



PROCEEDINGS OF THE GIBRALTAR PARLIAMENT

MORNING SESSION: 9.30 a.m. – 2.15 p.m.

Gibraltar, Friday, 2nd October 2026

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The Gibraltar Parliament

The Parliament met at 9.30 a.m.

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

[CLERK TO THE PARLIAMENT: P A Borge McCarthy in attendance]

Questions for Oral Answer

HEALTH, CARE AND BUSINESS

5

Q295-297/2026

Gibraltar's Disclosure and Barring Service –
Expects the Service to become fully operational; expects to bring this before Parliament &
criteria and process

Clerk: Meeting of Parliament, Friday the 2nd of October 2026.

Answers to Oral Questions continued.

Questions to the Hon. Minister for Health, Care and Business.

10 **Clerk:** Question 295, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government provide an update on the establishment of Gibraltar's Disclosure and Barring Service and state when it expects the Service to become fully operational?

15 **Clerk:** Answer, the Hon. 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 296 and 297.

20 **Clerk:** Question 296, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government state what legislation it intends to introduce to provide the legislative framework for the Disclosure and Barring Service and when it expects to bring this before Parliament?

25

Clerk: Question 297, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government explain how the proposed disclosure and barring system will operate, including the criteria and process by which an individual may be placed on a barred list for regulated activity involving children or adults?

30

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, in answer to Question 295, the establishment of Gibraltar's Disclosure and Barring Service is progressing. The Government has appointed the service's first Chief Executive Officer, and the work is underway on the legislative and operational framework required to establish its functions, powers and responsibilities. The Government's intention is for this service to become operational in the new year. However, it would be premature to specify a definitive date at this stage as the relevant legislation and the final operational model are still being developed. The Government will provide a further update as the work progresses.

In answer to Question 296, the Government intends to introduce a dedicated legislation to provide the statutory creation and framework for Gibraltar's Disclosure and Barring Services. The precise title and form of the legislation have not yet been finalised. The important issue is that it will establish the service's statutory functions and powers and provide the legal framework for disclosure checks, regulated activity and Barring arrangements relating to children and adults. The legislation is currently being developed alongside the operational model for the service. The Government intends to bring the necessary legislation before Parliament once that work has been completed, with the aim of supporting the commencement of the service in the new year. A specific parliamentary date has not yet been fixed.

In answer to Question 297, the Government is developing a statutory disclosure and Barring system which will provide for disclosure checks and, where appropriate, barred lists for identifying adults prohibited from undertaking regulated activity with children and or adults. The precise definition of regulated activity and the statutory criteria for Barring will be established in the legislation currently being developed.

The intention is that an individual may be considered for Barring where relevant information indicates that they have engaged in conduct which has caused or placed a child or adult at risk of harm, or where there is an identified risk of future harm in connection with regulated activity.

A referral or allegation will not of itself result in a person being barred. Each case will be considered individually against the statutory criteria on the evidence available. The proposed framework will include appropriate procedural safeguards. Where applicable, an individual being considered for Barring will have an opportunity to make representations before a final decision is taken. Decisions will be proportionate and taken in accordance with the statutory framework, with any rights of appeal provided upon the future legislation.

Hon. A Sanchez: Madam Speaker, I am grateful to the Minister for that comprehensive answer. Could the Minister clarify what prompted the establishment of the Gibraltar Disclosure and Barring Service? Was it a result of a recommendation arising from a review or an investigation? Could she elaborate on this?

Hon. G Arias-Vasquez: Madam Speaker, in the current climate, we feel that it is appropriate for a Disclosure and Barring Service to be in place.

Hon. A Sanchez: And in respect of the legislation, could she clarify, is it the intention to bring stand-alone legislation or to amend existing legislation?

Hon. G Arias-Vasquez: Madam Speaker, the current intention is to bring stand-alone legislation for these purposes.

Madam Speaker: Next question.

Q298/2026

Gibraltar Disclosure and Barring Service –
Position of Chief Executive Officer

Clerk: Question 298, the Hon. A Sanchez.

85 **Hon. A Sanchez:** Can the Government confirm whether the position of Chief Executive Officer of the Gibraltar Disclosure and Barring Service was publicly advertised and subject to an open recruitment process and, if so, provide details of the recruitment and selection process followed, together with the salary applicable to the post, inclusive of any allowances, benefits or other
90 remuneration?

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

95 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will answer this question together with Question 301.

Madam Speaker: We are on Question 298.

100 **Hon. G Arias-Vasquez:** Apologies, Madam Speaker, the paper has got in the way. Madam Speaker, the Government announced the appointment of Mr Angelo Cerisola as the first Chief Executive Officer of Gibraltar's Disclosure and Barring Service on 2nd August 2026. The post was not publicly advertised. Mr. Cerisola is a serving senior public officer. At the time of his appointment, he held the post of Director for Services, Safety and Standards at the Care Agency, and he was assigned to lead the new service from within the public service rather than recruit
105 externally. Mr. Cerisola was identified by the Chief Secretary as the officer best placed to undertake the work required by the Chief Executive Officer of the Disclosure and Barring Service. The salary applicable to the post is £96,000.

110 **Hon. A Sanchez:** I am grateful for that answer, Madam Speaker, and given that the Disclosure and Barring Service is still being developed, and the framework is still being developed, could the Hon. Minister clarify perhaps under what existing legal or administrative authority the Chief Executive Officer has been appointed, and what functions and responsibilities he is currently undertaking pending the formal establishment of the service?

115 **Hon. G Arias-Vasquez:** Madam Speaker, the Chief Executive Officer will work alongside the Care Agency in particular. He will establish the framework. He is currently developing the policy and developing the framework within which that will work, and the aim is that he will work alongside committees such as the Child Protection Committee, the Adult Protection Committee, etc. I think there was a further question, but I cannot recall the third question that the hon. Lady
120 asked.

Madam Speaker: The question is, was there another part to your question which has not been answered by the Minister, or does that answer your question essentially? Yes.

125 **Hon. A Sanchez:** Now, the Hon. Minister, in her initial reply, mentioned that the individual appointed to the role of Chief Executive Officer was previously the Director for Services, Safety and Standards of the Care Agency. I appreciate she may not have this information at hand, but could she confirm whether there is somebody covering for that post at present, and whether it is the intention to advertise that post and go through a recruitment process for that post?
130

Hon. G Arias-Vasquez: Yes, Madam Speaker, it is not the question, but I am happy to answer it. There is an individual currently acting into that post, and it is the intention to take out that post and advertise it and recruit into it.

135 **Madam Speaker:** Next question.

[Q299/2026](#)
[John Mackintosh Home –](#)
[Serious safeguarding incident](#)

Clerk: Question 299, the Hon. A Sanchez.

140 **Hon. A Sanchez:** Further to the serious safeguarding incident at the John Mackintosh Home, which was brought to the Minister's attention, involving a resident gaining access to a window and sitting on its edge, placing the resident at serious risk of falling, can the Government state on which floor and in what area of the Home the incident occurred?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the incident occurred at JMW First Floor Assisted Bathroom.

150 **Hon. A Sanchez:** Madam Speaker, and without going into details of any personal details of the resident, and disclosing any confidential information, would the Hon. Minister be able to elaborate on how the resident was able to gain access to the window in the first place?

155 **Hon. G Arias-Vasquez:** Madam Speaker, the incident occurred in the bathroom. The resident was attending the bathroom, and the relevant window was in the bathroom.

Hon. A Sanchez: Could the Hon. Minister elaborate on whether any issues were identified in respect of the locking mechanism in respect of the window in the bathroom?

160 **Hon. G Arias-Vasquez:** Madam Speaker, a faulty security lock was identified in the bathroom and has since been remedied.

165 **Hon. A Sanchez:** Madam Speaker, the Hon. Minister states that a faulty mechanism or faulty lock was identified in the window in the bathroom, but in this specific instance, was it the case that the resident was able to access the windowsill and sit on the windowsill because of a faulty lock in the window, or was it the case that the window was not locked correctly and was perhaps left open on that particular instance? Which of the two was it?

170 **Hon. G Arias-Vasquez:** Madam Speaker, the information that I have is that it was a faulty window security lock, rather than anything else.

175 **Hon. A Sanchez:** Madam Speaker, would the Hon. Minister be able to clarify whether within the investigation that might have been carried out, it was determined whether there was any equipment that the resident may have used to be able to access the windowsill, to be able to get on the windowsill and to access the window and the windowsill?

Hon. G Arias-Vasquez: Madam Speaker, the information that I have is that she used equipment in the bathroom to be able to access the window.

180 **Hon. A Sanchez:** And has the investigation determined any issues, any corrective issues that need to be addressed so that these issues do not occur in the future?

Hon. G Arias-Vasquez: Yes, Madam Speaker. The faulty security lock was replaced, and the relevant windows were checked. The windows were checked throughout the entire building and
185 as an additional preventative measure, a second lock has been fitted to the assisted bathroom door, which is secured after each use. So increased checks of window security have also been implemented.

Madam Speaker: Next question.
190

[Q300-301/2026](#)
[John Mackintosh Home –](#)
[Safeguarding requirements relevant to the incident; conclusions reached & measures](#)
[introduced](#)

Clerk: Question 300, the Hon. A Sanchez.

195 **Hon. A Sanchez:** Can the Government state what supervision arrangements were in place for the resident at the John Mackintosh Home at the time of the incident and whether the resident's care plan or risk assessment identified any particular supervision or safeguarding requirements relevant to the incident?

200 **Clerk:** Answer, the Hon. 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 301.

205 **Clerk:** Question 301, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government state what investigation was undertaken following the incident at the John Mackintosh Home, what conclusions were reached as to how the incident
210 was able to occur, and what safeguarding measures have subsequently been introduced?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the GHA does not comment publicly on the specific supervision arrangements, safeguarding measures,
215 assessments, care plans or personal information of individual residents. This is fundamental to the protection of the confidentiality and privacy of residents under GHA's care. I can, however, provide assurance regarding the generic arrangements and processes in place at the John Mackintosh Wing and the actions taken following this incident.

220 All residents of the John Mackintosh Wing have individualised care plans and risk assessments which are regularly reviewed and updated. These assessments inform the support and level of supervision provided to each resident. I can confirm this was the case and satisfactory in place for this particular resident. An important principle of residential care is to balance risk mitigation and

safety with the preservation of dignity and functional independence. Residential care cannot and should not seek to eliminate all risk by unnecessarily restricting residents.

225 Supporting residents to retain as much autonomy as possible is itself an important component of gold standard care and helps to preserve capacity for independent living and therefore quality of life for as long as possible. The appropriate level of supervision is therefore determined according to assessed individual need and risk.

230 Following this incident, an internal investigation was undertaken in accordance with the home safety policy and safeguarding procedures. This included consideration of the relevant care and risk assessment processes, supervision arrangements and the physical environment. The investigation identified an environmental issue involving a defective window security mechanism which was addressed. Relevant windows were subsequently checked, and additional preventative measures were introduced.

235 It is also pertinent to note, without going into the individual circumstance of the resident, that the incident itself occurred within a period of approximately 8 minutes. Requiring residents who have not been assessed as needing continuous or enhanced observation to be physically checked at intervals of less than 8 minutes would represent a significant and disproportionate intrusion into their privacy, dignity and independence. That said, where enhanced or continuous
240 supervision is indicated by an individual's assessed needs or risk, this would of course be provided.

Following any significant incident, the GHA reviews both the circumstances of the incident and whether lessons can be learnt or additional measures introduced. That process was followed in this case and appropriate environmental and preventative measures were implemented as a result.

245

Hon. A Sanchez: Madam Speaker, I appreciate that the Minister cannot go into the particular details of the resident's specific care plan, but would she at least be able to say whether the conclusions of the investigation identified any shortcomings in respect of the supervision arrangements in place for the resident at the time of the incident occurring?

250

Hon. G Arias-Vasquez: No, Madam Speaker. As I have pointed out numerous times, the investigation identified an environmental issue which involved the defective window security mechanism, and that was addressed. The investigation did not identify any defects with any care plans.

255

Hon. A Sanchez: And after the incident occurred, would the Minister be able to confirm whether any changes have been made in respect of the supervision arrangements in respect of this resident's care plan?

260

Hon. G Arias-Vasquez: My understanding, Madam Speaker, is that no changes have been made to this resident's care plan.

Madam Speaker: Is there anything else? Next question.

265

[Q302/2026](#)
[Health and Safety reports –](#)
[Mount Alvernia](#)

Clerk: Question 302, the Hon. A Sanchez.

270 **Hon. A Sanchez:** Can the Government provide details of all Health and Safety reports concerning Mount Alvernia from the 1st of January 2020 to the present date, providing for each report:

- (a) the date it was prepared;
- (b) the position or role of the person responsible for preparing it;
- 275 (c) the concerns identified, broken down by the nature of the Health and Safety concern or risk;
- (d) the recommendations or corrective actions proposed;
- (e) the persons, positions or departments to whom the concerns or recommendations were reported or escalated;
- 280 (f) the corrective action taken, if any, and the date on which it was implemented; and
- (g) any concerns or recommendations which remain outstanding and the reasons why?

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

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

Madam Speaker: All right, that is quite lengthy, so we will come back to that in due course and continue with the next question for the moment.

ANSWER TO QUESTION 302

Health & Safety Reports and Actions - 2021-2024

Date of Report	Person Responsible for Report	Concerns Identified	Actions Proposed	Department	Action Taken & Date
2021					
07.04.21	H&S Officer	water damage	repairs	Facilities	
04.10.21	H&S Officer	rusty handrail / damaged wall / toilet seat damaged	repair / replace	Facilities	
25.10.21	H&S Officer	Inadequate handle on fire exit	replace	Facilities	replaced with push bar
01.11.21	H&S Officer	Fire extinguisher on floor	add bracket for wall mounting	Facilities	Wall bracket placed for hanging FE
2022					
22.03.22	H&S Officer	5th floor fence broken	repair	Facilities	Repaired 24.03.2022
22.03.22	H&S Officer	Fire escape route obstruction / faulty ceiling light / damaged bin / stagnant water / garden pathway lights / damaged washing machine	repair / replace / remove	Facilities	

25.03.22	H&S Officer	clutter outside workshop	remove	Facilities	removed
24.03.22	H&S Officer	broken gel dispenser	replace	Facilities	replaced
24.03.22	H&S Officer	main entrance lights not working	repair	Facilities	repair
24.03.22	H&S Officer	wall damage	repair	Facilities	repaired
18.05.22	H&S Officer	damaged windows laundry	repair	Facilities	repaired
30.05.22	H&S Officer	food & debris	clean	Facilities	cleaned

Cont...

CONTINUED ANSWER TO QUESTION 302

Date of Report	Person Responsible for Report	Concerns Identified	Actions Proposed	Department	Action Taken & Date
31.05.22	H&S Officer	bed power supply not working / light in residents' room	repair	Facilities	repaired
31.05.22	H&S Officer	hole in ceiling from curtain rails	repair	Facilities	repaired
20.06.22	H&S Officer	flaky paint on walls & ceiling	repair & paint	Facilities	repaired & painted
04.07.22	H&S Officer	treatment room door closers need replacing	replace	Facilities	replaced
04.07.22	H&S Officer	door handle need replacing in toilet	replace	Facilities	replaced
04.07.22	H&S Officer	ward kitchenette ceiling tiles broken	replace	Facilities	replaced
04.07.22	H&S Officer	linen room wedged open	remove	Facilities	removed
04.07.22	H&S Officer	damaged window	repair	Facilities	repaired
04.07.22	H&S Officer	damaged curtain rail	repair	Facilities	replaced
02.09.22	H&S Officer	insects in main entrance	remove and clean	Facilities	removed and cleaned

02.09.22	H&S Officer	broken sewing machine	repair	Facilities	replaced / decommissioned
02.09.22	H&S Officer	clutter ground floor emergency exit	remove	Facilities	removed
05.09.22	H&S Officer	obstruction of fire exit 3rd floor	remove	Facilities	removed
05.09.22	H&S Officer	2nd floor patio glass found	remove	Facilities	remove
09.09.22	H&S Officer	bin left with dry cement garden	remove	Facilities	remove
09.09.22	H&S Officer	bin store clutter	remove	Facilities	remove

Cont...

CONTINUED ANSWER TO QUESTION 302

Date of Report	Person Responsible for Report	Concerns Identified	Actions Proposed	Department	Action Taken & Date
26.09.22	H&S Officer	cottage pathway uneven surface	repair	Facilities	
24.11.22	H&S Officer	Oxygen store foliage & cracks in wall	repair	Facilities	
24.11.22	H&S Officer	damaged skirting / loose cables	replace / tidy	Facilities	
14.12.22	H&S Officer	1st floor cables loose	replace electrical trunking	Facilities	replaced
14.12.22	H&S Officer	1st floor damaged tap	replace	Facilities	replaced
14.12.22	H&S Officer	damaged wardrobe	repair	Facilities	repaired
14.12.22	H&S Officer	damaged bannister rail	repair	Facilities	repaired
14.12.22	H&S Officer	damaged dishwasher	repair	Facilities	repaired
2023					
29.08.23	H&S Officer	1st floor gym skirting broken	replace	Facilities	replaced
20.09.23	H&S Officer	lint found in dryer	remove	Facilities	removed
21.09.23	H&S Officer	Ground floor clutter fire exit route	clear pathway	Facilities	clutter removed
21.09.23	H&S Officer	drain needs clearing	clear	Facilities	cleared gutter

21.09.23	H&S Officer	Algae on exit route floor	clean	Facilities	cleaned
10.10.23	H&S Officer	clutter outside cottage	clear	Facilities	removed
10.10.23	H&S Officer	open electrical point outside dining hall	repair	Facilities	repaired
10.10.23	H&S Officer	dirty ERS vehicles / no MOTs	clean / MOT test	Facilities	cleaned / book test
10.10.23	H&S Officer	outside area damaged pipes	repair/replace	Facilities	repaired
10.10.23	H&S Officer	hoist in car not serviced	arrange servicing	Facilities	

Cont...

