In fact, I am often reminded that I should not get too involved in matters of the GHA, particularly HR and clinical issues. There needs to be a separation between my role and the role of the Director General, the Director of Workforce and, indeed, the Chief Secretary.

Hon. Dr K Azopardi: I see, but given that this this case, as I said earlier when putting questions on the previous matter, has been in the public domain, where it is obvious that there are serious allegations at stake, one of which is that the person abused his position and delayed the biopsy of a particular patient – that is all in the public record, it is in the it is in the judgment – doesn't the Minister think that given the fact that that case came into the public domain, she should show an interest in finding out the results of the investigation before the Government considered whether to engage the person through the GDC?

Chief Minister (Hon. F R Picardo): Madam Speaker, the hon. Gentleman knows from the answers we have given to the previous questions that I have not confirmed that the person has been re-engaged with the GDC, so I would refer him to everything I said before about him putting the question next time round, if he wishes for confirmation of that, which now amounts to his assumption that that is the case.

Madam Speaker: Next question.

Q852/2024
GHA complaints –
Supplementary questions

2515 **Assistant Clerk:** We go back to Question 768. The Hon. C Sacarello.

Hon. Dr K Azopardi: If I may, I had my schedule, which was Question 852. I am in Madam Speaker's hands as to whether you want to jump to Mr Sacarello or take this one.

2520 **Madam Speaker:** I thought I had made it clear how we were going to proceed, but if the Hon. the Leader of the Opposition wants to ask his supplementaries on Question 852, we can take that now.

2525 **Hon. Dr K Azopardi:** Yes, Madam Speaker, I had understood, when you said finish this tranche, that I would be able to ask my tranche bit.

Madam Speaker: I meant the tranche of the Hon. the Minister for Health, Care and Business, but it does not matter. We will take supplementaries to Question 852.

2530 **Hon. Dr K Azopardi:** Madam Speaker, this is a question to the hon. Lady with her Health hat. I am grateful for the schedule she has given me. Does she have any more information in relation to the schedule? She may have asked these questions when she obtained the schedule, which I had requested, that under the enquiries bits you can see that there is a kind of ... not a numerical pattern ... there is no out-of-order number. They are generally lower than 20 during every month
2535 when it comes to the complaints, but in terms of enquiries the numbers are quite haphazard. For example, just going to 2021, in February there are 154 and in August there are 10. Can she help me with how they categorise enquiries? It is short, obviously of a formal complaint, but what does it span? Does it mean something that could turn into a complaint, or could it be something completely different?

2540 **Hon. G Arias-Vasquez:** Madam Speaker, in fact, that precise date, February 2021, is the date that the Covid vaccination was announced. The 154 in that month are enquiries relating to the Covid vaccination and when it would become available to the general public. We normally see –
2545 and I did ask the question when I got the schedule – that spikes are related to specific events. For example, there is a spike in February 2021, as the Hon. the Leader of the Opposition has identified, and there is another spike in January 2024. It goes up to 88 and then 96. Since January 2024, when we announced that there was a specific department within the Ministry that would be receiving complaints, the inquiries have spiked.

2550 The distinction is whether it is an enquiry, whether it is something that can be sorted out on the on the fly, as it were, by contacting different departments, or there is a formal complaint made against an individual or a formal investigation that needs to be carried out by the clinical governance team.

2555 **Hon. Dr K Azopardi:** I am grateful for that indication. So, for example, in the last few months when it is it is gone from ... I have not done the maths, but it looks like an average of 50 or 60 suddenly goes to a hundred – May 107, June 102, 126, 142, 108 – that is all, she would think, responsive to the fact that people are now aware that there is a specific number where they can make enquiries. Is that what she is saying?

2560 **Hon. G Arias-Vasquez:** Madam Speaker, yes, we have seen a spike. Every time we make an announcement there is a spike in the figures, which we welcome to signpost people to the right place.

Madam Speaker: Next question.

**Q768-72 and Q849/2024
Battery Energy Storage System –
Role of Solarcentury Africa Ltd and Zero Carbon Footprint Company;
SLA and maintenance contract; identification of parties involved;
confirmation of full amount payable**

2565 **Assistant Clerk:** We go back to Question 768. The Hon. C Sacarello.