CONTINUED ANSWER TO QUESTION 302

Date of Report	Person Responsible for Report	Concerns Identified	Actions Proposed	Department	Action Taken & Date
10.10.23	H&S Officer	oxygen cylinders left free standing by laundry	remove	Facilities	
10.10.23	H&S Officer	linen press not working / staff complaining about heat in laundry	repair / look into air con	Facilities	
23.10.23	H&S Officer	4th floor annex no test label on hoist / broken toilet / shower curtain missing	pat tst hoist / repair toilet / replace curtain	Facilities	
13.12.23	H&S Officer	1st floor missing handle on cupboard / damaged wardrobe	replace / fix wardrobe	Facilities	
14.12.23	H&S Officer	overloading of adaptors / damaged ceiling	remove / repair	Facilities	
2024					
15.01.24	H&S Officer	ground floor spotlights broken / damaged skirting	replace	Facilities	replaced
15.01.24	H&S Officer	broken electrical socket	replace	Facilities	replaced
15.01.24	H&S Officer	gutter blocked with foliage	clean	Facilities	cleaned
15.01.24	H&S Officer	ground floor men's toilet broken window	repair	Facilities	repaired

15.01.24	H&S Officer	damaged wall in female toilet	repair	Facilities	repaired
17.01.24	H&S Officer	metal floor plate is lifting from the floor	repair	Facilities	repaired
18.01.24	H&S Officer	night lights on 1st floor need changing	repair	Facilities	repaired
06.02.24	H&S Officer	3rd floor ceiling light needs south wing toilet needs repairing	repair	Facilities	repaired
06.02.24	H&S Officer	leaking tap room 301 and damaged furniture	repair	Facilities	repaired
06.02.24	H&S Officer	faulty dishwasher kitchenette cupboard doors do not close properly	repair	Facilities	repaired
06.02.24	H&S Officer	blinking lights at the staff canteen - leaking coffee machine	repair	Facilities	repaired
06.02.24	H&S Officer	missing shower head holder	replace	Facilities	replaced
15.02.24	H&S Officer	Damaged mortuary door	repair	Facilities	repaired
19.02.24	H&S Officer	Pathway entrance 3rd floor garden - (slippery)	repair	Facilities	repaired

290

CONTINUED ANSWER TO QUESTION 302

Health & Safety Reports and Actions - 2025-2026

Date of Report	Person Responsible for Report	Concerns Identified	Actions Proposed	Department	Action Taken & Date	Outstanding Concerns & Reasons Why?
24.11.22	H&S Officer	Oxygen Cage - damaged floor. Cracks on side wall. Foliage on wall	repair floor & walls / remove weeds	ERS Facilities	30.06.2025 all repairs completed	No concerns, action completed
10.03.25	H&S Officer	1 - Damaged paper towel dispenser 2 - dented wall in bathroom 3- staff microwave rusty 4 - damaged bedside locker 5 - wash sink slightly damaged	repair or replace	ERS Facilities	28.03.2025 all repairs complete	No concerns, action completed
02.04.25	H&S Officer	boxes obstructing exit	remove	ERS Facilities	04.04.2025 removed and cleared	No concerns, action completed
14.04.25	H&S Officer	Sharp Hazard - damaged latch	repair or replace	ERS Facilities	16.04.2025 - repairs completed	No concerns, action completed
06.05.25	H&S Officer	Drainage blocked by dry foliage	remove all foliage	ERS Facilities	10.05.2025 all drains cleared	No concerns, action completed

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12.05.25	H&S Officer	dry foliage on 2nd floor pathway emergency exit	remove all foliage	ERS Facilities	15.05.2025 cleared	No concerns, action completed
	H&S Officer	stagnant water in containers in garden	empty	ERS Facilities	15.05.2025 emptied	No concerns, action completed
	H&S Officer	damaged roof over 2nd floor emergency exit	repair	ERS Facilities	19.05.2025 repaired	No concerns, action completed
04.06.25	H&S Officer	Installation of hand soap dispensers	install	ERS Facilities	26.06.2025 installed	No concerns, action completed
		Repair or replacement of damaged bed remotes	replace / repair	ERS Facilities	06.06.2025 repaired	No concerns, action completed
		Completion of outstanding paint works	repair	ERS Facilities	Was undertaken by apprentices during their placements	No concerns, action completed
		Repair or replacement of damaged resident furniture	replace / repair	ERS Facilities	06.06.2025 furniture replaced	No concerns, action completed
04.06.25	H&S Officer	slippery slope exit to garden		ERS Facilities	anti slip strips placed	No concerns, action completed
06.06.25	H&S Officer	blocked drains	unblock	ERS Facilities	11.06.2025 unblocked	No concerns, action completed

Cont...

CONTINUED ANSWER TO QUESTION 302

Date of Report	Person Responsible for Report	Concerns Identified	Actions Proposed	Department	Action Taken & Date	Outstanding Concerns & Reasons Why?
11.06.25	H&S Officer	damaged exterior air con pipe	repair	ERS Facilities	11.06.2025 replaced	No concerns, action completed
11.06.25	H&S Officer	5th floor damaged wall changing room	repair	ERS Facilities	repaired	No concerns, action completed
		5th floor damaged waste bins	replace	ERS Facilities	replaced	No concerns, action completed
		5th floor missing ceiling tile	replace	ERS Facilities	replaced	No concerns, action completed
		6th floor broken notice board	repair / replace	ERS Facilities	repaired	No concerns, action completed

		6th floor damaged skirting	repair	ERS Facilities	repaired	No concerns, action completed
		dead insect in stairway window ledge	remove and clean	ERS Facilities	cleaned	No concerns, action completed
30.06.25	H&S Officer	trip hazard bin store	repair	ERS Facilities	02.07.2025 repaired	No concerns, action completed
08.07.25	H&S Officer	emergency exit obstruction	remove	ERS Facilities	08.07.2025 removed	No concerns, action completed
09.07.25	H&S Officer	loose cables and extension leads		ERS Facilities	09.07.2025 tidied and trunking added	No concerns, action completed
22.08.25	H&S Officer	leaking air con unit 3rd floor	repair	ERS Facilities / Rock Cool	repaired 22.08.2025	No concerns, action completed
29.08.25	H&S Officer	unprotected elbows on erected scaffolding	contact company	ERS Facilities	scaffold removed 03.09.2025	No concerns, action completed
03.10.25	H&S Officer	staff room kitchen - dirty toaster / overflowing bins	remove and clean	ERS Facilities	03.10.2025 removed and cleaned	No concerns, action completed
03.10.25	H&S Officer	clinical treatment bed in chapel rusty	remove and clean	ERS Facilities	removed	No concerns, action completed
03.10.25	H&S Officer	clinical waste bin overfilled	remove	ERS Facilities	03.10.2025 removed	No concerns, action completed
17.10.25	H&S Officer	linen room door found open	close	ERS Facilities / Clinical	closed and staff reminded to not leave open	No concerns, action completed

Cont...

CONTINUED ANSWER TO QUESTION 302

2026						
Date of Report	Person Responsible for Report	Concerns Identified	Actions Proposed	Department	Action Taken & Date	Outstanding Concerns & Reasons Why?
15.01.26	H&S Officer	COSHH storage with obstruction	remove	ERS Facilities	16.01.2026 removed and cleared	No concerns, action completed
05.02.26	Facilities Manager	exterior wall on 3rd floor parking, cracking	repair	ERS Facilities /	Tender taken out and wall repaired	No concerns, action completed
09.02.26	4th Floor CN	damaged corner wall	repair	ERS Facilities	10.02.2026 repaired	No concerns, action completed
09.03.26	H&S Officer	Damage cupboard and handle	repair	ERS Facilities	12.03.2026 replaced	No concerns, action completed

13.04.26	H&S Officer	Broken tiles on 3rd floor store room	repair	ERS Facilities	15.03.2026 replaced	No concerns, action completed
14.04.26	H&S Officer	Crack in walls of boiler room	repair	ERS Facilities	repaired	No concerns, action completed

Q303/2026

**Fire-door and compartmentation inspections –
Mount Alvernia**

295 **Clerk:** Question 303, the Hon. A Sanchez.

Madam Speaker: I will take supplementaries to 302 after the Hon. Mrs Ladislaus's questions to give you time to look at it during.

300 **Hon. A Sanchez:** Can the Government provide the dates of all fire-door and compartmentation inspections undertaken at Mount Alvernia from the 1st January 2020 to the present date, together with the number and nature of defects identified and the dates on which any remedial works were undertaken or completed?

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

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

ANSWER TO QUESTION 303

Schedule of Events in regards to Fire Doors at Mount Alvernia;

March 2020 – email from GFRS to GJBS stating doors required to be FD30S.

17 April 2020 – email from GJBS to GFRS stating all Fire door works complete.

December 2024 – Meeting between previous Facilities Manager & FSG regarding Fire Management Plan.

December 2024 – Meeting between previous Facilities Manager & GFRS to discuss addressing the Fire compartment doors and Fire Strategy.

December 2024 – Previous Facilities Manager undertook arrangements for Fire Strategy Plan (FSG).

28 February 2025 – Fire Security (Gibraltar) Ltd (FSG) - report received stating all Fire Doors at Mount Alvernia have failed testing. 48 doors in total. FSG Ltd sent a quote for replacement doors. Consequently, tender issued through Procurement for replacement of all Fire Doors at Mount Alvernia.

05 June 2025 – Gibraltar Fire and Rescue Service (GFRS) - visit Mount Alvernia for an inspection.

- Fire Detection & Alarm System (passed)
- Emergency Lights (passed)
- Dry Riser (passed)
- All certificates presented to GFRS

10 July 2025 - GFRS informed that Gibraltar Joinery and Building Services (GJBS) has been contracted to replace Fire Doors at Mount Alvernia.

15 October 2025 - Meeting with GFRS, Director of ERS & ERS Facilities Manager.

24 October 2025 - GFRS - Inspection of current Fire doors. Interim measures discussed and carried out. (speed of door closing / fire strips) - Assembly points agreed.

December 2025 – Elderly Residential Services (ERS) informed by GJBS that replacement of Fire Doors would begin in January 2026.

28 January 2026 - Informed by GJBS doors would be received by mid-February.

20 March 2026 - GFRS Inspection of repairs on existing Fire Doors - repairs all good although doors fail due to the fact that they are FD30S and not FD60S.

Cont...

CONTINUED ANSWER TO QUESTION 303

16 July 2026 - The Director of Elderly Residential Services advised that the replacement of the fire doors will not proceed, given the high probability of residents being relocated to the Rooke location.

Following consultation with the GFRS on 28 July 2026, the following mitigation measures were agreed and subsequently implemented:

1. **Main Kitchen Fire Suppression System:** The system has been tested and inspected, and no faults were identified.
2. **Emergency Lighting:** Monthly testing was completed on 21 July. Of the 144 units tested, 16 faults were identified which are being rectified by the Maintenance Team.
3. **Petroleum Licence Certificate:** Valid until March 2027.
4. **Additional Fire Extinguishers:** These have been procured following recommendations made by Sheriff Group Ltd during their fire safety inspection and we are waiting delivery.
5. **Mount Alvernia Fire & Safety Booklet:** The booklet has been reviewed, updated, and will be issued to all staff.
6. **Fire Drills:** Following discussions with the Practice Development Nurse, we have agreed to work through a number of fire scenarios with staff before commencing formal fire drills, using staff members to simulate residents. This has been scheduled towards the end of August beginning of September.
7. **Security Patrols:** Security Officers have been instructed to increase patrol frequency to ensure fire doors remain unobstructed and that potential fire hazards, including cardboard boxes and other combustible materials, are removed promptly.
8. **Night Staffing Levels:** Five nursing staff members are on duty on each floor during the night shift.
9. **Smoking Policy:** Smoking is prohibited throughout the building. Residents who smoke must use the designated smoking areas in the third-floor garden and outside the main reception entrance. This helps prevent smoking in resident rooms.

315

Madam Speaker: All right, we will come back to that also in due course. Next question.

Q304/2026

**John Mackintosh Trust –
Transfer of residents to the Rooke**

320

Clerk: Question 304, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government confirm what discussions have taken place with the trustees of the John Mackintosh Trust regarding the future of Mount Alvernia following the proposed transfer of residents to the Rooke?

325

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, as I said at the press conference announcing the new elderly residential care facility at The Rooke, no discussions have yet taken place with the Trustees of the John Mackintosh Trust about the future of the Mount Alvernia building. The Government's priority at this stage is a safe and orderly relocation of residents to the new state-of-the-art facility at The Rooke. Discussions with the Trustee on the future of the building will take place thereafter. The Government will make any announcements on this matter when it is ready to do so.

Hon. A Sanchez: Madam Speaker, does the Hon. Minister have an estimated date in mind or time frame when the Government envisages to have discussions with the Trustees of Mount Alvernia?

Hon. G Arias-Vasquez: No, Madam Speaker, we have no date in mind.

Hon. A Sanchez: Madam Speaker, in March 2023, the Government indicated that the future options for Mount Alvernia would depend on the terms of its lease, which it had not examined at the time. Has the Government now reviewed the terms of the lease and do those terms place any restrictions on the future use of Mount Alvernia?

Hon. G Arias-Vasquez: Madam Speaker, as I often tell this House, if there is a detailed question, particularly in regard to documentation, I would expect notice in advance of that question. I am very happy to answer that question, I am very happy to look at the lease, but I would need notice of the question.

Hon. Dr K Azopardi: Can I just ask, when were the Trustees of Mount Alvernia informed that the Government intended to offer relocation of the residents to the Rooke building?

Hon. G Arias-Vasquez: Madam Speaker, as we have repeatedly said, we are in discussions with the residents of Mount Alvernia and we did not know at any point in time how many of those residents would wish to remain in Mount Alvernia. Until we have had a definitive idea of the number of residents that remain in Mount Alvernia, we did not engage because we did not know if any residents would be remaining in Mount Alvernia. It is therefore pertinent to start having those discussions once we know the numbers of residents that will remain, if any.

As the Director-General confirmed on Viewpoint last week, we have now had discussions with all of the families and all of the families and residents wish to move. Therefore, it is now pertinent to start having those discussions.

Hon. Dr K Azopardi: So, to be clear, there has been no discussions at all with the Trustees? I mean, it has been, let me put it this way, it has been in the public domain for some time that the Rooke building has been constructed. It was in the public domain more recently that the GHA were going to take it on. It was in the public domain for some time before the 2023 Election that the Government was considering offering relocation to residents. Has all that factual background not provoked a discussion either from the Government or from the Trustees, a question saying, you have got a building that you are occupying, what do you want to do with it if the residents are gone? The Trustees have not asked the Government?

Hon. G Arias-Vasquez: Madam Speaker, I fully appreciate that the Leader of the Opposition wants to make an issue out of everything. However, the Trustees are aware of the move. There is no point in engaging with the Trustees until we knew what was going to happen with the building and the residents therein. And as they have asked us repeatedly in this Parliament, they know that the intention was to find out from the residents what the residents wanted to do. Now that we

380 know what the residents want to do, we will engage with those discussions. The Trustees are aware of the ongoing discussions.

385 **Hon. Dr K Azopardi:** It is not that I want to make an issue out of everything. I was just asking a legitimate question. I think people are entitled to understand if there has been any discussions and so on. The Government has made clear publicly that it does not intend to operate two homes. So, on that basis, the Trustees have not asked the Government. Is that what the Minister is saying?

390 **Hon. G Arias-Vasquez:** Madam Speaker, I repeat my earlier answer. Until we had a definitive picture, we have not engaged with the Trustees. It is not appropriate that we engage with the Trustees. Now that we know, we will be engaging with the Trustees.

Hon. Dr K Azopardi: We have not engaged with the Trustees does not answer the question of whether the Trustees have asked the Government whether it has a view on the future of the building.

395 **Hon. G Arias-Vasquez:** Madam Speaker, I have answered the question fully. We have not engaged with the Trustees, and they are fully aware of what is going on.

400 **Hon. D J Bossino:** May I ask the Hon. Minister a very simple question which I think is capable of a simple response? Can she say what the Government's intention is in respect of the Mount Alvernia building? What is the Government policy in relation to that? Now that she knows, now that she is aware that everybody, all the residents are going to be moving to Rooke, and it is going to be an empty building.

405 **Hon. G Arias-Vasquez:** Madam Speaker, even my simple mind can comprehend that question. So, thank you very much for framing it quite so simply. However, it is not for the Government to determine by itself what it is going to do with that building. It is for the Government to engage with the Trustees of Mount Alvernia and jointly to have a discussion on what is to happen. I hope that answers the simple question in a simple way.

410 **Madam Speaker:** Next question.

Q305/2026

**Activity Coordinators working at Mount Alvernia –
Consulted during the design and development of the Rooke**

415 **Clerk:** Question 305, the Hon. A Sanchez.

420 **Hon. A Sanchez:** Could the Government state whether the Activity Coordinators currently working at Mount Alvernia were consulted during the design and development of the Rooke facility and, if so, whether they were specifically invited to provide feedback on the design, suitability and functionality of the activity areas within the Rooke building?

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

425 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, as far as the GHA is aware, the activities coordinators currently working at Mount Alvernia were not consulted during the design and development of the Rooke facility approximately 4 years ago. However,

they will be fully consulted during the current pre-launch phase now that the GHA has taken over the running of the Rooke facility.

430 **Hon. A Sanchez:** Madam Speaker, I am grateful for that answer. Would the Hon. Minister elaborate on how the GHA intends to accommodate, given that the building is now constructed and all the rooms are ready, how it intends to accommodate any changes that are required by the activity team to accommodate any rooms that are available in Mount Alvernia that may not necessarily be now available in the Rooke?

435 **Hon. G Arias-Vasquez:** Madam Speaker, as the Director-General explained on TV last week, all operational matters are currently being dealt with by a committee within the GHA that is set up specifically for these purposes. There is a Director of Operations who is engaging with all the different facets of Mount Alvernia to make sure that everyone is accommodated. As the hon.
440 Members opposite often make clear to me, I should not get involved in operational matters in the GHA and this is a purely operational matter which is for the running of the GHA and ERS facilities. There is a team that is talking to everyone on the ground and is making sure that everyone's needs are met.

445 **Hon. A Sanchez:** Madam Speaker, is the Hon. Minister aware whether meetings have been scheduled with the activity coordinators or the team to receive their feedback and to have a proper consultation with them? I have received representations with concerns in respect of areas and the Minister will be aware that there are facilities in Mount Alvernia such as a place of worship, the hairdressing room, the tuck shop, all those areas of activity that seem to be missing
450 in the Rooke which are available now as activity areas in Mount Alvernia.

Hon. G Arias-Vasquez: Madam Speaker, I am delighted to be in a situation where what we are discussing about the Rooke is the tuck shop. Let me say that everyone is being engaged. The activity coordinator has spoken to me personally and made representations to me and the team
455 that went up with me, so the operational team that went up with me when we went to discuss it with Mount Alvernia staff in the first instance. She has been contacted by the operational team in the GHA. I have spoken to her on numerous occasions when she has stopped me down Main Street and I am aware that all the conversations are continuing.