Hon. C Sacarello: Madam Speaker, first of all, apologies to you and apologies to the House all round. It was certainly not my intention to offend anyone, and certainly not my intention to make a habit of this, but I refer back to the question which was the –

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Madam Speaker: We are on Question 768. I said we would finish with the questions and then we would come back to allow supplementaries on Question 848, so the question before the House now for the Hon. Mr Sacarello to pose is Question 768.

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Hon. C Sacarello: Madam Speaker, the Minister for Health, Care and Business claimed in her response to my question on Battery Energy Storage Solutions (BESS) in the February session of Parliament earlier on this year that Solarcentury Africa Ltd had been engaged in a purely supportive capacity, and on line 2082 of that month's *Hansard* the hon. Lady then proceeds to state that 'they are not the entity that we are buying from'. What happened between Thursday 22nd February 2024 and May 2024 to convert one of HMGoG's consultants into one of its key suppliers?

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Questions 769 to 772 and 849.

Assistant Clerk: Question 769. The Hon. C Sacarello.

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Hon. C Sacarello: Was the BESS service level agreement or maintenance contract subject to the general tender process?

Assistant Clerk: Question 770. The Hon. C Sacarello.

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Hon. C Sacarello: Could the Minister please name all the parties involved in the BESS deal, directly or indirectly, whether mentioned in the press or omitted from it?

Assistant Clerk: Question 771. The Hon. C Sacarello.

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Hon. C Sacarello: Will Solarcentury Africa Ltd be carrying out the maintenance of the BESS directly or will this fall on Calpe Electrical Ltd? What is the fee arrangement between HMGoG and

the contracted party, and what is the duration of the maintenance contract or service level agreement?

2605 **Assistant Clerk:** Question 772. The Hon. C Sacarello.

Hon. C Sacarello: Can the Hon. Minister confirm if the £16.5 million consideration payable for the delivery of the BESS project represents the full amount payable to all parties?

2610 **Assistant Clerk:** Question 849. The Hon. R M Clinton.

Hon. R M Clinton: Madam Speaker, can the Government advise how the Battery Energy Storage System is to be financed, and what is the role of Zero Carbon Footprint Company in that regard?

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

Hon. G Arias-Vasquez: Sorry, Madam Speaker, I am just going backwards and forwards trying to get the answers. Just bear with me one second.

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The BESS service level agreement was subject to general tender processes. A notice for expressions of interest was issued on 18th July 2023 with a tender process conducted thereafter by Solarcentury Africa Ltd. This is public information and could have been verified by the hon. Member opposite. Solarcentury Africa Ltd are not supplying the material – my reply was consistent – but instead are procuring the materials effectively on behalf of HMGoG through a main contractor.

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In answer to Question 770, the parties involved in the BESS project in some capacity are North Mole BESS 1 Ltd, Zero Carbon Footprint Company Ltd, the Gibraltar Electricity Authority, Solarcentury Africa Ltd and Calpe Electrical Ltd. Calpe Electrical Ltd will undertake the maintenance for the initial period of three years overseen by Solarcentury Africa Ltd, who have expertise in this area. The maintenance fee is included in the overall figure of £16.42 million.

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In answer to Question 772, this is indeed the case and is broken down as follows. HMGoG's contribution on this project is around £9.79 million and the approximate cost of the Build, Own, Operate and Transfer (BOOT) Scheme for a period of three years is £6.63 million, including inflation projections. The build of the Battery Energy Storage System is being financed by Solarcentury Africa Ltd and Zero Carbon Footprint Company Ltd. Subsequently there is a BOOT scheme for a period of three years that will be paid by Zero Carbon Footprint Company Ltd from contributions from the Gibraltar Electricity Authority.

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In relation to Question 849, whilst participating, under the UK umbrella, in the European Union Emissions Trading Scheme (EUETS), the GEA was purchasing carbon credits to offset carbon emissions. The intention was that these moneys would be reinvested in future green or renewable projects in Gibraltar. The BESS is one such project and the initial contribution by Zero Carbon Footprint Ltd will be funded from these moneys.

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Hon. C Sacarello: Madam Speaker, rather a lot to go through. Thank you to the Hon. Minister for her replies.

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If I can start with Question 768, the way I understand it is that the procurement was carried out by Solarcentury, but they are not actually supplying the unit. Could the Minister, just for clarity's sake, confirm who is the actual supplier, please?

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Hon. G Arias-Vasquez: Madam Speaker, the actual supplier is Calpe Electrical Ltd.