However, Madam Speaker, it needs to be said that the Rooke is a purpose-built facility. There
460 is space available for everyone. The religious leaders have already met with the Director General of the hospital in order to make sure that there is either a chapel or a multi-faith facility room. It needs to be contrasted and compared to a building which was built for office spaces which a hospital was shoehorned into in which none of these facilities were available.

465 However, it has to be said that in October 2026 I am delighted that the level of questions I am getting about the Rooke relates to a tuck shop and an activity coordinator's concerns on where we are going to store her goods. That shows actually that the Rooke meets the requirements of the residents in the community.

So, in answer to the hon. Lady's questions directly, yes, the activities coordinator has made her concerns known to myself and to the relevant parties who are carrying out the operational reality
470 on the ground. Yes, she will be heard in the relevant sequence at which those discussions will occur.

Hon. A Sanchez: Madam Speaker, with respect, I find the Minister's attitude rather smug and offensive because if these concerns have been put to me by residents and by staff that are
475 concerned because they take the daily activities of residents quite seriously then no matter is too small and too trivial to bring to Parliament. (Banging on desks)

Members: Tuck shops!!

Madam Speaker: Can we have the question now? Order! Question please.

480

Hon. A Sanchez: Madam Speaker, in terms of the place of worship, which is very important for some residents, it indeed is a representation which has been made to me by many residents, can we have an assurance by the Minister and a commitment that there will be a place of worship included in the Rooke facility? Can we have a commitment by the Minister that this will be incorporated in the Rooke?

485

Hon. G Arias-Vasquez: Madam Speaker, I am so pleased that our respective views and our attitude are identical. I can confirm that, as I have said just in my answer before, we have spoken to all the Religious Leaders, and we are now in discussions about where we will accommodate a chapel and or a multi-faith room.

490

Madam Speaker, my attitude is neither smug nor is it arrogant. My attitude is one of being extraordinarily proud of a facility that we have delivered in the Rooke which is groundbreaking and which actually addresses the needs of a community. We have built a purpose-built facility and not shoehorned a facility into a building which carries on causing problems 25 years down the line. So, what we have actually done is the biggest investment in elderly residential care that Gibraltar has seen in a long, long time and I stand here not smug but extraordinarily proud of having made that investment.

495

Madam Speaker: Next question.

500

Q306/2026

**Total staffing complement required for the Rooke –
Posts currently filled and how many vacancies remain**

Clerk: Question 306, the Hon. A Sanchez.

505

Hon. A Sanchez: Can the Government state the total staffing complement required for the Rooke once fully operational, broken down by grade and profession, and indicate how many of these posts are currently filled and how many vacancies remain?

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

510

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

ANSWER TO QUESTION 306

PROFESSION	GRADE	TOTAL FTE
Nursing	Divisional Clinical Lead	1
Nursing	Matron	1
Nursing	Charge Nurse	7
Nursing	Registered Nurse	41.5
Nursing	Enrolled Nurse	12
Nursing	Nursing Assistant	151 (including 16 FTE vacancies, recently advertised)
Nursing	Activities team	7
Allied Health Professional	Physiotherapist	2.5
Allied Health Professional	Physiotherapist Helper	2
Allied Health Professional	Occupational Therapist	1
Allied Health Professional	Speech and Language Therapist	1
Medical	General Practitioner	2
Industrials	Catering Manager	1
Industrials	Senior cooks	2 (x1 cook acting into this position pending vacancy release)
Industrials	Cooks	12
Industrials	Labourers / Hybrids	14 (includes x3 storemen and x1 maintenance)
Industrials	Domestic Laundry	8
Industrials	Domestics	12.5 (includes x3 domestic supervisors)
Industrials	Domestic Catering	7
Industrials	Seamstress	0.5
Industrials	Store Manager	1
Industrials	Maintenance Operative	1
Industrials	GDC Skill Zone 2	2 (x1 catering domestic and x1 maintenance)
Administrative	Facilities and Admin Manager	1 FTE
Administrative	GHA Clerk	2 FTE
Administrative	Executive Officer	2 FTE
Administrative	GDC grade 1	2 FTE
Administrative	GDC grade 2	1 FTE

Cont...

CONTINUED ANSWER TO QUESTION 306

<u>VACANCIES</u>		
Industrials	Domestics	10 FTE (3 vacancies, 7 increase in complement for Rooke = 10 in total)
Industrials	Domestic Laundry	4 FTE (increase in complement for Rooke – decision still pending)
Industrials	Industrial technician	1 FTE
Industrials	Principal Technical Officer	2 FTE
Admin	Administrative Officer	1 FTE

Madam Speaker: All right, we will come back to that question in due course. We will move on to 307.

520

Q307/2026

**Proposed cleaning and domestic services arrangements –
Rooke elderly care facility**

Clerk: Question 307, the Hon. A Sanchez.

525

Hon. A Sanchez: Can the Government clarify the proposed cleaning and domestic services arrangements for the Rooke elderly care facility and state whether these services will be provided by employees within the GHA industrial complement or outsourced to an external contractor?

530

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the Government can confirm that cleaning and domestic services at the Rooke facility will be provided by employees within the Gibraltar Health Authority's industrial complement with further vacancies being released shortly.

535

Madam Speaker: Next question.

Q308/2026

**Proposed security arrangements –
Rooke elderly care facility**

540

Clerk: Question 308, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government clarify the proposed security arrangements for the Rooke elderly care facility, stating whether the security service will be provided in-house or outsourced and, if outsourced, provide the name of the entity to which the service will be contracted?

545

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the security arrangements at Rooke will initially remain the same as are currently in place at Mount Alvernia. It is the GHA's intention to review all security contracts across the organisation including Rooke during the next 6 months but that will be after the launch and transition of the Rooke project.

Hon. A Sanchez: Madam Speaker, I am grateful for that answer. Does the Hon. Minister have the name of the entity which is providing the security arrangements for Mount Alvernia at the moment?

Hon. G Arias-Vasquez: Madam Speaker, security arrangements at Mount Alvernia are currently outsourced to OSG.

Hon. A Sanchez: And would the Hon. Minister be able to clarify whether those contractual arrangements went through a procurement process?

Hon. G Arias-Vasquez: Madam Speaker, I do not have that information to hand but if the hon. Lady wishes to ask me a question, I am very happy to do so. As I have confirmed in my answer, they will be put out to tender in the next 6 months.

Hon. A Sanchez: Madam Speaker, would the hon. Lady be able to state why they are being reviewed? Is it related to this point because they are going to be put out to tender?

Hon. G Arias-Vasquez: No, Madam Speaker. It is because there are a whole bunch of security arrangements throughout the assets of the GHA, and it is time to review the arrangements as we have reviewed other arrangements in the past 3 years.

Hon. A Sanchez: Is the Hon. Minister aware whether it has in fact previously the Mount Alvernia contract gone out to tender or is she not aware of that point?

Hon. G Arias-Vasquez: Madam Speaker, I have just answered that question. I do not have that information to hand but if the hon. Lady gives me notice of the question, I am very happy to answer it.

Madam Speaker: Next question.

[Q309-311/2026](#)
[Rooke building –](#)
[Snagging and inspection process](#)

Clerk: Question 309, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government confirm whether the GHA has undertaken, or commissioned, a formal snagging and inspection process of the Rooke building prior to completing its acquisition and, if so, whether any defects, deficiencies or outstanding works have been identified?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Questions 310 and 311.

Clerk: Question 310, the Hon. A Sanchez.

600 **Hon. A Sanchez:** Can the Government state whether all defects, snagging items and outstanding works identified prior to acquisition will be rectified by the developer before completion of the purchase, or whether any will become the responsibility of the GHA following acquisition?

Clerk: Question 311, the Hon. A Sanchez.

605 **Hon. A Sanchez:** Can the Government confirm whether it anticipates that any further works, alterations or upgrades will be required at the Rooke following its acquisition by the GHA and, if so, provide details of the works envisaged and their estimated cost?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, in answer to Question 309 the GHA team has worked closely with the technical professionals and contractors involved in the design, construction and commissioning of the facility. As part of this process, the GHA has requested that all building systems remain operational over an extended period in order to test performance and identify any potential issues.

615 Issues identified such as a minor issue with the air conditioning system was found on the 10th floor but has now been rectified. A leak was identified on the ground floor female changing room which has also been rectified. Loose door closer on the first floor has been rectified. Water supply in some areas had low pressure and this has been rectified. The fireman's lift was a manual and not connected. This has been rectified. The kitchen storeroom needs a ceiling. This has been reported and the works are outstanding. The lift leading to the nurse's station has been checked and this has been reported and the work is outstanding. There are lift buttons that are missing. This has been reported and pending replacement buttons.

620 In answer to Question 310 the Government can confirm that any defects, snagging items and outstanding works identified prior to acquisition will be rectified by the developer before the completion of the purchase. Following acquisition, the Gibraltar Health Authority will assume responsibility for the ongoing maintenance and management of the facility. Accordingly, any defects or issues arising after the acquisition will be the responsibility of the GHA and will be addressed to the authority's established maintenance arrangements.

630 In answer to Question 311 the only works currently anticipated relate to the external boundary wall. No further alterations, upgrades or additional works have been identified as necessary at this stage. Accordingly, no additional costs are presently envisaged other than those associated with the external boundary wall works for which we are awaiting an estimate.

635 **Hon. A Sanchez:** Madam Speaker in respect of 311 and anticipating further works, does the Minister, throughout the consultation that the Minister has said is ongoing with the different departments such as the activity coordinators and the different professionals in the GHA, does the Government not anticipate any further works or alterations to have to be made to the building or any changes to have to be made to the building and does the Minister not anticipate any costs associated with this?

Hon. G Arias-Vasquez: Madam Speaker, no significant costs are identified by the GHA at the moment.

645 **Hon. A Sanchez:** In respect of the rooftop terrace for example, we have heard publicly the Director General mention something about these being converted into gardens, does the Hon.

Minister envisage that this will need a lot of further work and does she envisage any costs associated with this?

650 **Hon. G Arias-Vasquez:** No, Madam Speaker.

Hon. D J Bossino: If I may, I think in her formal reply to the question in the Order Paper 310 the Hon. Minister spoke about the ongoing future responsibility post-acquisition by the GHA in respect of this particular facility. May I ask the Minister whether she has an idea of the ongoing costs that that will represent to the Authority?

655 **Hon. G Arias-Vasquez:** Madam Speaker, there is a question in the Order Paper directly related to this coming up.

660 **Madam Speaker:** Next question.

[Q312/2026](#)
[Rooke building –](#)
[Independent technical, structural, mechanical, electrical, fire safety or other surveys](#)

665 **Clerk:** Question 312, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government state whether the GHA has commissioned any independent technical, structural, mechanical, electrical, fire safety or other surveys of the Rooke prior to acquisition and, if so, whether these have identified any works which will be required?

670

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the GHA has not commissioned any independent technical, structural, mechanical, electrical, fire safety or other surveys of the Rooke facility prior to its acquisition but has obtained all the relevant certificates required. Further, the GHA team has worked closely with the technical professionals and contractors involved in the design, construction and commissioning of the facility. As part of this process the GHA has requested that all building systems remain operational over an extended period in order to test performance and identify any potential issues.

675
680 A minor issue was found in one room on the 10th floor in relation to the air conditioning system, but this has now been rectified. A minor leak was identified on the ground floor female change room, which has also been rectified. Any issues identified prior to acquisition will be rectified before the building is formally handed over to the Gibraltar Health Authority.

685 **Hon. A Sanchez:** Madam Speaker, and could the Hon. Minister confirm whether the GHA is planning to appoint any independent professionals or firms to carry out any independent surveys?

Hon. G Arias-Vasquez: No, Madam Speaker. When you purchase a house, you do not redo the homework of the developer. When there is a certificate of fitness which confirms that the building is fit; you take it on the certificate of fitness. So no, the GHA has no intention to commission any independent surveys of any structural, mechanical, electrical, fire safety or any other surveys of the Rooke.

695 **Hon. R M Clinton:** Madam Speaker, I find her response that there is going to be no independent structural survey somewhat surprising, because if you are spending something in the order of tens

of millions of pounds, I would have thought it would be the minimum the Government would do to ensure that the building is structurally sound. I mean, how does she know that the building does not have any defects which the taxpayer may have to pick up later on?

700 **Hon. G Arias-Vasquez:** Madam Speaker, it is a bit trite that the hon. Member arises to ask that question. As the hon. Member will be aware, as part of the valuations of the building which will be carried out by financing institutions prior to lending any money, this may contain structural surveys if they feel it is necessary. The entity might carry out a structural survey or it might request that the GHA carries out a structural survey, but the GHA at the moment is not intending on
705 carrying out any structural survey because a certificate of fitness, once issued by building control, confirms that all the relevant standards have been met according to legislative standards in Gibraltar.

Hon. R M Clinton: Yes, Madam Speaker, but you will know that if you are buying a property,
710 you conduct your own structural survey. I mean, it could be not just the building; it could be sewage works on the outside, the perimeter wall could be falling down, there could be all sorts of issues that the certificate of fitness might not cover. Look, I am not a structural engineer surveyor, but I would have thought at the very minimum the Government would wish to conduct some kind of survey, as I said, to ensure that there are no problems going on down the line. It may be that
715 the bank will conduct its own valuation but may not give you the kind of same depth of review as an independent structural survey for the GHA, and indeed the Government would not be able to rely on it if anything was found to be wrong later on. Again, I would suggest to the Minister that she consider conducting such a survey.

720 **Hon. G Arias-Vasquez:** Madam Speaker, what a surprise, Mr Clinton catastrophising about the building. Madam Speaker, all the checks have been carried out, all the structural surveys have been carried out by the relevant entities. We do not have to double check the homework of the developer. If the bank considers it necessary as part of a valuation, the valuation will carry out its own structural survey to make sure that it is satisfied with it. It is not ordinary in the course of
725 acquiring a building to redo the works; you get the survey and you rely. This is exactly what I used to do, Madam Speaker, this is exactly my course of work. You rely on the surveys that have been provided, provided that they are extended to the third party. You would not expend money carrying out surveys once the building control certificate has been issued. Therefore, I reiterate, there will be a valuation by the bank and if the bank feels it is necessary the bank will require a
730 structural survey as part of its valuation, but the GHA at present has no reason to require a structural survey.

Madam Speaker: The Hon. Mrs Ladislaus.

Hon. J Ladislaus: Madam Speaker, we have heard the explanation, I am sorry, I am slightly
735 hoarse today — we have heard the explanation on the structural surveys carried out and the certificate of fitness being granted. Can the Hon. Minister confirm that the certificate of fitness was granted the first time and that there were no issues that were actually highlighted or identified by experts that needed rectification?

740 **Hon. G Arias-Vasquez:** Madam Speaker there is an obsession on the Opposition benches to find issues where there are none. Madam Speaker, there is a question on the Order Paper later, as the hon. Lady is aware, which identifies that issue. I understand her eagerness in asking the question, but I will address the question when it is asked.

745 **Madam Speaker:** Next question.

Q313/2026

Open rooftop terrace areas at the Rooke facility –
Accessible to all residents

Clerk: Question 313, the Hon. A Sanchez.

750 **Hon. A Sanchez:** Could the Government confirm whether the open rooftop terrace areas at the Rooke facility will be accessible to all residents and, if so, what safety measures have been incorporated to protect residents from the risk of falls or other accidents?

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

755 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the terrace will be accessible to residents subject to individual clinical assessments of their dependency and capacity in line with the current model of care at Mount Alvernia. The height of the terrace walls exceeds the relevant building regulations.

760 **Hon. A Sanchez:** So, Madam Speaker, can the Hon. Minister clarify: will residents be permitted to access the rooftop terraces independently or will access be restricted to those accompanied by staff?

765 **Hon. G Arias-Vasquez:** Madam Speaker, I will read out the answer to my question once again. The terrace will be accessible to residents subject to individual clinical assessments of their dependency and capacity.

So, the answer to the question pretty much answers exactly what the hon. Lady has just asked me once again. Each individual resident will be assessed, and it will be dependent on their needs whether they can access it independently or with assistance.

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Hon. A Sanchez: Madam Speaker, would the Hon. Minister be able to elaborate as to what safety features have been incorporated in the rooftop terraces in respect of CCTV, emergency call points and other systems?

775 **Hon. G Arias-Vasquez:** Madam Speaker, the information that I have available to me is that the height of the terrace exceeds the relevant building regulations and therefore the terrace is safe. My understanding is that there are no such CCTV cameras being installed on the terrace. However, if the hon. Lady asks me the question, I am very happy to provide an answer in subsequent sessions, because I do not know whether there are or there are not CCTV cameras on the roof terrace.

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Hon. A Sanchez: Madam Speaker, is the Hon. Minister aware whether occupational therapists, dementia specialists and other nursing professionals have been specifically consulted in respect of the design and safety of these rooftop areas?

785 **Hon. G Arias-Vasquez:** Madam Speaker, there are regulations on these subjects, and all the regulations are met. I am unsure whether subsequently occupational therapists have been consulted or physios have been consulted, but as I often say to the hon. Lady, if the question is asked I am very happy to answer it with notice.

790 **Madam Speaker:** Next question.

Q314-315/2026

Financing arrangements being entered into by the GHA –
Acquisition of the Rooke

795 **Clerk:** Question 314, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government provide details of the financing arrangements being entered into by the GHA for the acquisition of the Rooke, including the amount to be borrowed, the lender, interest rate, repayment period and estimated total cost of borrowing?

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Clerk: Answer, the Hon. 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 315.

805

Clerk: Question 315, the Hon. A Sanchez.

Hon. A Sanchez: Can the Government state the final agreed purchase price for the Rooke elderly residential facility, providing a breakdown of the acquisition cost, fit-out costs, financing costs and any other costs forming part of the transaction?

810

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, at this time HMGoG is unable to provide these details as these are still being negotiated. (Interjections)

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Hon. A Sanchez: Madam Speaker, it was not that long ago, quite recently, that the Hon. Minister said publicly that a full detailed statement of all the costs would be made publicly available. Can the Hon. Minister state when this detailed statement will be made available to Parliament and to the public?

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Hon. G Arias-Vasquez: Madam Speaker, I am very happy to see that the hon. Member is amused by my answer. (Interjections) I am not going to compare it to my amusement in some of his responses. However, Madam Speaker, I retain my commitment to give all of the details when the details are available. However, as the Hon. Mr Clinton often says, until the ink is dry on the paper and all the details are negotiated, I will not be in a position to do so. However, my commitment remains to disclose all these details as soon as they are available.

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Madam Speaker: The Hon. Mr Clinton.

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Hon. R M Clinton: Madam Speaker, I love to hear myself quoted by the Government, but of course they never follow my advice.

Madam Speaker, can the Minister clarify to the House how it is that the Government has taken possession of a property. Is told the public that they are going to be moving in, seems to have a blind faith in whatever they are told as to the structural soundness of the building, and would have the House believe that they have no idea as to how much it is going to cost the taxpayer? It just beggars' belief. Is there no at least draft purchase agreement? I mean, how long is this going to take, Madam Speaker? Because at the end of the day, and we know it is really the left arm to the right arm, because it is a Savings Bank and at the end of the day it is financing it for a whole string of entities that ends up in community initiatives which is controlled by partners of her firm.

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So, can the Minister at least give us a date as to when the purchase agreement will be completed and when she can come to the House and make a ministerial statement?

Hon. G Arias-Vasquez: Madam Speaker, an announcement was made in September because there were rumours and questions being asked in this House as to who was going to run it, as to how it was going to be run, and therefore it was only fair that this Government come and set the staff at the ERS's mind at rest, telling them exactly what we envisage to do. The detail has not been finalised, and the GHA has not taken over the facility yet.

As the hon. Member is aware, there will indeed follow a purchase, a purchase price will be agreed, we are negotiating the purchase price, we are negotiating the financing details and we are in the process of getting valuations, et cetera. Once all of this is done and once, we are in a position to discuss the finer detail we will give the finer detail. However, Madam Speaker, despite all of his speculation, despite all of his catastrophising, the hon. Member opposite needs to understand that we announced it in September in order to make sure that the staff in Mount Alvernia were assuaged about what the commitments were going to be. However, we will not announce the financing arrangements until the ink is dry on the paper and we can therefore sit down and show them to the hon. Member opposite. We have no issue in being entirely transparent on all of these matters.

I am sorry that the hon. Member seeks to snigger despite his catastrophising. We will disclose all of these details as soon as the agreements are finalised and they will be finalised by the time the residents move in. However, at the moment the details are not finalised, and I will not stand here in Parliament giving details on which the ink is not dry, following his own advice.

Madam Speaker: The Hon. Leader of the Opposition.

Hon. Dr K Azopardi: I assume that integral to the financing arrangements will be the land cost. On the Viewpoint programme the other day the Hon. Minister said that she was doing a calculation when she was answering a question. She said £38 million, the fitting out cost £3 million, and then the land cost. Obviously, that is all going to be part of the financing package, and then she said the interest, there is obviously the interest element to be negotiated with the financiers but in terms of the land cost, has a land cost now been identified in respect of the project, the development, the building?

Hon. G Arias-Vasquez: Yes, Madam Speaker.

Hon. Dr K Azopardi: Would the Minister give us the land cost?

Hon. G Arias-Vasquez: Madam Speaker, again, this is part of the overall package, and we will disclose all of these details, including the land cost, as soon as we have the final details.

Hon. Dr K Azopardi: But the final details may relate to the financing and the interest. The land cost has been identified. I am asking the Minister again to give the House the land cost, given that she said 45 seconds ago that they wanted to be transparent.

Hon. G Arias-Vasquez: Madam Speaker, I also said 45 seconds ago that I would give all of the details when we are in a position to give all of the details. I understand that the hon. Members opposite are trying to undermine the argument. However, we will give all of the details once we are in a position to do so. I will reiterate that once again: we will give all of the details once the ink is dry on the paper.

Madam Speaker: The Hon. Mr Bossino.

Hon. D J Bossino: I need to rise because she has accused my hon. Friend Mr Clinton now twice of catastrophising when he is asking a very basic, simple question. She has accused the Hon. Leader of the Opposition of similar things when he is asking a very basic and simple question.

895 The bizarre thing, does she not agree. Here, is that the Government makes a very serious and important announcement which will impact not just the potential users of this facility, which run into the hundreds, but their families as well, as something that she says emotionally she is engaged in and is very proud because she is a socialist as she says. Before, as she puts it, having the ink dry on the paper as to how much it is going to cost.

900 She has a responsibility, and she will very soon, when she is Chief Minister, as the Minister for Finance, in terms of having courage of the expenditure of these things. Does she not agree with me that it is absolutely unforgivable and bizarre that she has got the chronology completely and utterly wrong?

905 **Hon. G Arias-Vasquez:** I am very glad to see that the sweeper of the House has risen. Clearly, he did not think that the Leader of the Opposition's questioning was intense enough and therefore he had to rise for his own social media video. Actually, Madam Speaker, the sweeper of the House says in very emotive terms exactly what has been raised by the Hon. Mrs Sanchez who he obviously thought her line of answering was inadequate, by the Leader of the Opposition and by 910 Mr Clinton, who he obviously thought all of the lines of questioning were inadequate and he needed that emotion to be captured for his social media feed, Madam Speaker, which is what we are here for: social media feed and his emotional responses.

He is going to get the same answer that I gave to Mrs Ladislaus, sorry, to the Hon. Mr Clinton and to the Leader of the Opposition. Sorry the Hon. Mrs Ladislaus, sorry the Hon. Mrs Sanchez.

915 Madam Speaker, we will give all of the details when the ink is dry on the paper. We will follow their advice on this, and no matter how emotional the Hon. Mr Bossino gets in his role as a sweeper or quasi-leader, or not quite sure what is going on there, however emotional Mr. Bossino gets, the answer is going to be exactly the same. We will be in a position to give all of the details as soon as we are in a position to do so, Madam Speaker. So, whoever wants to rise from the 920 Opposition benches, they will continue to receive the same answer: we will give all of the details as soon as we are in a position to do so.

Madam Speaker: Next question.

925

Q316/2026

**Estimated annual operating cost of the Rooke –
Principal components of expenditure**

Clerk: Question 316, the Hon. A Sanchez.

930 **Hon. A Sanchez:** Can the Government state the estimated annual operating cost of the Rooke once fully operational and provide a breakdown of the principal components of that expenditure?

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

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

ANSWER TO QUESTION 316

Estimated annual operating cost of the Rooke broken down by its principal components

Cost Component	Annual Estimate
Staffing & Personal Emoluments	£14,600,000
Recurrent Expenditure	£ 4,800,000

940 **Madam Speaker:** Alright, we will return to this in due course after the Hon. Mrs Ladislaus's questions. We will go on to 317.

Q317/2026

Residents of the South District –

Action was taken against the vessel for the release of these toxic fumes

945 **Clerk:** Question 317, the Hon. D J Bossino on behalf of the Hon. G Origo.

Hon. D J Bossino: And the sweeper arises Madam Speaker. On the weekend of the 5th-6th September, residents of the South District complained of strong smells in the area, which was later traced to a bulk carrier that had its cargo hatch open. Can the Minister confirm whether any
950 action was taken against the vessel for the release of these toxic fumes?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, complaints
955 were received in the Environmental Agency. The Gibraltar Port Authority worked to try and identify the source of the smells. The bulk carrier in question was identified towards mid-morning as a likely source and was immediately instructed by the GPA VTS centre to close its cargo hatch. No further punitive action in terms of fine or other action was taken.

960 **Hon. D J Bossino:** Is the Hon. Minister able to elucidate the House as to whether any substances were released as a result of this incident?

Hon. G Arias-Vasquez: Madam Speaker, I am very pleased to see the Hon. Mr Bossino arising once again for the Hon. Mr Origo. He tends to morph into the Hon. Mr Origo on many occasions,
965 including on Viewpoint, on tourism.

So, Madam Speaker, the smells arising could be categorised as a nuisance. The toxicity of them was not established; there were no toxic fumes that were identified and therefore there was nothing that could be done in relation to the specific question. There is no legislative provision that can deal with a nuisance, so therefore the Port immediately asked for the hatches to be
970 closed, and the vessel moved on relatively quickly.

Hon. D J Bossino: I did it the other day, I morphed, as she put it, into Mr Origo, but she was not in the House, attending to other matters of state as the Hon. Chief Minister said.

975 OK. Is there therefore an issue because the Hon. Minister says that there is not, with the regulations or the legislation not accounting for this incident reaching the level of a nuisance? Now can I probe her and ask her whether she is satisfied that the current legislative framework is sufficient to deal with these situations?

In answer to her original question, she talked about there not having been an enforcement as such, and what there was, in effect as I understand it, a practical dealing of the situation by the closing of the hatch. But my question is: is she satisfied whether the current legislative framework is sufficient, and if the answer to that question is not, if I may, is she considering tightening up our legislative ability to deal with these situations?

Hon. G Arias-Vasquez: Madam Speaker, what occurred in fact was a practical situation. So, the cargo hatches of vessels would not ordinarily be open and therefore, because it was open, the smells were emitted. What is done always is, when the Port identifies this being the case, the Port asks that the cargo hatch is closed. The legislation deals with toxic fumes, and the Environmental Agency has power to deal with toxic fumes, so once that is identified then there is legislative provision to deal with that. What happened in this instance is a practical case which the GPA immediately got on top of, and once the cargo hatch was closed the smells were abated.

Hon. D J Bossino: I take it from the answer that the hon. Member has just given that she has no intention, and she feels satisfied that the current legislative framework is sufficient.

May I ask this, as I understand it the information that the Opposition has received is that the smells continued the next day after this was, kind of, resolved. Does she have an explanation for that?

Hon. G Arias-Vasquez: Madam Speaker, the vessel itself had moved out of BGTW at this time and they were unable to ascertain sources of the smell, but in any event the GPA did suspend an ongoing operation which is taking place in the outer anchorage, which is literally in the middle of the bay, out of an abundance of caution. So, when the GPA received information that there were further smells, out of an abundance of caution it did take further action to try and abate those smells, and indeed when I say to try and abate the smells, I think the smells were indeed abated.

Hon. D J Bossino: So, is it the case, from her answer, that the hatch issue was not necessarily the only source or the only catalyst of the smells? It could have been something else, which is what provoked the GPA to take other enforcement or preventative actions. If so, if that assumption and reading of her answer is correct, can she specify what that was, what was the cause of the continuing smell?

Hon. G Arias-Vasquez: Madam Speaker, the advice that I have from the GPA is that it was the cargo hatch being opened and that the smells may have remained in the area notwithstanding the fact that the vessel had left. The GPA did the subsequent measure out of an abundance of caution, but the GPA strongly suspects that the smells came from the hatch being opened. I believe that answers the hon. Gentleman's question.

Madam Speaker: Next question.

[Q318/2026](#)
[Ocean Views –](#)
[Refurbishment](#)

Clerk: Question 318, the Hon. J Ladislaus.

Hon. J Ladislaus: Please provide a schedule of:

- (i) all works commissioned to refurbish and maintain Ocean Views in the past 5 years;
- (ii) when the works commenced and when they were completed;

- (iii) the cost of the works undertaken and the contractor who carried them out; and
- (iv) the dates on which the payments for works undertaken were made.

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, prior to August 2024, all maintenance and works carried out to Ocean Views were coordinated by a private contracted management company. We have requested the information from the management company, but they do not save the data in the manner it is requested, so they are looking back order by order to compile this information. We will commit to sending it to the hon. Member when it is available.

I now hand over a schedule with the information requested as from August 2024, when the GHA site and services manager took over the facilities management of Ocean Views.

Refurbishing Works					
Task	Start	End	Cost	Contractor	Payment Processed
Horizon Seclusion Room Padding	Nov 2025	Dec 2025	£38,000.00	E&M	11/02/2025
Horizon Seclusion Room CCTV	Nov 2025	Nov 2025	£1,375.00	Sheriff Group	25/09/2024
Horizon Seclusion Room labour	Nov 2025	Nov 2025	£4,302.00	GJBS	23/01/2026
Horizon Ward Flooring repairs	Oct 2024	Oct 2024	£717.60	GJBS	14/03/2025
Sky Ward air con replacement	Mar 2025	Mar 2025	£48,891.00	Deselec Ltd	10/02/2025
Emergency lights replacement Wards	Nov 2025	Dec 2025	**£10,291.00	GHA Maintenance	17/10/2025
Emergency lights replacement Exits	Jul 2025	Jul 2025	**£6,023.16	GHA Maintenance	29/07/2025
Dencos cooling system Units	Jun 2025	Jun 2025	£27,382.00	E&M	02/05/2025
Dencos cooling system Installation	Jun 2025	Jun 2025	£14,725.00	Sototechnic Ltd	06/06/2025
Fire Extinguisher replacements	Feb 2025	Feb 2025	£1,387.22	Sheriff Group	04/12/2024
Activities area renovation	Jun 2025	On-going	On-going	GHA & Trainees	On-going
Dawn Ward staff office renovation	Aug 2026	Sep 2026	£2,000.00	GJBS	Pending
Dawn Ward Shower room works	Aug 2026	Sep 2026	£617.70	GJBS	Pending
Generator repair works	Aug 2026	Sep 2026	£35,330.00	GHA Maintenance	Pending
Block D Roof waterproofing	21/09/26	Approx 2 weeks	£27,551.42	Jamena Ltd	Pending
UPS Systems battery replacement	Jul 2026	Jul 2026	£15,750.00	Upsmeier Power Systems	30/07/2026

CONTINUED ANSWER TO QUESTION 318

Maintenance Schedule	Visits PY	Cost PY	Contractor
Access Control	2	*See Below	Sheriff Group
Air Conditioning	4	£22,995.	Deselec Ltd
Air Handling Units	4	n/a	GHA Maintenance
CCTV	2	*See Below	Sheriff Group
Server Cooling System (Dencos)	4	£12,000	Sototechnic Ltd
Dry Riser	1	*See Below	Sheriff Group
Emergency Lights	4	*See Below	Sheriff Group
Fire Dampers	1	*See Below	Sheriff Group
Fire Extinguishers	1	*See Below	Sheriff Group
Gas Suppression System	2	*See Below	Sheriff Group
Generator	2	n/a	GHA Maintenance
Nurse Call System	4	*See Below	Sheriff Group
Sprinklers	1	£2,000	Sheriff Group
Staff Attack	4	*See Below	Sheriff Group
UPS System	1	£2,790	Upsmeier Power Systems
Water Leak system	4	*See Below	Sheriff Group
Upkeep Green areas	Weekly	£4,800	Green Arc
Fire Alarm System	4	*See Below	Sheriff Group

* Part of Sheriff Group yearly Fire Safety maintenance contract

£60,618.56

** Materials cost.

1045 **Madam Speaker:** Would the Hon. Mrs Ladislaus like some time to look at the schedule? I will come to that then after the supplementaries to the Hon. Mrs Sanchez.

Q319/2026
GHA dentist –
Routine checkup

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Clerk: Question 319, the Hon. J Ladislaus.

Hon. J Ladislaus: How often are children seen by a GHA dentist for a routine checkup?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, children aged 4 to 14 are seen based on NICE clinical guidance. The GHA dental officers take children from the list when they become school age, which is 4, or if they are new settlers to Gibraltar.

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The list is populated by their date of birth or they are newly registered. All such children are provided with an initial check-up. They are subsequently seen at 3, 6, 12 or 18 monthly intervals. Thereafter, those at high risk of dental disease are seen more often. Further check-ups will depend on criteria that determine if they are high or low risk.

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Hon. J Ladislaus: Madam Speaker, it is something that I have asked in the past. Is it not the case that the NICE guidelines also state that as soon as a child's milk teeth come through, they should be having regular check-ups? Why then is the GHA waiting until children are at age 4 before calling them in for first appointments?

1070 **Hon. G Arias-Vasquez:** Madam Speaker, the information that I have given the hon. Lady is the information that I have available. We rely on the clinicians to give us the information as to when they feel that children should be receiving the dental check-ups. So, the check-ups are driven by the dentist, so when they tell us that they feel that they need to be seen.

1075 **Madam Speaker:** Next question.

[Q320/2026](#)
[Meningitis B –](#)
[Vaccination programme for university students](#)

1080 **Clerk:** Question 320, the Hon. J Ladislaus.

Hon. J Ladislaus: Why wasn't the Meningitis B catch up vaccination programme for university students implemented prior to August 2026?

1085 **Clerk:** Answer, the Hon. Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, prior to 2026 outbreaks of Meningococcal Meningitis type B were very rare both in the UK and in other countries. Hence, Gibraltar did not offer a Meningitis B vaccine to university students. In March 2026, the situation changed with the Kent outbreak, when there were 21 laboratory confirmed cases and 2 deaths. This led to our Director of Public Health reviewing our immunisation schedule for students attending any university abroad and recommending that we offer vaccination to all students attending a university abroad who are under 25 years old. We have now vaccinated approximately 500 students with their initial vaccination and are in the process of offering a second dose to students who have yet to travel abroad to commence their studies.

Hon. J Ladislaus: I am grateful, Madam Speaker, but the reason I ask the question is because I note that the NHS's programme advice was published on the 10th July, which is a month earlier than ours, and if I am not mistaken, and I stand to be corrected, would have given time for a second dose to be administered here in Gibraltar before our students left to study.

So, can the Hon. Minister perhaps enlighten this court, sorry, this House, I have not slipped into that in so long, enlighten the House as to why that is the case?

Hon. G Arias-Vasquez: Madam Speaker, when the situation changed in the UK and the advice was offered more widely, we took the Public Health advice and it was a matter of receiving the vaccines and administering the doses.

Hon. J Ladislaus: Madam Speaker, just to confirm: is it the case then that Gibraltar follows the NHS's public health advice strictly as opposed to following our own advice, and is this not something that was on the radar already since March and could have been moved perhaps earlier here, knowing particularly our geographic location and the fact that it may take us that extra time in order to bring these vaccines in?

Hon. G Arias-Vasquez: Madam Speaker, we have a Director of Public Health who is very closely connected with the NHS in the UK and Public Health in the UK and other overseas territories. We are led entirely by the advice provided to us by Public Health, and I suggest that continues to be the case. She does not follow NHS guidelines strictly, but they are obviously persuasive to follow some legal jargon, rather than binding.

Madam Speaker: Next question.

1120

[Q321/2026](#)
[Gibraltar Fair –](#)
[Symptoms of foreign objects in their eyes](#)

Clerk: Question 321, the Hon. J Ladislaus.

1125 **Hon. J Ladislaus:** In the past 4 years, how many service users have presented at the GHA presenting with symptoms of foreign objects in their eyes after having ridden a ride at the Gibraltar Fair? Please provide a breakdown by year.

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the GHA has no evidence from 2023 and 2024 of any eye-related presentations to A&E associated with the fair.