Hon. C Sacarello: Thank you, Madam Speaker, in which case I will move on to Question 770. Solarcentury's own press release did allude to the appointment of Calpe Electrical for the EPC. That is the engineering, procurement and construction process. Please could the Minister provide the House with details of Calpe's experience in energy infrastructure?
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Hon. G Arias-Vasquez: Madam Speaker, it is not for the Government, the GEA or this House to provide that information. Solarcentury Africa Ltd undertook that process and confirmed that Calpe Electrical was the right party to provide the equipment. Therefore, I am unable to answer that question.
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Hon. C Sacarello: Madam Speaker, a quick internet search will reveal Calpe Electrical Ltd has no website of its own, at least none that is clearly visible. Indeed, there is evidence of a link to a well-known air-conditioning manufacturer, which is far removed from the specifications and technical dexterity required for this type of job. Does the Minister really expect the public to believe that such a company can seriously conduct the job successfully without third-party assistance? Can the Minister also expect the public to believe that it is of no concern of hers or the House's to know that this company is capable of carrying that out at great expense to the taxpayer?
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Hon. G Arias-Vasquez: Madam Speaker, the insinuation in that comment is quite grave. For the avoidance of doubt, a tender was awarded, a tender process was gone through and Solarcentury Africa Ltd determined that they were the best people for the job. So, as far as we are concerned, the correct tender procedure was carried out, an expression of interest went out, as is required by law, and Solarcentury Africa Ltd determined that Calpe Electrical was the best party for the job. In that case, yes, we would expect that the taxpayer is entirely on board with the fact that Calpe Electrical is the best party for the job.
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Hon. C Sacarello: Madam Speaker, does the Hon. Minister know how many electrical engineers Calpe Electrical Ltd have, or mechanical engineers, or cost accountants, or procurement executives? Or is the public expected to just swallow the fact that the money has been well spent and that no research or understanding is necessary?
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Hon. G Arias-Vasquez: Madam Speaker, there is a contract and a process which is followed. The process is a tender process, as is required by law. The contract requires a certain standard to be met. In fact, there is a BOOT contract to ensure that standards are met. So, it is not for the public to swallow or otherwise. Solarcentury Africa will be held to account because of a contract that has been put in place after a tender process. Calpe Electrical will be held to account because they have also entered a contract with Solarcentury Africa Ltd after the correct tender process was pursued. I would invite the hon. Member to determine how it is that he would like a tender to be awarded if it is not via the proper process.
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Hon. C Sacarello: Madam Speaker, I am not going to answer that question. I will just go on to my next question, Question 772. Does the Hon. Minister believe that this represents good value for money, as in a return to the taxpayer? She has given me a breakdown of the cost. I would be grateful if she would reply as to whether she believes that this is good value for money.
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Hon. G Arias-Vasquez: Madam Speaker, I think it is the tender process itself which is being questioned by the hon. Member opposite. I am unable to go into the tender process and it is entirely inappropriate that I, or any other Minister or any other Member of Parliament go into the tender process. A tender process is a process which is started and then runs in and of itself. There
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is a procurement board set up and it is carried out pursuant to legislation. I think the hon. Member is somewhat mistaken as to the processes which go into the actual award of a tender.

2705 **Hon. C Sacarello:** Madam Speaker, what is entirely appropriate for this House to consider, and certainly for the taxpayer to know, is whether it is good value or not. I am not questioning the intricacies or the ins and outs of the process, just whether it was good value for money or not.

2710 My inquiries – as an aside, Madam Speaker – to a UK market leader in this sector, reveal that the average price per megawatt for a similar spec, namely 14 megawatts per hour, for one hour is around £7 million. That is £500,000 per megawatt. If we take simply the figure ... not the whole figure of £16.5 million but the reduced figure for the supply, £9.79 million, there is still a large discrepancy in that. Is this down to project cost financing or is this down to middlemen?

2715 **Hon. G Arias-Vasquez:** Madam Speaker, the allegations I am hearing are absolutely untenable. There is a procedure in place and, as I have broken down, the cost is £9.79 million. Is the hon. Member questioning the tender process, which I think is actually what you are doing? The tender process itself told us that this was the best value for money. If you are questioning whether £6.42 million is best spent in this way, that is a separate question, but the tender process told us that that is the best value that we are going to get.