1135 In 2025, 2 patients were confirmed as having corneal abrasions/foreign bodies, with both specifically reporting that the symptoms occurred after attending the fair. This year, a total of 57 patients presented to A&E following a visit to the fair with eye-related problems and/or foreign body sensation. Ophthalmology saw 30 patients in total in the Outpatients Department, 17 of which were referred from A&E. Out of all the patients presenting, 35 had a confirmed foreign body and a further 9 had corneal abrasions without a foreign body.

1140 **Hon. J Ladislaus:** Madam Speaker, following the 2 (interjections) who presented with corneal abrasions in 2025, what action was taken by the Government in order to ascertain that all rides were in fact safe the following year? Because it seems to be that this has been on the rise significantly this year. So, what occurred between 2025 and 2026 to address that issue of those 2 individuals who presented?

1145 **Hon. G Arias-Vasquez:** Madam Speaker, what occurred this year was a significant further number of individuals presented. In fact, what happened was that kids went to the fair and there might have been an issue. When 2 present, it is 2 kids that have gone to the fair and might have had an issue. So, as most parents will know, 2 kids went to the fair, got on the bumper cars and might have had an issue. When it is 35 that are presented in A&E, that is when the GHA starts looking at the cause and starts looking at what it is that is happening. In fact, it was well before the 35 presented, I think it was 8 or 9 that presented and then the GHA issued a statement confirming that they believed that there was an issue. In fact, the bumper cars then closed for that evening until it was confirmed that it was safe for everyone to ride that ride again. But 2 patients presenting at A&E do not necessarily cause any consternation.

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Hon. J Ladislaus: Madam Speaker, we have heard that 35 presented with foreign bodies in the eyes. Can the hon. Minister confirm what those foreign bodies were? Because if the ride went on to open the following day, then surely that would have been addressed, and we would know what the foreign bodies are.

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Hon. G Arias-Vasquez: Madam Speaker, I do not know what the foreign bodies are. Apologies.

1165 **Hon. J Ladislaus:** Madam Speaker, with respect, if investigations were carried out and it was ascertained that the ride was safe the following day, how is it not concluded what those foreign bodies were?

Hon. G Arias-Vasquez: Madam Speaker, the hon. Lady and I are lawyers. I am here to advise on policy at the GHA. I am not an ophthalmologist, I am not an ophthalmic nurse, and I have no qualifications to determine what it is that is found in people's eyes.

1170 Madam Speaker, if I were to pretend that I were an ophthalmologist, if I were to get involved in exactly what is wrong and what is presenting at A&E, the hon. Lady would criticise me for getting involved in clinical decisions.

1175 It was reported to me that there were foreign bodies that were found in the eyes of children; therefore, we did something about it. It is not my job to determine what it is that is found in the eyes of individuals, and indeed, Madam Speaker, as I have just said, if I were to get involved in what is found in the eyes and what those foreign bodies were the hon. Lady would be criticising me for getting involved in clinical decisions. It is not my role to find out what it is that went into kids' eyes.

1180 **Hon. J Ladislaus:** Madam Speaker, with utmost respect, I am not asking a medical question. So, will the hon. Minister commit to publishing the findings of the safety report that was undertaken before the ride was reopened, and perhaps then it could shed some light for the public as to what on earth the source of these foreign bodies was?

1185 **Hon. G Arias-Vasquez:** Madam Speaker, there are medical journals which contain such information specifically on this issue. I would advise the hon. Lady to read up on those journals. It is not my job to find out exactly what went into children's eyes. It is the hospital's job and the Director General's job to make sure that those children are seen appropriately. Our role is to make sure that children are safe and that it does not happen again. However, it is not my role as Minister
1190 for Health to determine what those foreign objects were. It is my role as Minister for Health to determine that there were foreign objects found in children's eyes, and for the Director General and the ophthalmologist at the GHA to determine exactly what happened and to inform me how we prevent it in the future.

1195 **Hon. J Ladislaus:** Madam Speaker. Is the Hon. Minister then saying that her role is not to come to Parliament prepared for the obvious supplementary question, which was going to be asked, when I asked about foreign bodies in eyes as to what the source of those foreign bodies was? I am not expecting medical knowledge. I am expecting that the civil servants and experts will in fact help her out and answer that question for her.

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Hon. G Arias-Vasquez: Madam Speaker, the question is: in the past 4 years how many service users have presented at the GHA with symptoms of foreign objects in their eyes after having ridden a ride at the Gibraltar Fair. My role is to answer that question adequately. The hon. Lady's role is, if she indeed wants information on what those foreign objects are, all she has to do is ask
1205 the question with notice. I will then go to the GHA, the GHA will go to the ophthalmologist, and the ophthalmologist will provide me and this House with information on exactly what those foreign objects were. I have said it numerous times in this House: if the hon. Lady wishes to ask me a specific question on what foreign objects in the eyes of children were after having ridden a ride in the fair was, please ask me specifically that question and not a question on how many
1210 service users presented with symptoms in their eyes. My role is to know how many children presented with their symptoms and what was done about it, not to know what were the foreign objects in the children's eyes. I find this line of questioning Madam Speaker... if this is what we are getting down to it shows the state of the GHA, and it actually tells me that the GHA is doing quite well when I am being asked what a foreign object in a child's eye was, rather than what I am doing
1215 about it.

Madam Speaker: The Hon. Leader of the Opposition.

Hon. Dr K Azopardi: Madam Speaker, this is not about the state of the GHA. My learned
 1220 colleague has asked a question in the first available Parliament after it is within the public domain
 that a ride was closed at the fair because of people reporting that things have gone in their eye.
 There were public statements to that effect. My learned colleague Mrs Ladislaus has tried to
 ascertain over a longer period whether people have reported to the GHA with similar complaints.

It is also in the public domain that the ride was closed and thereafter reopened, and of course
 1225 the hon. Lady, the Minister, has said her prime concern must be safety. Surely, it is an obvious
 supplementary, in the context of everything that has happened in the last few weeks, that we
 would want to know what it is, given that it is a sizeable number, 57 people reported to A&E
 complaining about foreign objects or abrasions, which I understood to be operations and then
 aberrations, corneal abrasions that in asking her officials she would ask, because her prime
 1230 concern is safety, what is it that was deemed to be the foreign object.

Surely in any event, when the Government decided to reopen the fair ride, it would have asked
 that question as well, to understand what it is that was the root cause that they were supposed
 to be checking on the ride that they thereafter reopened. So all of that surely must be known to
 the Government in different guises, and I do not understand why the hon. Lady, who has taken
 1235 quite a while to wind me up, but the hon. Lady is taking a hectoring tone with my colleague on
 this issue, where she says safety is the prime concern and we are simply asking what was the
 source, the foreign object, which presumably she knows.

Hon. G Arias-Vasquez: Madam Speaker, what a waste of parliamentary time. If there are
 1240 foreign objects, the press release that we issued at the time states:

the temporary closure follows a number of incidents involving small fragments becoming embedded in the eyes of
 users of the attraction.

I have no objection whatsoever in answering questions. I am not going to stand here and
 pretend to know exactly what was found embedded in the eyes. All I need to know is that there
 1245 were small fragments embedded in people's eyes and it is the ophthalmologist's job to determine
 exactly what they were and to find the solution for them.

Madam Speaker, what are we talking about? The question is how many people presented at
 A&E with symptoms of foreign objects in their eyes. I have answered that question. I will happily
 answer the question of what those foreign objects were. I am not going to stand here and pretend
 1250 that I have exactly what those foreign objects were because it is not relevant to my role. It is
 relevant to my role to know that people were presenting at A&E with foreign objects in their eyes.

If the hon. Lady is genuinely so concerned about what exactly those foreign objects were, I am
 very happy to answer that question if notice of the question is given. I will go to the Director
 General, and the Director General will go to the ophthalmic nurse, will go to the ophthalmologist
 1255 and will get exactly what those particles were, exactly to the detail. I have no objection whatsoever
 in answering that. What I do have an objection to is hon. Members opposite pretending to say
 that I should be answering questions, that I am withholding information, when actually it is them
 that do not ask the proper questions in order to elicit the proper answers.

Madam Speaker: We have had six on this. I know the Hon. Mr Sacarello has been patiently
 1260 waiting for a question, so I am having one more. Decide between you who is asking the question.
 I have had six questions on this. I am allowing a seventh.

Hon. Dr K Azopardi: Ok, I am going to ask it then. Madam Speaker, we are not saying that the
 1265 hon. Lady is withholding information. She might be, but that is not what we are saying. What we
 are saying is why was it not obvious to the hon. Lady to ask the question from her officials when
 she has got a question in front of her about foreign objects, a ride has been closed down, there
 has been a spate of people attending A&E, 57, a ride has been reopened, closed and then

1270 reopened. In the context of all that, which is an inordinate, not normal example of people
attending A&E with eye problems, in those circumstances why does she not ask her officials what
the objects were? That is really what we are asking. And why does she not have the information
today? It would have been obvious, not because in her role as Health Minister she had any role in
closing and then opening the fair ride, but it was in the public domain. Presumably someone in
1275 the Government found out because, if they are checking the ride, they must have checked the
source of the problem. You cannot check the source of the problem unless you know what the
foreign objects were, so the information must be there within the Government. I am not saying
that she did the checking, opening and closing of the ride, but faced with a question of foreign
objects, is she seriously telling this House that, faced with that object and that question, knowing
that there are 57 people involved, she does not ask her officials what the foreign objects are? Is
1280 that what she is saying to the House?

Hon. G Arias-Vasquez: Madam Speaker, I refer the hon. Gentleman to the answer I gave a few moments ago.

1285 **Madam Speaker:** Next question.

[Q322/2026](#)
[Self-service kiosks at the GHA –](#)
[Been active or inactive](#)

1290 **Clerk:** Question 322, the Hon. J Ladislaus.

Hon. J Ladislaus: Can the Government please provide a schedule as to when the self-service kiosks at the GHA have been active and inactive from the date on which they were rolled out to date, broken down by month and location?

1295 **Clerk:** Answer, the Hon. Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): The GHA does not store data on when the kiosks were active or not.

1300 **Hon. J Ladislaus:** Madam Speaker the reason I have asked the question is because the information I am receiving is that the kiosks have been down more than they have been functioning since they commenced. Can the Hon. Minister enlighten this House as to why that is?

1305 **Hon. G Arias-Vasquez:** Madam Speaker, there have been numerous issues relating to the clinical use by doctors of the kiosks, meaning that they have to refresh the kiosks regularly, so we are looking to ways to improve those before we roll them out again.

1310 **Hon. J Ladislaus:** Madam Speaker, this is a new system. Surely those assessments would have been undertaken prior to the system having been brought in. Can the Hon. Minister confirm whether those assessments were indeed undertaken?

Hon. G Arias-Vasquez: Yes, Madam Speaker, those assessments were indeed undertaken; however, the functionality of them is looking to be improved.

1315 **Madam Speaker:** Next question.

Q323/2026
St Bernard's Hospital –
Basement entrance

Clerk: Question 323, the Hon. J Ladislaus.

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Hon. J Ladislaus: Is the basement entrance of St Bernard's Hospital the only entrance through which to take patients directly to a ward?

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

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

Hon. J Ladislaus: Madam Speaker, perhaps the Hon. Minister could answer why it is that patients appear to be taken up to wards via the basement entrance when they have left the hospital for an appointment, perhaps at another organisation, and then brought back to the ward. Why is it that they are being brought in via the basement?

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Hon. G Arias-Vasquez: Madam Speaker, there have been very few incidents where that has been the case. Patients are normally dropped off at A&E before going up to the wards. In those instances, there could have been numerous different issues why they were dropped off at the basement.

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Hon. J Ladislaus: Madam Speaker, are there any plans and we have heard that there are plans as to the entrance of the hospital, projects underway, consideration of those projects? Are there any plans to improve that access from the outside of the hospital? Because my understanding is that patients are having to be brought in where there are stores of medications. It is not a pleasant environment, particularly when one is already admitted in hospital, to be brought in via a basement. I would question the safety of that as well. Is there any consideration being given as to an alternative route there?

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Hon. G Arias-Vasquez: Madam Speaker, the two routes which should always be used are the hospital entrance and or the ambulance bay at the rear, going directly to A&E and then directly up to the wards from A&E. There are no further plans under consideration, as far as I am aware, for any further hospital entrances.

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Madam Speaker: Next question.

Q324/2026
St. Bernard's Hospital –
Cardiac rehabilitation gym

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Clerk: Question 324, the Hon. J Ladislaus.

Hon. J Ladislaus: When will the cardiac rehabilitation gym return to its usual premises on the ground floor of St. Bernard's Hospital?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, as soon as the ambulance village is operational.

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Hon. J Ladislaus: Madam Speaker I do have further questions on the ambulance bays themselves. In May of this year the Minister for Health said in this House that the gym was forecasted to return to St Bernard's Hospital by the end of July this year. Why have no further public statements been made concerning that obvious delay?

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Hon. G Arias-Vasquez: Madam Speaker, numerous public statements have been made, including to the Cardiac Association themselves at their dinner, where I addressed delays to the ambulance station.

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Hon. J Ladislaus: Madam Speaker, is the Hon. Minister aware whether there has been any reduction in capacity after sessions or patient access during the time which the cardiac gym has been located outside of St Bernard's Hospital?

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Hon. G Arias-Vasquez: Madam Speaker, I am not aware of any such issues. I understand that the Cardiac Association's preferred station, preferred gym is indeed at the hospital. There are operational reasons, unfortunately, why the gym has had to be relocated, and we will look to relocate that gym as soon as possible.

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Hon. J Ladislaus: Just for the avoidance of doubt, are the operational reasons still the ongoing works to the ambulance, the new ambulance station, as has been announced?

Hon. G Arias-Vasquez: Madam Speaker, that was indeed my first answer.

Madam Speaker: Next question.

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[Q325/2026](#)
[Patient records into a digitised format –](#)
[Transcription been entrusted](#)

Clerk: Question 325, the Hon. J Ladislaus.

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Hon. J Ladislaus: To whom has the transcription of patient records into a digitised format been entrusted? Please provide an update as to the progress being made, to include all records across the entirety of the GHA.

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the digitisation programme has been outsourced to Microbusiness Systems, MBS. To date, all live patient records at St Bernard's have been digitalised, including the maternity department records which were kept and maintained separately. The programme has also been completed for all mental health services. At present, the GHA has commenced the scanning and digitalisation of records relating to deceased patients, the RIP files. This work is ongoing.

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Hon. J Ladislaus: Madam Speaker, has there been a clinical lead, perhaps, for the records which may have required professional interpretation? I simply ask because I note that it is the case in other jurisdictions that there is often a person who has medical experience overseeing this.

Hon. G Arias-Vasquez: Madam Speaker, there have been numerous individuals that have been overseeing this, including informatics at the hospital.

1415 **Hon. J Ladislaus:** When does the project to digitise all patient records of deceased patients, when is it expected to be concluded?

Hon. G Arias-Vasquez: Madam Speaker, the only information I have is that the work is ongoing. I suspect that there is not a confirmed end date for that yet.

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Madam Speaker: Next question.

1425

Q326/2026

Reports of shortages of healthcare consumables –
Reason(s) for the shortage(s)

Clerk: Question 326, the Hon. J Ladislaus.

1430 **Hon. J Ladislaus:** In the past 12 months have there been any reports of shortages of healthcare consumables, such as, but not limited to, disposable gloves, aprons/gowns, masks, vomit bowls/emesis basins at the GHA? If so, please outline the reason(s) for the shortage(s).

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

1435 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, there have been no known instances during the past 12 months where a shortage of healthcare consumables resulted in an interruption to the provision of healthcare services. The combination of the Omnicell Stock Monitoring contingency stock arrangements and coordination between the stores and procurement teams continues to provide measures to identify and mitigate potential supply
1440 disruptions.

Madam Speaker: Next question.

Q327-328/2026

Since the implementation of the Treaty –
Users being unable to fill their prescriptions, or of interruptions to treatments

Clerk: Question 327, the Hon. J Ladislaus.

1445 **Hon. J Ladislaus:** Since the implementation of the Treaty, how many instances have there been of GHA service users being unable to fill their prescriptions, or of interruptions to treatments due to a shortage of particular medications? Please detail the exact issues which disrupted the supply chain and prevented those medications from being imported into Gibraltar in a timely manner.

1450 **Clerk:** Answer, the Hon. 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 328.

1455 **Clerk:** Question 328, the Hon. J Ladislaus.

Hon. J Ladislaus: Please detail the specific medications which there has been a shortage of since the implementation of the Treaty and confirm whether supply has now been resolved.

1460 **Clerk:** Answer, the Hon. Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, in answer to Question 327, the issues disrupting the importation of medicines related to delays at the Spanish and Gibraltar customs due to a change of the procedures following post-Treaty implementation. We are aware of 4 instances when the Treaty first came to effect when the service users had to delay their treatments due to the issues faced with importation. Please note that 2 of these instances related to community pharmacy medications and not hospital products.

1470 In answer to Question 328, post- Treaty implementation there was a delay in receiving some medications, both in the community pharmacy and the hospital pharmacy. The delays were mainly related to refrigerated items, namely Norditropin and Ofatumumab. Supply has now been resolved and there are no further issues with medication importation.

1475 **Hon. J Ladislaus:** Madam Speaker, I am grateful. The Government said they were ready in April for the implementation of this Treaty, and then they had not until July. Why were not issues with those customs codes foreseen? Surely, it is expected that the Government was working with the Spanish counterparts in order to ascertain any issues and to avoid them before this happened. Can the Hon. Minister shed some light as to why that was not the case?

1480 **Hon. G Arias-Vasquez:** Madam Speaker, as I explained on TV on the night of these issues, there were teething issues in respect of the Treaty. In fact, I gave the specific example of what was happening in relation to medicinal products and pharmaceutical products. What was happening in relation to their importation in Gibraltar is that Gibraltar is the only place within the EU/Schengen area that is able to sell UK pharmaceutical drugs. Therefore, there was an issue at
1485 the border when importing these goods, as they flagged red because of that. Madam Speaker, it is a huge transition that we have seen, and to have seen two weeks of teething issues where 4 individuals had to delay treatment was exceptional at the time.

As I answered in my parliamentary questions, there was an issue with refrigerated products, and these were resolved imminently. If we contrast and compare to the issues that were seen in
1490 Dover and Calais when the TCA was implemented, we avoided a lot of the scenes that were seen there. An issue with a specific customs code, because there is no such precedent in the EU, I would say it is a teething issue that was resolved very quickly and that was unforeseen before the treaty implementation occurred.

1495 **Hon. J Ladislaus:** Madam Speaker, we have heard that some of the medications that were held up were indeed refrigerated ones. Is it the case, therefore, that hold-ups at the Frontier resulted in some of these medications perishing and having to be disposed of?

Hon. G Arias-Vasquez: Madam Speaker, it is likely that they were or had to be disposed of. The
1500 issues were dealt with by the community pharmacies in their ordinary way and importation of pharmaceutical items was resumed imminently.

Madam Speaker: Next question.

1505

Q329/2026

Commercial Framework for New Medicines –
GHA determines which new high-cost medications are to be routinely funded

Clerk: Question 329, the Hon. J Ladislaus.

1510 **Hon. J Ladislaus:** Does the GHA have a Commercial Framework for New Medicines? If it does, please provide a copy of that document. If not, please outline how the GHA determines which new high-cost medications are to be routinely funded.

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, new medications are considered for inclusion into the GHA formulary through the Drugs and

Therapeutics Committee the DTC. The terms of reference for the DTC are included in the schedule provided and these include the processes for considering new medicine. Where a new medicine or treatment is proposed, the DTC considers the available clinical evidence supporting its use, including relevant guidance and technical appraisals issued by the National Institute for Health and Care Excellence NICE. The committee also considers the clinical benefits and risks, other available alternative treatment, and the anticipated financial and service implications. Based on this, a decision is made whether or not to add new medicine to the GHA formulary. There seems to be a glitch in my pack, and I have not got a schedule supporting this. I am going to ask my team to ensure that is handed to me so I can hand it over to the hon. Lady.

[SCHEDULE WEB LINK](#)

Hon. J Ladislaus: Madam Speaker are any conflict-of-interest declarations required from the officials who are involved in the DTC procedures?

Hon. G Arias-Vasquez: Madam Speaker, I am sure that they are, but I do not understand the question. The terms of reference of the DTC simply follow NICE guidelines, and I would imagine that we follow NHS and NICE guidelines. So, I do not have the terms of reference of the DTC on me, but I would imagine that they probably do include conflict of interest provisions. However, I am struggling to see the relevance of this if we indeed follow UK NICE guidelines or NHS guidelines.

Hon. J Ladislaus: Madam Speaker, when a new medication is not in fact routinely funded by the GHA, or the DTC decides that in fact it should not be funded, what arrangements are there in place for any appeals that perhaps a patient may be able to follow?

Hon. G Arias-Vasquez: Madam Speaker, when a patient requires a specific medication, if it is approved by the NICE guidelines, we would ordinarily seek to source that medication even if it is not in the GHA formulary, and there are significant examples of us trying to do this, as long as it is a medication that is approved by NICE. I think that answers the hon. Lady's question.

Hon. D J Bossino: My hon. and Learned Friend will be given the opportunity to ask questions once the terms of reference are made available to her in the normal way, by way of further supplementary, because it is not available. In any event, even if it had been made available, she should be given an opportunity to review it and perhaps ask a question later on, rather than close the supplementary in respect of this question in the Order Paper.

Madam Speaker: I think that is fair. Once the information has been given, remind me. Next Question.

[Q330/2026](#)
[Departments within the GHA –](#)
[Shortages of staff](#)

Clerk: Question 330, the Hon. J Ladislaus.

Hon. J Ladislaus: Within the past 6 months, has any department within the GHA had shortages of staff which have resulted in resilience issues that have had a knock-on effect on services? If so, please provide a breakdown as to:

- (i) the particular department;
- (ii) the period of time within which issues were experienced,

(iii) details as to the impact on services.

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

1570 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, when considering whether staff shortages have resulted in resilience issues or affected service delivery, it is important to first define what is meant by staff shortages. Staff absences can arise from a range of circumstances: short or long-term sickness, maternity or parental leave, resignations, retirements, difficulties in recruiting to vacant posts, recruitment processes, challenges in
1575 attracting suitably qualified candidates, temporary unavailability of specialist staff due to training, secondments or professional development commitments.

Across the GHA, staffing pressures are continuously monitored and wherever possible mitigated through the flexibility and commitment of existing staff, the use of temporary or locum cover, cross-cover arrangement between teams, prioritisation of clinical activity, service redesign, extended roles and alternative ways of working. These measures are implemented to minimise any impacts on patient care and ensure the continuity of essential services. Notwithstanding these mitigation measures, there have been occasions over the past 6 months where staffing shortages have affected service resilience and had an impact on certain services. Examples include such areas as psychiatry and ENT, where unanticipated workforce challenges have at times affected
1580 service capacity and delivery. Despite these pressures, significant efforts have been made to maintain access to care. This reflects the organisation's commitment to maintaining high-quality patient care despite ongoing workforce challenges.

Hon. J Ladislaus: Madam Speaker I am grateful but clearly when I asked whether any
1590 department had had shortages of staff which resulted in resilience issues, I meant for all of the above reasons that the Hon. Minister has outlined now for this House. We note that there are 2 specifically outlined, psychiatry and ENT departments. Are those the only 2 that have been identified, or have others been identified as well?

1595 **Hon. G Arias-Vasquez:** These are the 2 that have been specifically highlighted in answering this question.

Hon. J Ladislaus: We cannot then discount the fact that there may have been other shortages. Does the Hon. Minister agree with that?
1600

Hon. G Arias-Vasquez: Madam Speaker sickness occurs across departments. If we were to give a schedule of all the sickness across the GHA, I am not sure that we would be able to give that across the floor. There are issues of people having sick leave, maternities, as I have outlined. The 2 examples that I have been given are specifically ENT and psychiatry. I do not know if there are
1605 any further examples, but these are the 2 that are specifically highlighted by the GHA.

Hon. J Ladislaus: I appreciate that there may be levels of sickness that require cover, but surely that is a label on the tin. Resilience means that a service and again I stand to be corrected has the necessary backup in order to deal with these blips in the system, which are ordinary working day
1610 issues that any workplace will experience. The point I am asking is whether the GHA's resilience is there and whether these departments are in fact coping with those shortages, because it does not seem to me that they are, given the impact that they are having on the departments from the information I am receiving from members of the public. So, the question is: is the Hon. Minister happy with the level of resilience that the GHA currently has in place for staff?

1615 **Hon. G Arias-Vasquez:** The GHA has a workforce of circa 1,400 individuals. Of these 1,400 individuals, there will be sickness and there will be numerous other issues such as the ones I have

been highlighting. Am I happy with the resilience at the hospital? Yes, absolutely. The levels of cover are carried out on a daily basis. The executive team covers all of the shortages that there are in the different areas. To listen to Mrs Ladislaus, you would think that there is a failing service where no operations are carried out, no procedures are carried out, and no clinicians are actually seeing their patients. That is far from the truth. As I have already outlined in my answer to the question, the clinicians involved are constantly looking at flexible ways in order to make sure that patients are not affected by any issues which occur due to staff illness issues etc. So, am I happy with the resilience shown by the GHA staff? Absolutely. Are there always going to be these issues in all of the healthcare organisations? Absolutely. You just have to see the patients that we refer to the NHS to see that actually there are all these issues in all healthcare organisations, because unfortunately people get sick and that has certain consequences on their patient workload. So, am I happy with the way that these are managed? Yes, Madam Speaker, I am.

Madam Speaker: Yes, the Hon. Mr Bossino.

Hon. D J Bossino: Once again, the Minister for Health chooses to characterise the questions which are put to her and the individuals who pose those questions. I think what Mrs Ladislaus sets out is something which is very important, which is the point she makes about resilience and whether she, as the Minister, is satisfied, yes or no. Can I ask her this by way of supplementary question: is it the case that in the future, when we choose to raise these points and ask these questions in this House which are very specific questions, talking about the particular department, the period of time when these issues were experienced, and the details as to the impact on services, the Hon. Minister is going to glibly ignore the question and answer it the way she has, and simply say, for example, in relation to the particular department, simply say refer to 2 by way of example without setting out the full list of the departments which have been affected? Because she may say, and she may think, and she may reach a judgement call that she is satisfied about the resilience of the services provided by the GHA, but we may choose to have a different view.

Madam Speaker: The first part of that is a hypothetical question which I am not going to allow. If this happens in the future, would you? That is a hypothetical question. Is there a specific question?

Hon. D J Bossino: The specific question then, if I phrase it differently so as not to breach the rule, is: can the hon. Minister answer the question that has been put by my Learned and hon. Friend in the Order Paper, which is a very specific question which she has failed to respond to? May I add that I must say that certainly in her preamble to the answer she has come across as very defensive in the way she set it out by way of preambular comment, which actually gives us more rise for concern than anything else.

Hon. G Arias-Vasquez: Madam Speaker, I am very pleased to see another clip emerging from the Hon. Mr Bossino as sweeper of the House. Indeed, he is probably delighted. I barely ever post clips from Parliament. (Interjections) The hon. Member opposite is speaking from a sedentary position, as he very often does, in a very rude manner. It is remarkable that my answers can be categorised however the hon. Member opposite wished to categorise them, and yet when I categorise their answers in a certain way the hon. Sweeper of the House gladly gets up to make sure that it is reinforced that in his view, I am categorising the questions of the hon. Member opposite in a certain way.

Madam Speaker, the GHA offers a remarkable service. The GHA when we bring MPs over from the UK, the reactions of the MPs to the services that are offered by the GHA only attract praise. In fact, in every conference that I have been to the subject of conversation has been around the services offered by the GHA and in fact how we are doing far, far better than the NHS in many separate instances. So, I currently am Minister for Health of a GHA which I am extremely proud

1670 of. The flexibility which they offer to ensure that patient services are not cancelled is to be
 commended. Madam Speaker, on a daily basis, the amount of operations there are to ensure that
 our waiting lists are kept down is remarkable. The amount of workarounds that there are, because
 1675 in any healthcare organisation where there are 1,400 members of staff there will be issues with
 staff sickness, there will be issues with staff shortages for a whole host of different reasons.
 However, the GHA is flexible enough to ensure that the services are carried out, and I will not
 allow a characterisation of the GHA which is one where services are cancelled constantly. There
 will be some services that are cancelled and there will be some instances where staff shortages
 1680 mean that certain patients cannot be seen on a particular day. However, the resilience of the GHA
 is such that it is ensured. The 2 examples I gave are 2 areas in which the GHA has suffered staff
 shortages in the past few weeks. That is a specific example that I gave. Are there others? Quite
 possibly there are others. When a question of staff shortages is asked in such a wide manner, it is
 impossible to categorise all of the staff shortages that happen in a health organisation on a regular
 basis.

1685 **Madam Speaker:** Just as an aside before we go on, I am going to direct the hon. Minister to
 desist from calling a Member opposite the sweeper continually. Up to the point where you have
 used the word the hon. Sweeper, it should be the hon. Opposition Member by name. So let us
 leave that to one side for now.

1690 **Hon. G Arias-Vasquez:** Apologies Madam Speaker.

Madam Speaker: Next Question.

1695

[Q331&332/2026](#)
[GHA's Radiology Department Vacant positions –](#)
[Radiographers on sick leave](#)

ANSWER TO QUESTION 332			
Month	Total No of Radiographers on Sick Leave	Total No of days taken	
Sep-25	5	11	
Oct-25	2	3	
Nov-25	1	2	
Dec-25	1	1	
Jan-26	3	5	
Feb-26	3	4	
Mar-26	4	7.5	
Apr-26	5	14	
May-26	4	8	
Jun-26	4	7	
Jul-26	2	8	
Aug-26	3	5	

Clerk: Question 331, the Hon. J Ladislaus.

1700 **Hon. J Ladislaus:** How many vacant positions are there currently within the GHA's Radiology Department?

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

1705 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I will answer this question together with Question 332.

Clerk: Question 332, the Hon. J Ladislaus.

1710 **Hon. J Ladislaus:** Please provide statistics in respect of the past 12 months as to how many GHA radiographers there have been on sick leave each month.

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

1715 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker in answer to Question 331, 2 ma'am.

In answer to Question 332 I now hand over a schedule with information requested.

1720 **Madam Speaker:** We will come back to the schedule. In relation to Question 331, are there any supplementaries?

Hon. J Ladislaus: Madam Speaker, at any point within the last 6 months, to the Hon. Minister's knowledge has the Radiology Department been operating with minimum staffing levels? At any point?

1725 **Hon. G Arias-Vasquez:** Madam Speaker, again, an operational issue in the GHA. The information that I have does not lead me to believe that there have been, but I do not get involved in that level of operational detail.

1730 **Madam Speaker:** Is the Hon. Mrs Ladislaus in a position to ask supplementaries on 332, or would she prefer I come back to that?

Hon. J Ladislaus: Madam Speaker, yes.

1735 **Madam Speaker:** Yes, I Come back or yes, you can answer? Anything on 332 then.

Hon. J Ladislaus: Madam Speaker, I note that there have been instances where there have been a significant number of radiographers on the complement on sick leave at any given time. So, September 25: 5; January 26: 3; March 26: 4; April 26: 5; 4 again; 4; 2; 3.

1740 Madam Speaker, is the Hon. Minister happy with the number within the complement, and the fact that with this number of radiographers on sick leave at any given time, plus the vacancies that are outstanding, the service has resilience? Because it is not a massive complement. So, is the Hon. Minister happy with the resilience of that particular service?

1745 **Hon. G Arias-Vasquez:** Madam Speaker, if we look at the complement, from a quick scan of the complement there are I believe 9 radiologists available. I have done this on a very quick scan, and they are scattered around, and this does not include any consultants in the department.

Madam Speaker, if you look at that schedule it says the total number of radiographers on sick leave in a monthly period and the total number of days taken by those radiographers. People get sick. To have 5 radiographers off in any given month, so the 5 radiographers that were off for a

1750 total number of 14 days that was probably broken down between radiographers, so it could have been 2 or 3 days each.

Unfortunately, in September, which is one of the months that the hon. Lady refers to, there was a total of 5 radiographers on sick leave for a total number of 11 days. Madam Speaker, children return to school in September. Madam Speaker, the question of is there an inordinate amount of sick leave in the department if you look at those figures, I would not think that there is anything extraordinary about those figures given the complement, because as I have said, unfortunately people do get sick.

Hon. J Ladislaus: Madam Speaker, just for the avoidance of doubt, I am not saying that there is an inordinately high amount of sick leave within the department. I am not having a go, as it were, at radiographers having sick leave. It is actually the opposite: it is whether they have enough staff available in order to cover inevitable sick leave. Looking at these numbers as we have been looking at them, firstly the schedule I note does not in fact break down whether they were or were not on sick leave at the same time, so there is an assumption being made. Am I correct in saying that the Hon. Minister is assuming the missing information? Would she agree with that?

Hon. G Arias-Vasquez: No, Madam Speaker. I am reading a schedule which answers exactly the question that she has posed. What I am looking at is a schedule that says the total number of radiographers that were on sick leave in a month, which is exactly the question that she has answered. Whether they were all on sick leave at the same time or not, I am not sure. Even if the radiographers were on sick leave at the same time, the question that she seems to be asking is how many services were cancelled as a result of this. I do not have that information to hand, and she is making an assumption that that is the case. The information that she has been provided is information provided exactly on the question that she asked, Madam Speaker.

Hon. J Ladislaus: Madam Speaker, with respect, I am simply asking a supplementary on what the Hon. Minister said, which in fact was that she did not think, she assumed that they would not have been on sick leave all at the same time. My question was: is the Hon. Minister saying that she is in fact assuming the information which is missing within that table?

Hon. G Arias-Vasquez: Madam Speaker, I am not going to accept that any categorisation, the information is not missing. The information provided was exactly the information requested. I do not have the information in front of me as to whether they all took the leave at the same time or not.

Again, Madam Speaker, I have made this statement in Parliament before: I am advised on an annual basis on how many radiographers the GHA needs. The process is then that the commitment for that budget goes to Government and Government commits the budget. Government has committed the budget for all the clinicians that the GHA has requested for the years that I have been in this post.

Now, Madam Speaker, it is a remarkable feat of the Opposition that we have Mrs Ladislaus asking for further staff, further recruitment and further radiographers in this instance although there are many different instances of different professionals that the Hon. Mrs Ladislaus is asking for and right beside her we have the Hon. Mr Clinton who is telling us that we should be controlling costs. The messaging of the Opposition seems to depend entirely on what audience they are playing to at that moment in time and what social media clip they wish to put at that moment in time. There has to be a cohesive message.

If the question is whether we have enough radiographers, the answer has to be we have the number of radiographers that the GHA requests from the Government. There are significantly more than the GHA had in 2011, I can confirm that, and we are looking at the provision of different services. However, Madam Speaker, if that is the question, then that is the question for the Director General of the Hospital, and the Director General of the Hospital tells us how many there

are. In fact, Madam Speaker, in November 2011 there were 2 radiographers; we now have 9. So, 15 years ago, exactly the growth in the population has not doubled.

1805 So, as I have stated, Madam Speaker, if the question is do we have sufficient radiographers, we have the number of radiographers that the GHA requests from the Government. If the question is will they all leave at the same time, this is the information that has been provided as a direct result of a question. I am not having it categorised as information missing in the schedule, Madam Speaker.

1810 **Madam Speaker:** Next question.

[Q333/2026](#)
[Director of Nursing at the GHA –](#)
[Vacancy](#)

Clerk: Question 333, the Hon. J Ladislaus.

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Hon. J Ladislaus: Has the vacancy for Director of Nursing at the GHA now been filled on a permanent basis or is the post still in an acting capacity and, if so, why?

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the Director of Nursing post will be advertised soon with a short turnaround when the GHA subsequently expects to fill the post on a permanent basis. Up to this point in time, the post has been covered in an acting capacity very effectively by two very senior experienced local nurses. The practice and interval of time is not at all unusual in such circumstances for such an important post and has allowed the Director General time to assess the nursing needs across the organisation. The purpose of this was to give him the time to best align these needs with the specific experience and qualifications of the potential applicants.

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1830 **Hon. J Ladislaus:** Madam Speaker, can the Hon. Minister perhaps confirm when the vacancy was opened and whether the process has now concluded?

Hon. G Arias-Vasquez: Madam Speaker, I have not said that. What I have said is that the post will be advertised soon with a short turnaround and that the GHA subsequently expects to fill the position on a permanent basis.

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Hon. J Ladislaus: Madam Speaker, in January 2026 it was that the former Director of Nursing moved out of the role and into a consultancy capacity. We are talking about eight months now, eight months within which no vacancies have been advertised, and it means now that obviously there are further delays because now that post needs to be advertised, as we have heard, and then the whole process needs to play out. Why has it taken eight months to put the vacancy out when they knew that this was coming?