2720 With all due respect, Madam Speaker, I do not think that either the hon. Member opposite or I are best qualified to determine what battery is needed in these circumstances. That is why we leave it to experts. That is why we have engaged an expert to tell us what type of battery we need, not a Google search that the hon. Member embarks on.

2725 **Hon. C Sacarello:** Madam Speaker, I will come up with a point of order now that it is relevant. I did not mention a Google search, nor was it a Google search. This was actually contacting a supplier directly.

2730 **Madam Speaker:** That is – (**Hon. C Sacarello:** A correction.) It is not a point of order, but the hon. Member is entitled to say that he did not mention a Google search.

2735 **Hon. C Sacarello:** In which case I will retract my point of order but correct the Hon. Minister by saying that this was not a Google search, it was a direct communication with a UK leading supplier. The question is relevant to value for money for the taxpayer. Whether or not the tender process was correctly followed, the question is whether ... I think the Hon. the Minister is getting stuck at point one, but point two looks beyond point one, and point two goes towards the value for money as a result of the tender process, for which the Government of Gibraltar is responsible.

2740 **Hon. G Arias-Vasquez:** Madam Speaker, when there is a tender process in place, the outcome of that tender process cannot be questioned. When we are told that the outcome of that tender process is that the best value is A or the best value is B, I am certainly not – and with all due respect, neither is the hon. Member opposite – the best place to ask questions about the suitability of the number of employees, the electrical engineers, the type of battery, or to call a random supplier in the UK to ask about what a battery would cost. I do not know what questions
2745 were asked, I do not know what the right questions to ask would be, and with all due respect I suggest that the hon. speaker – sorry, the hon. Member opposite; apologies, Madam Speaker – is also not best placed to ask a random supply random questions which he thinks will roughly provide the same outcome as a tender process.

2750 **Madam Speaker:** The Hon. Mr Clinton.

Hon. R M Clinton: Thank you, Madam Speaker. Looking at my Question 849, I am trying to understand the way the financing of this has been put together. Madam Speaker, bear with me while I just set out what we know.

2755 We know Solarcentury Africa is operating the scheme and has its subcontractors. I specifically asked about Zero Carbon Footprint Company Ltd because that arose during the Committee Stage of the Budget, in which they receive, apparently, a £1.5 million contribution budgeted for this year. We have heard the Minister tell the House that the Government contribution – I think she used the word ‘contribution’; I am happy to be corrected – was about £9.79 million. Obviously, 2760 the project is a much bigger cost. The parent company of Solarcentury Africa Ltd is, as she will know, BB Energy, and BB Energy on its website has an almost identical press release to the one the Government issued, except they added the information, after Calpe Electrical, that Sungrow will be the BESS equipment supplier.

Madam Speaker, what I am trying to understand, and maybe the Minister can assist the House, 2765 is how the cashflows will work, because obviously the equipment has to be ordered from Sungrow, who are specialist manufacturers of, I think, lithium battery cells. And who is putting the order with them? Is it going to be Calpe Electrical putting the order with them, or is it Solarcentury Africa putting the order with them? How is the financing work? Although the Minister mentioned something about purchasing carbon credits and other such matters, if she looks at the last 2770 available accounts of Zero Carbon Footprint Ltd, she will find that they have the sum total of £1,000 by way of debt. Sir Joe Bossano will know this company because I think it is a GDC-owned company. I do not believe it is actually – I am happy to be corrected – fully operational, but the accounts, as signed by the Financial Secretary, only show it has assets of £1,000 as at 31st December 2023. Could the Minister enlighten the House on how Zero Carbon Footprint will 2775 in any way, shape or form finance this arrangement? And how will the cashflows work? Obviously the equipment supplier, Sungrow, will want money in stages, or up front – I do not know what the arrangement will be. How will the money be put together in terms of Solarcentury Africa and Zero Carbon Footprint? I have not quite got that clarity from the Minister and I would be grateful if she could provide it to the House.

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Hon. G Arias-Vasquez: Madam Speaker, I am unaware of this company, Sungrow. Sungrow is probably the subcontractor or the entity which is providing the entity that we know, which is Calpe Electrical, with the equipment.