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Hon. G Arias-Vasquez: Madam Speaker, a very simple reason. Again, the tone of the question is eight months and then they do not want me to categorise it as catastrophising. The answer is very simple. We have a new Director General. My view is that the Director General should be able to choose his executive team. The Director General has now had experience with most of the likely applicants for that post and therefore will be in a better position. So, the position will be

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1850 advertised imminently and the turnaround time for fulfilling that post is not going to be that long because possible applicants have already been acting into that role.

1855 **Hon. J Ladislaus:** Madam Speaker, it defeats the purpose. That is not the question. The Director General may have just started soon after the Director of Nursing was moved, but the question is why was not the vacancy opened sooner? I mean, there is a process in any event to be followed so that now we are looking at a further delay. So why was not the vacancy opened sooner regardless of whether the Director General had to meet the individuals who were applying or not or get to know them? Why was it not opened sooner? Why so late?

1860 **Hon. G Arias-Vasquez:** Madam Speaker, I have answered that question directly. The Director General was appointed in March this year and the Director General has had an opportunity to see both of the potential applicants in their roles. Madam Speaker, it is very important that the Director General is comfortable with the team and that he chooses his team. Madam Speaker, the reasons are not nefarious. There is nothing about it. The position was not opened simply because it will be opened once the Director General is completely comfortable with the opening of the post.

1870 **Hon. J Ladislaus:** Madam Speaker, so what the Hon. Minister is saying is that those two the vacancy seems to have been ring-fenced for those two individuals to apply. Does that not give them an unfair advantage in the market, or is this vacancy not going to be put outside the GHA? Has somebody been earmarked already?

1875 **Hon. G Arias-Vasquez:** Madam Speaker, it would be extraordinary to put a nursing position outside the GHA. But I am wondering where exactly the hon. Lady is coming from. The position, sorry, the hon. Gentleman looked puzzled. The practice is to advertise the position within the GHA and this Party's policy is to try and fulfil those vacancies from local applicants that will go into the position that have been up through the GHA. So, if it is at all possible, the preference is for that post to go to an applicant that has gone through the system here in the GHA.

1880 Madam Speaker, it is not about ring-fencing the position. It is about the individuals that have already expressed the desire to apply for that position. There are conversations ongoing all the time at the GHA as to who are the likely applicants and that is the only thing that has occurred. Madam Speaker, once again, there is nothing nefarious. There is nothing doubtful however the Opposition wishes to classify this. There are ongoing conversations which happen all the time within the GHA.

1885 **Hon. J Ladislaus:** Madam Speaker, again for the avoidance of doubt, it would be wonderful to see a local within the position, but I ask the question: what happens in the perhaps unlikely, but what happens in the situation where neither of those individuals are considered to perhaps fulfil the necessary criteria? What happens? Because it does seem to me that there has already been a process ongoing, an almost quasi process of recruitment in the background. If these individuals have already been earmarked and perhaps watched for the past few months to see their capabilities, what happens in the instance where it is not the case that they do not fulfil the criteria? What happens then?

1895 **Hon. G Arias-Vasquez:** Madam Speaker, if there is an interview process and the individuals do not fulfil the necessary criteria, the applicants will then speak to whether the other applicants will speak to whether that criteria is fulfilled. The vacancy will be opened in the ordinary way. But there have been two nurses that have been acting into that post for the past six months. Again, the position will be opened, applicants will be encouraged, and this is exactly what happens in every single nursing healthcare organisation. There are processes and procedures. The vacancy will be opened, applicants will be received, preferably from within the GHA, and it has to be said

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I would be startled if they were applied from the GEA. But the applicants will apply from the GHA and then the interview process will be carried out in the normal way.

Hon. D J Bossino: Is not the sum total of what the Minister has told this House in effect that it is going to be a competition between those two who are acting? That is what she is saying. Does she not agree with that? And to suggest that when my hon. Friend says that there may be an applicant from outside the GHA that applicant will possibly be a very qualified nurse and may be working in the NHS and may also be Gibraltarian but in effect what she is saying is that it is going to be really a competition between these two because that is what the Director of the GHA is dealing with. I think the way that my hon. Friend Mrs Ladislaus sets it out is actually very accurate. They have an unfair advantage, and I do not know who they are and they may be perfectly capable one of those two, but they have an unfair advantage over somebody else. We may not get the best candidate and in effect they have been subjected to a quasi-process already.

Hon. G Arias-Vasquez: We are not going to get into this House into processes for recruitment of the Director of Nursing. There will be a vacancy advertised in the normal way. There will be interviews held in the normal way. There is nothing nefarious. There have been two individuals that have been acting into the role. It is likely that those two individuals will apply for the job and it is likely that there may be other applicants. We will see when we open the recruitment process. It is part of the recruitment process of a Director of Nursing in the GHA. There is a pool of nurses within the GHA, and one would expect that the Director General looks at that pool of nursing in order to identify the next Director of Nursing. There is absolutely nothing else there.

Madam Speaker: Next question.

[Q334-336/2026](#)
[Gibraltar Ambulance Service –](#)
[Tender process for the works & timeline of completion](#)

Clerk: Question 334, the Hon. J Ladislaus.

Hon. J Ladislaus: Why hasn't the Government commenced the tender process for the works to be undertaken at the GHA to install the porta-cabin structures to house the Gibraltar Ambulance Service?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Questions 335 and 336.

Clerk: Question 335, the Hon. J Ladislaus.

Hon. J Ladislaus: Is the new "purpose-built ambulance station" which was announced by the Minister for Health in her 2026 Budget speech one in the same as the porta-cabin structure referred to by the Minister for Health in this House on 25 February 2026?

Clerk: Question 336, the Hon. J Ladislaus.

Hon. J Ladislaus: What is the latest envisaged timeframe for completion of the ambulance station and why wasn't a Town Planning application filed before 21 August 2026 when the

1950 Minister for Health told Parliament in February 2026 that the estimated timeline for completion was 6 months, and then announced during her Budget speech that it would be the end of September 2026?

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

1955 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, in answer to Question 334, the GHA has been granted a technical exemption dispensation by Central Procurement to proceed with the installation of the porter-cabin structures to house the GHA service without the need to open a tender process.

1960 In answer to Question 335, yes, ma'am. And in answer to Question 336, the latest envisaged completion date for the ambulance station remains at the end of September 2026. Full completion and commissioning is expected during the following month. It is important to note that the structure is being fabricated in Spain and any delays associated with the manufacturing process are outside the control of the Gibraltar Health Authority.

1965 A town planning application was not submitted earlier because the proposed portacabins were considered temporary structures. Following initial discussions with the relevant planning authorities, the GHA was advised at the time that a planning application was not required. Nevertheless, in order to ensure that all appropriate documentation was in place and to provide additional assurance, the GHA made further enquiries where the advice was then given to proceed with a planning application on the basis of it being a two-storey structure.

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Hon. J Ladislaus: Starting with Question 334, we have heard that there is an exemption been granted out of the tender process. Why has that exemption been granted?

1975 **Hon. G Arias-Vasquez:** Because the Procurement Department and the procurement team within the GHA agreed that an exemption could be granted.

Hon. J Ladislaus: Madam Speaker, with respect, where is the public interest in transparency in that? Can the Hon. Minister confirm that the GHA is also subject to all the policies in respect of tender processes that every other department is?

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Hon. G Arias-Vasquez: Madam Speaker, once again we come to categorisation of questions and character assassinations in the form of questions of this nature.

1985 Madam Speaker, all of these decisions are taken in line with the Procurement Department. All of these questions advice is sought at every point from procurement, and the head of procurement is involved in all these decisions. So yes, the GHA underwent all of the relevant procurement procedures. At this point, the Procurement Department advised that they could indeed get this exemption for the procurement of the ambulance station and once again, Madam Speaker, there is nothing nefarious about the process despite what hon. Members opposite wish to state.

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Hon. J Ladislaus: Madam Speaker, there is nothing nefarious being alleged. What I am asking which the Hon. Minister has not answered are the reasons for that exemption. Surely the Hon. Minister would have those reasons in this House.

1995 **Hon. G Arias-Vasquez:** Madam Speaker, procurement of the GHA speaks to the Procurement Department. The Procurement Department is another department which is under my ministerial portfolio. They decide whether or not the procedure should go through a tender process or whether there is an exemption that can be applied. In this instance, the Department of Procurement advised that there is an exemption that can be applied.

2000 Madam Speaker, the rules of procurement are extremely complicated. We therefore rely on the advice of the Procurement Department to tell us where an exemption can be relied on. If the Department of Procurement tells us that we can rely on an exemption, the exemption is relied on, and the porta-cabins are ordered.

2005 **Hon. J Ladislaus:** Madam Speaker, again we come back to the same thing. I understand that the process has been followed and they have decided that an exemption should be given, but perhaps it is the case that the Hon. Minister does not have the information here and she can say that but on what basis what were the reasons given, what criteria was applied that would lead the decision to be that it does not need to undergo a tender process? Because we know that tender processes have, for example, a minimum spend which means that they have to go to tender and under that they are exempt. So, what is the case here? What criteria has been applied to determine that actually it does not need to go to tender process?

2015 **Hon. G Arias-Vasquez:** Madam Speaker, once again we have professionals employed that advise us on these issues. If I were involved in the procurement processes of the GHA, I would not have time to run the other portfolios.

2020 Madam Speaker, the Director General of the GHA runs the procedure, and he has been informed that there is an exemption which can be applied. If the hon. Lady wishes to ask me the specifics of exactly why there has been a tender process relied on, I am very happy to ask the Director General to go into the correspondence and explain to me exactly why that exemption has been relied on. However, Madam Speaker, I do not have that information to hand because it was not necessarily the question that was being asked. I gave the information on the exemption that was being relied on, and I am very happy if the hon. Lady poses a question in a further session of this Parliament to go into the exact reasons of why the GHA relied on a specific exemption to a tender. I do not have that information to hand but again there is no issue here related to transparency. If the hon. Lady or indeed the Hon. Mr Clinton wishes me to provide them with that information, I am very happy to do so, as long as a specific question is asked and notice is given of the question.

2030 **Madam Speaker:** Not a comment, only a question.

2035 **Hon. D J Bossino:** Yes, well, yes but the hon. Lady then comments about our intent. There is nothing nefarious in our intent. If she wants to wear that badge that is a matter for her. But this is a very specific question which was asked in the Order Paper and the hon. Lady keeps on doing it, saying that we need to ask a specific question and anticipate what it is that she is going to be responding to the questions on the Order Paper. It is an obvious supplementary which Mrs. Ladislaus has raised as to what criteria was implemented. But can I ask her this question? She refers to the GHA having a procurement section. Can she confirm, yes or no, that there is a designated, fully trained, fully qualified department in the GHA which is capable of coming to decisions in respect of procurement outside of the rest of the Civil Service and the Gibraltar Government? Is that the position? Because as far as we understand there is not such a thing.

2040 **Hon. G Arias-Vasquez:** Madam Speaker, I would appreciate that the hon. Member does not tell me exactly how I have to answer the questions.

2045 Madam Speaker, there is a finance and procurement team within the GHA. The question that I am being asked is 'why has the Government not commenced a tender process for the works to be undertaken at the GHA to install portacabin structures to house the ambulance service'. I have answered that question. If the hon. Lady wanted me to go into the specifics of how the exemption works, again I am very happy to do so but I do not have the information with me to hand and I do not expect that I am expected to know exactly why that exemption was being granted. If the hon. Lady wishes me to give specifics on that question, I am very happy to do so but that question could

have included an extra limb. Madam Speaker, I am not telling them how to answer their questions but clearly, I stand here week after week after week with the same comment, that question could have just included a limb saying: and if any such exemptions were granted, could the hon. Lady tell me the basis on which such an exemption was granted? Madam Speaker, I am not here to tell the Opposition how to do their jobs but for goodness' sake, ask me the proper questions and I will give the proper answers. At no point in time, Madam Speaker, have I refused to give an answer. At no point in time have I ever not given the hon. Lady the information that she seeks. However, Madam Speaker, if they do not ask me the proper questions I cannot give the proper answers because I do not have notice of the questions, Madam Speaker.

Madam Speaker: (Interjections) We are not having a discussion on this. Alright, on 335?

Chief Minister (Hon. F R Picardo): Madam Speaker, on a point of information which is very important for the Parliament, page 184 of the estimates that hon. Members examined during the course of the Budget, or allegedly examined, sets out... did you? Well, you must have forgotten what you examined then, because Madam Speaker, page 184 sets out the Office of the Head of Finance and Procurement at the GHA and the Deputy Head of Finance and Procurement at the GHA. So, I would put it to you, Madam Speaker, that the question the hon. Gentleman asked was a question that actually there was public information on, that it was clear publicly that there is a procurement department in the GHA, which is what he asked. And that if they did examine the estimates book, they would have seen that.

Hon. D J Bossino: I do not accept what the Hon. Chief Minister said. I asked a specific question about a department, a designated department properly trained and qualified to reach decisions in respect of procurement.

But I would wish to raise, I think, an important Point of Order, Madam Speaker, if I may. It relates because we have seen it throughout the hon. Lady has only been here for two and a half years. I have been here for much longer and many of us here on this side of the House have been here for much longer and we have never been treated to this type of response from a Minister. But she chooses to say that we need to in effect anticipate what it is that she is going to be responding to.

The question talked about the tender process, the answer came back no tender process because it was decided that it did not qualify under whatever system it is she referred to an acronym which I am incapable of repeating at this stage so we need to anticipate that the answer to the question is going to be no, to then ask: well, what is the criteria?

So, we would like some guidance. Because I had the same thing in relation to Ms. Orfila when I asked a question, I think about the cost of the refurbishment of the Bishop Canilla House the rooftop and I need to then anticipate, or whether it had been done, that was it, whether the roof had been replaced, I had to anticipate for her to say that no, it had not been replaced and that she had actually commissioned some material and all the rest of it. I had to anticipate that answer for me to then say what the cost of those materials were.

Madam Speaker: No, because that is not a proper Point of Order and it is not for the Chair to direct Hon. Ministers to answer questions in any specific way. That is not within my power. So, we will move on to Question 335. Any supplementaries on 335?

Hon. J Ladislaus: Madam Speaker, in terms of 335, the answer came that yes, the purpose-built ambulance station which was announced by the Minister in her Budget speech was one and the same as the portacabin structure which was referred to by the Minister for Health in this House on the 25th February.

However, I note, Madam Speaker, that the Town Planning application describes it as proposed new temporary portacabin for the Administration Department of the GHA Ambulance Service and yet the Hon. Minister's Budget speech refers to this as a purpose-built ambulance station.

2105 Is the Hon. Minister really calling a portacabin temporary structure a purpose-built ambulance station?

Hon. G Arias-Vasquez: Madam Speaker, the hon. Members opposite categorised the Rooke as a container building. The hon. Members opposite have now been to see what the Rooke facility is, and the Rooke facility is indeed a purpose-built facility which is built in a modular style. There is nothing wrong with building buildings in a modular style. There are many structures which are built in such a way. There are many structures worldwide which are built in such a way.

2110 So, Madam Speaker, are the portacabins being built to spec? Yes. Are they purpose built? Yes. Are they modular? Yes. Are they portacabins? Yes. Is all of the above, correct? Yes.

2115 **Hon. J Ladislaus:** Madam Speaker, we just heard the Hon. Minister in an answer to a previous question say that planning permission was not needed for this structure, which is why they applied so late in the day for it, because it is a temporary structure. Therefore, is the Hon. Minister now saying that she is moving away from that, and she is now saying that in fact it is a permanent structure? What is she saying? Can we have some clarification?

Hon. G Arias-Vasquez: Madam Speaker, there are some buildings which require foundations. There are some buildings which do not require foundations. A temporary structure in a portacabin often does not require foundations. The portacabin which is purpose built for the ambulance village does not require foundations and therefore is temporary. Madam Speaker, that is what I am saying.

2125 **Hon. J Ladislaus:** So, Madam Speaker, is this now going to be the place where our ambulance service will be housed the place which is envisaged the ambulance service will be housed permanently, i.e. there will not be another permanent solution?

Hon. G Arias-Vasquez: Madam Speaker, I do not like often to hark on about what used to happen in 2011 but I think it is remarkable from an Opposition which actually had the ambulance service in the corridors of A&E to cast any aspersions on where we choose to house the ambulance service. The ambulance village in 2011 was in a shocking state because they did not have a facility available in the hospital which was not purpose built which was actually an office block where the hospital was shoehorned into. So now to come and say: is this a facility? Yes, it is a purpose-built facility for the ambulance service, which is in a far, far better state with a larger complement than anything that was in place when they were in Government themselves, Madam Speaker.

2140 **Madam Speaker:** Anything on 336?

Hon. J Ladislaus: Madam Speaker, in respect of 336, the Hon. Minister and again I stand to be corrected on this because I did not quite catch, I think somebody coughed at the time. The Hon. 2145 the Minister said that the ambulance station would still be finished. The completion date is still September 2026. Am I correct in what I heard?

Hon. G Arias-Vasquez: Madam Speaker, the portacabins are due to be completed by the end of September 2026. I do not have a confirmed date, but I do know that the ambulance station will be built very quickly thereafter. The reason that we are experiencing these delays is simply because we are relying on a third party to build the portacabins, Madam Speaker. The portacabins are now built and they will be in Gibraltar and around the estate.

2155 **Hon. J Ladislaus:** Madam Speaker, I note from, and I am going to ask for Madam Speaker's indulgence in just reading out an excerpt from the Hon. Minister's Budget speech which is relevant to this. It is a short extract.

Madam Speaker, I am advised that the revised completion date for the new ambulance station is now the end of September 2026. Unfortunately, there is a manufacturing shutdown during the last week of July and throughout August and those delays are entirely outside the control of the GHA because I am advised the delivery of elements of this project depends on third parties. I think it is important to be candid with the House about that because whilst I would clearly have preferred an earlier completion date, I would rather give the House a realistic timetable than an unrealistic one.

2160 So, Madam Speaker, why did we have the unrealistic timetable then given to this House of September for completion of this when clearly there were going to be issues with this being completed within July and August which supposedly they should have known when they ordered these parts?

2165 **Hon. G Arias-Vasquez:** Madam Speaker, we are dealing with construction. It was a proposed completion date. Madam Speaker, again I reiterate the point that I made earlier. I am not going to take advice from any Opposition Member on the state of the ambulance service when the ambulance service was housed in the corridors of the hospital. We are working to have; it is my intention as much as the hon. Lady opposite to complete the ambulance station as quickly as possible. In fact, I see it from my Office, and I see it every day. So actually, I want to have this ambulance service completed as quickly as the hon. Lady clearly wants it to be.