2785 The way that the funds will work is that the Government will provide the money to Zero Carbon Footprint Ltd. It will give this combination of the money that is currently in the carbon credits and the £1.5 million that was put aside in this financial year for this project. That contribution will be made to Zero Carbon Footprint Ltd, which will in turn fund North Mole BESS One Ltd, which will in turn give all the funds that are necessary to Calpe Electrical or Solarcentury Africa Ltd. I am unclear if the money goes ... Our BOOT deal is with Solarcentury Africa Ltd, so I imagine the money 2790 goes from North Mole One to Solarcentury Africa, and then Solarcentury Africa provides its subcontractor, which is Calpe Electrical.

Hon. R M Clinton: I am grateful to the Minister for that answer. I think I see with a bit more clarity how this will work. Can the Minister then effectively confirm to the House that the 2795 Government, when it says a contribution to Zero Carbon Footprint Ltd, is either giving it a loan or increasing its share capital? In terms of the Budget book, obviously there is a difference between an ongoing cost, recurrent, and a capital contribution, so is this going to be a capital contribution to Zero Carbon Footprint Ltd by way of an increase in share capital, or is it going to be by way of a loan?

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Hon. G Arias-Vasquez: Madam Speaker, I am unaware of the detail of how Zero Carbon Footprint Ltd will be obtaining the money. I imagine it is by increasing the share capital, but I am

not certain that that is the case. I can obtain that information if the hon. Member would ask the question in the next session.

Q848/2024

**Business Nurturing Scheme –
Supplementary questions**

2805 **Madam Speaker:** Next question. Is that the end of ...? All right, then, we will come back to Question 848. Any supplementaries? The Minister is aware that we are going back to Question 848. Any supplementaries that the Hon. Mr Sacarello or indeed any other hon. Member may have on that?

2810 **Hon. C Sacarello:** Thank you, Madam Speaker. For the purposes of the House, the government website currently displays a page on the Business Nurturing Scheme, including application and details of the amount of the scheme. Can the Hon. Minister please offer a little clarity on the matter in the discrepancy between the words that she mentioned before with regard to the scheme no longer existing and the fact that it is still prominent on the website?

2815 **Hon. G Arias-Vasquez:** Madam Speaker, I am grateful for the opportunity to clarify. Press Release 426/2024, which was issued on 12th June 2024, states that we are inviting new rounds of applications for the Gibraltar Enterprise Scheme. The scheme was launched as the Gibraltar Enterprise Scheme because there are several key changes from the previous scheme. The scheme is now called the Gibraltar Enterprise Scheme, and the website may not have been updated but the press releases have subsequently been issued updating what was the Business Nurturing Scheme and now calling it the Gibraltar Enterprise Scheme.

2820 **Hon. C Sacarello:** Madam Speaker, I thank the Hon. Minister for the clarification there. Could I just finally ask would the Minister please commit to removing that from the website? It is entirely misleading to people, not to mention businesspeople.

2825 **Hon. G Arias-Vasquez:** Madam Speaker, funnily enough, we have had no hesitation by applicants from applying under the correct scheme, notwithstanding the fact that the website may contain incorrect information. However, we will update the website.

2830 **Hon. D J Bossino:** Madam Speaker, given that we are dealing here with a change of nomenclature, what the Hon. the Minister is saying, in effect, is that the scheme is substantively the same scheme, which she expressed in her formal reply had been ditched by her predecessor, Minister Daryanani, which was the scheme referred to by my friend as the Business Nurturing Scheme. Given that we are dealing with, in effect, substantively the same scheme, can the Hon. the Minister now provide the answer that my friend was seeking in relation to the now called Business Enterprise Scheme?

2835 **Hon. G Arias-Vasquez:** Madam Speaker, I would suggest that the questions are phrased correctly and that we do not have to point the hon. Members opposite to the correct information, which is publicly available on a repeated basis, in order to ensure that accurate answers are provided.

2840 **Madam Speaker:** Next question.

Adjournment

Chief Minister (Hon. F R Picardo): Madam Speaker, I move that there should be no next question, at least not for today. I am not going to call a general election or anything rash like that, *(Laughter)* I am just going to propose that the House should now adjourn until tomorrow at three o'clock in the afternoon, when we might continue with everybody else's questions.

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Madam Speaker: I now propose the question, which is that this House do now adjourn to tomorrow at 3 p.m.

I now put the question, which is that this House do now adjourn to tomorrow at 3 p.m. Those in favour? **(Members: Aye.)** Those against? Passed.

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This House will now adjourn to tomorrow at 3 p.m.

The House adjourned at 7.00 p.m.