2170 But Madam Speaker, given their history with the ambulance service, I am afraid that timeline completions are not quite where I am going to take lessons from them. We house our ambulance service in a station which is fit for purpose, which is purpose built, and which gives them the respect and dignity that they deserve. Madam Speaker, perhaps the questions that the hon. Lady should be asking is why they did not do it when they were in Government.

2175 **Hon. J Ladislaus:** Madam Speaker, neither the hon. Lady nor I were in this House or anywhere near it on the dates that she is speaking of. I have a job to hold the hon. Lady to account as to what they are doing now with this Administration that she is a part of, is doing now and has been doing for 15 years which it has been in Government. So going back serves us no purpose.

2180 But I ask again: should not, or would not, they have known before ordering those parts? Would they not have known earlier than July, earlier than this House sat for the budget session, that this was not going to be realistic? Why then, during the Hon. Minister's Budget speech did she come to this House again and say that completion was still envisaged by the end of September when the planning application still had not been put in?

2185 **Hon. G Arias-Vasquez:** Madam Speaker, it is entirely relevant that I refer to their practices when they were in Government. It is entirely relevant to show the distinction and to actually show that a couple of months' slippage on an ambulance station is actually not particularly bad, Madam Speaker. I would wish that the ambulance station were already completed. I believe that everyone in this House wishes that the ambulance station was already completed. There are slippages in
2190 time. It is a construction project, Madam Speaker. Unfortunately, that happens. I would wish the ambulance station to be built as quickly as possible but to waste the inordinate amount of time that we are wasting on the slippage of a few months on the ambulance station when they knew the practices that they engaged in with the ambulance station when they were in power is just baffling, and which is why I will continue to reiterate that we are talking of a slippage of a few
2195 months in a project that is purpose built for the ambulance, where we have consulted with all of the ambulance members Madam Speaker. We are not talking about housing the ambulance service back in the corridors of the GHA. We are talking about a purpose-built facility. So, I do not

like the delays any more than the hon. Lady opposite and I would not wish to see them happening either. But unfortunately, they are matters which are beyond our control, Madam Speaker.

2200

Madam Speaker: Next question.

Q337/2026

**GHA staff accompanying critical patients in ambulances –
Travelling to tertiary healthcare providers in Spain**

2205

Clerk: Question 337, the Hon. J Ladislaus.

Hon. J Ladislaus: In the past 6 months have there been any instances of GHA staff accompanying critical patients in ambulances travelling to tertiary healthcare providers in Spain being denied entry into Spain? If so, please provide the reason(s) for the denial(s).

2210

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, no GHA staff or ambulances have been denied entry into Spain before or after the Treaty in the last 6 months.

2215

Madam Speaker: Next question.

Clerk: Question 338, the Hon. J Ladislaus.

2220

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Sorry, Madam Speaker. I am conscious that we have been in session since 9.30. Would this be a convenient moment to take a quick break for 15 minutes and resume at 12.20?

Madam Speaker: Alright, yes. We will take a break and resume at 12.20 p.m.

2225

The House recessed at 12.05 p.m. and resumed its sitting at 12.22 p.m.

Q338/2026

**Beds will be freed up at St Bernard's Hospital –
Long-stay patients have been moved into the Rooke site facility**

Clerk: Question 338, the Hon. J Ladislaus.

Hon. J Ladislaus: Sorry, Madam Speaker. Before I continue, I have been given the schedule that was missing before. Am I able to...

2230

Madam Speaker: That was for 339 I think. No? sorry 329.

SCHEDULE WEB LINK

2235

Hon. J Ladislaus: How many beds will be freed up at St Bernard's Hospital once long-stay patients have been moved into the Rooke site facility?

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

2240

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, today there will be 85 beds freed up at St Bernard's Hospital.

2245

Hon. J Ladislaus: Madam Speaker, I note that and here I, perhaps a small preamble, I note that a press release was issued on the 21st of September 2026 and it dealt with live questions before this House, which are these questions in fact that are coming now. In that press release it said

Around 70 elderly long-stay patients currently in St Bernard's Hospital will be removed to the Rooke facility, leaving empty beds, and the GHA DG Paul Bossio has planned to repatriate services to Gibraltar in this space.

2250

Madam Speaker, which is it? Is it 85? Is it 70? Why is there a discrepancy between both those numbers and why perhaps we start with why was that press release issued before we arrived at this House?

2255

Hon. G Arias-Vasquez: Madam Speaker, the article the hon. Lady refers to is an interview with the Director General of the Hospital. I am not aware of when that interview was carried out but that interview may well have been carried out before the hon. Lady's questions were received. We do not control the Chronicle's timings to that extent, so it was in no way meant to offend the House or to breach the procedures. It was simply an interview with the Chronicle which was recorded earlier with the Gibraltar Chronicle and the DG gave that prior to the questions being received by this House.

2260

In terms of the (Interjections) sorry as the Hon. Chief Minister has mentioned, the Director General is not bound. It was not comments coming from me in any way, shape or form and I was not there present to fetter the Director General's interview in any way, shape or form.

2265

Madam Speaker as to the difference between 70 and 85, it is a moving number. It depends on the number of patients there are in the GHA at any given time. It depends on the number of patients that have been spoken to at the GHA at any given time. Discrepancy again is not I appreciate the hon. Lady's attempts to catch me out. It is a moving number all of the time. It is a question of how many beds are likely to move to the Rooke on that day.

2270

So again, Madam Speaker, if I direct the hon. Lady to the answer of the question, it says that today there will be 85 beds freed up. That may not be the number tomorrow and indeed it may not have been the number three weeks ago.

2275

Hon. J Ladislaus: Madam Speaker, can the hon. the Minister comment perhaps as to what is envisaged will be done with those 85 freed-up beds? I note that the press release, or the interview that was given by the Director General, did not mention any acute beds. So, is it the case that no acute beds will be added?

2280

Hon. G Arias-Vasquez: Madam Speaker, as the Director General confirmed on Viewpoint last week, there are plans in place for the space that will be made available by those empty beds and they are unlikely to include the increase of acute beds because, as I have said in this House on many an occasion, it is not felt that there is a need to be an increase in the number of acute beds in the wards.

2285

Hon. J Ladislaus: Madam Speaker, I have here a list that was outlined and again I stand to be corrected but it is stated: advanced imaging suite, more CT, more MRI, women's centre, pacemaker services, redevelopment of A&E, same-day care at A&E, the outpatient floor and maternity. Madam Speaker, where do these acute beds fit within that?

Hon. G Arias-Vasquez: Madam Speaker, I have said that there will not be an increase in acute beds in the hospital. I have not said that acute beds will increase.

Hon. J Ladislaus: Madam Speaker, does the hon. Minister then believe, or has she been advised, that these expansions will deal with the clear shortages that there have been in beds over the past couple of years at St Bernard's Hospital, which I have asked questions on a number of occasions?

Hon. G Arias-Vasquez: Madam Speaker, we do not agree with the categorisation of that question, and I have gone into numerous occasions as to why we do not agree with the categorisation of that question.

85 patients will be moving. There will be some wards that will be emptied as a result. However, not all wards will be emptied as a result. There will be more acute beds available but there will not need to be an increase of any beds available. Again, Madam Speaker, I have explained this on numerous occasions. The vast majority of surgical cases at the GHA now go through day surgery. So, whilst there has been a significant increase in surgical cases in the GHA, there is no requirement for that increase to be accompanied by the beds available in the hospital.

As I said at the outset of this question, Madam Speaker, there will be some wards which will be emptied as a result of the move but there will be some wards where there will simply be more beds available and therefore there is no, the GHA tells me that there is no need for any more acute beds to be available in the hospital and that there will be space available in order to increase the facilities that we have.

Madam Speaker: Yes, the Hon. Leader of the Opposition.

Hon. Dr K Azopardi: Madam Speaker is too kind. Can I ask when the beds are freed and the hon. Lady is having a debate with my colleague on the acute beds, can I just ask a more basic question, which is: will there be a reduction in the overall number of beds after the freeing up of these beds and once the GHA's plans come to fruition, whatever they are? Will there be a reduction in overall numbers of beds and if so, what would be the overall number of beds that we are talking about?

Hon. G Arias-Vasquez: Madam Speaker, there is a ward contained within the hospital at the moment which is Cochrane Ward which is run by ERS and is a part of ERS which will be entirely vacated to the Rooke, so those beds do not form part of the number of GHA beds which are available, but the ward will be entirely empty. As to the future plans of the GHA, aside from that ward, there will be some wards when the patients move out that will be significantly freer in their capacity. The plans are ongoing as to exactly what is happening with the remainder of the wards, so there is an acute surgical ward, there is an acute medical ward and obviously those continue in operation, there is a rehabilitation ward that continues in operation. The question is, there is, I mean it is trite to say, but maternity etc and Rainbow obviously continue in operation. As to whether there is free capacity thereafter, that remains a discussion on which the clinicians and the team, there is a team that is now set up to advise the Government on life post the move to Rooke on many of the patients and those are the discussions which are indeed ongoing right now at the hospital.

Hon. Dr K Azopardi: I mean it was not really talking about free capacity going forward. I mean really I was asking a more basic question, which is at the moment and I understood her answer to perhaps be yes possibly, at the moment there is X number of beds in hospital, some of which as the hon. Lady says are designated specifically for ERS. I understand that the answer she has given, but there is X number of beds in the hospital. After all this is over and Rooke is up and running, will there be less beds available generally? That is really my question.

2340 **Hon. G Arias-Vasquez:** Madam Speaker, we will always look to have enough space available, so the GHA has a very good idea on what the requirements of running those wards are on a daily basis. There is no point in having a ward available that will be entirely empty. So, the answer, as the hon. Gentleman has alluded to, is possibly yes. So, it is a question of looking at the wards once the people move out, looking at their capacity, but there are some wards which we definitively
2345 know will not move. If you then go through the wards, there is one ward which may or may not be moved. The bed capacity may therefore reduce for the number of beds in that ward, but that is up to the clinical advice that the GHA gives me as to what capacity is needed once the 85 patients move out.

2350 **Madam Speaker:** Next question.

[Q339/2026](#)
[Cochrane Ward –](#)
[Long-stay patients moved to the Rooke Building](#)

2355 **Clerk:** Question 339, the Hon. J Ladislaus.

Hon. J Ladislaus: What are the plans for Cochrane Ward once long-stay patients have all been moved to the Rooke Building and will additional staff need to be recruited in order to bring those plans to fruition?

2360

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

Hon. G Arias-Vasquez: Madam Speaker, the future use of Cochrane Ward will be considered as part of the wider GHA service and estate planning process following the transfer of long stay patients to the Rooke building. Any future use of the ward will be determined in line with service requirements, patients' needs and the wider strategic priorities of the GHA. At this stage no final decision has been made regarding the future configuration or the use of Cochrane Ward. Any staffing implications arising from future service developments will be assessed as part of the appropriate planning and workforce processes.

2370

Hon. J Ladislaus: Madam Speaker, does the Hon. Minister perhaps have a rough timeline? I appreciate I am not going to hold you to these dates, but does she have a rough timeline as to when perhaps those decisions will be made?

2375 **Hon. G Arias-Vasquez:** Madam Speaker, from previous questions I have held to timelines constantly and any date that I utter in Parliament I am then reminded of consistently. The Rooke transfer is likely to happen by the end of this year. We have said to the residents that it is likely to be in place by Christmas, and the discussions on what St Bernard's Hospital looks like after the Rooke are ongoing discussions, so I would not be able to set a date, Madam Speaker.

2380

Madam Speaker: Next question.

Q340/2026

Members of staff will be moved from St Bernard's Hospital –
Rooke site complement

2385 **Clerk:** Question 340, the Hon. J Ladislaus.

Hon. J Ladislaus: How many members of staff will be moved from St Bernard's Hospital into the Rooke Building, broken down by discipline and will they remain there on a permanent basis to form part of the Rooke site complement, or be shifted around as necessary?

2390

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

2395 **Hon. G Arias-Vasquez:** Madam Speaker, there will be 13 full-time equivalent staff members transferred from St Bernard's Hospital to the Rooke, comprising of Registered Nurses 6 full time employed, Enrolled Nurses 3 full time employed, and Nursing Assistants 4 full time employed. The 13 full time employed staff will remain as part of the Rooke staffing complement for the foreseeable future. This number does not include the entire nursing complement from Cochrane Ward, which is presently designated as ERS, which will also transfer to the Rooke.

2400 **Hon. J Ladislaus:** Madam Speaker, will those nursing posts that have now been taken from St Bernard's Hospital, so 13 be opened again and will more recruitment happen to cover those posts that have now been moved out?

2405 **Hon. G Arias-Vasquez:** Madam Speaker, once 85 patients are moved out of the hospital there will be an acuity review, but as common sense dictates, if there are 85 patients less, the complement will need to change to reflect the move of those patients. So, at the moment there are no plans to increase the complement by 13, but this is an ongoing exercise where the GHA consistently informs us of what their requirements are.

2410 **Hon. J Ladislaus:** Madam Speaker, we have heard about expansion of other services and therefore, even though 85 patients are leaving the hospital, logic also dictates that those services will need the necessary infrastructure in place. Does the Hon. Minister agree with that?

2415 **Hon. G Arias-Vasquez:** Yes, Madam Speaker, I do agree with that, but they might not necessarily require nurses. So as the hon. Lady has referred to, we are looking at imaging services in the GHA they require different members of staff. So yes, whilst I agree with the hon. Lady and what the hon. Member is saying in principle, the reality is that each service will need to look at what that service requires and possibly repatriation of those services into the GHA might afford savings on current expenditure which we can then look at the increase of the complement in that way. However, we need to stop and look at what life post the movement of the Rooke patients looks like, and then we will be advised by the GHA what further complement is required.

2420 **Madam Speaker:** Next question. Yes, the hon. the Leader of the Opposition.

2425 **Hon. Dr K Azopardi:** May I just ask the hon. Lady, she mentioned that she gave a figure of the nurses that are going out and the nursing assistants, and then she also said to get all the Cochrane staff, because they are designated by ERS, does she have a figure of what, and a breakdown of the Cochrane staff so that we understand it?

2430 **Hon. G Arias-Vasquez:** Madam Speaker, unfortunately I do not have the figure of how many of those staff nurses and nursing assistants are in the Cochrane Ward, but they are contained within the ERS complement. So, the ERS complement is made up of all the staff in Mount Alvernia plus the staff in Cochrane Ward.

Madam Speaker: Next question.

2435

[Q341/2026](#)
[Rooke Elderly Care Home building –](#)
[Fire safety certificate](#)

Clerk: Question 341, the Hon. J Ladislaus.

2440 **Hon. J Ladislaus:** Did the Rooke Elderly Care Home building obtain the fire safety certificate on the first inspection or were there any rectification works recommended? If so, how long did the rectification process take, please detail the work which it entailed and what the total cost of carrying those works out was?

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

2445

2450 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the Rooke facility was granted a Certificate of Fitness by the Department of Town Planning and Building Control on the 1st September 2025. The Gibraltar Health Authority has been advised that at the time the Certificate of Fitness was issued, all fire safety systems had been inspected, tested and certified as compliant with the applicable requirements. The information available to the GHA does not indicate that any fire safety rectification works were required and therefore does not hold information regarding any such rectification works. The maintenance, inspection and certification of fire safety systems now form part of the building's ongoing maintenance regime, which includes routine periodic inspections and the renewal of certificates as required. Up to date
2455 certificates will be in place before the facility is formally taken over by the GHA.

2460 **Hon. J Ladislaus:** So, for the avoidance of doubt, Madam Speaker, the Minister and the GHA as well are not aware of any instances where, during the course of the construction of the Rooke, fire safety concerns were outlined and the fire safety certificate could not be given as a result and then rectification works were recommended? That never happened.

2465 **Hon. G Arias-Vasquez:** Madam Speaker, I am not commenting on whether it happened or it did not happen. I am saying that to my knowledge I am not aware of it having happened. However, at the moment what is relevant is that there is a Certificate of Fitness which grants the building which means that the building complies with all fire safety regulations and all fire safety standards. I do not necessarily have any further information of it, as neither does the GHA.

Madam Speaker: Next question.

2470

[Q342/2026](#)
[Rooke Elderly Care Home building –](#)
[Fire safety lifts](#)

Clerk: Question 342, the Hon. J Ladislaus.

Hon. J Ladislaus: How many fire safety lifts does the Rooke Elderly Care Home building have?

2475

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the Rooke Elderly Care Home has one designated firefighting lift. Further, the Gibraltar Fire and Rescue Service has approved the building's other two lifts for use during a fire incident in accordance with the approved fire strategy. Under these arrangements, one of the additional lifts can be utilised by the Fire and Rescue Service for the transportation of equipment, whilst the other would be designated for the evacuation and movement of residents and staff. These arrangements are set out within the building's fire strategy plans.

Hon. J Ladislaus: Would the Hon. Minister agree to sharing the fire safety, or fire strategy plans perhaps not with the public, but with the Opposition?

Hon. G Arias-Vasquez: Madam Speaker, there is no issue with sharing it, the hon. Lady writes to me I will happily seek that information.

[Q303,306,316,318 & 329/2026](#)
[Supplementaries](#)

Madam Speaker: Alright, we will take supplementaries now on Question 302 from the Hon. Mrs Sanchez, sorry, 303. You have?
Yes, 303.

Hon. A Sanchez: Madam Speaker, I am going through the schedule provided in answer to Question 303 and I am at March 2020. In respect of the email detailed here that was sent from the GFRS to GJBS, it starts by stating that all the doors were required to be FD30S and suggesting there were issues with the fire doors, but I do not see in any of the other comments thereafter that an actual report was ever sent through that certified or issued a test stating that all the fire doors had been certified as having passed testing, or anything that states that the GFRS had issued a fire safety certificate certainly not in 2020. Could the Hon. Minister clarify whether in 2020 a fire certificate or fire safety certificate was issued?

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I do not have the fire safety certificate from 2020. I have the email correspondence confirming that GJBS had confirmed it to GFRS and there is nothing further, so I assume that GFRS were happy with that. What subsequently happened is that the standards changed in the interim period and then the subsequent correspondence occurred. So, I have a report from 2026 but I do not have anything further from the GFRS confirming in 2020 that indeed they were satisfied, but there is no further correspondence assuming that GJBS confirmed to them that the doors had been changed and therefore they were satisfied by that.

Hon. A Sanchez: Madam Speaker, the issue is, and all I am seeking is clarification, I am not making any form of characterisation, the issue is that from 2020 then we jump to 2024 where then we see that the previous facilities manager undertook the arrangements for the fire strategy plan, and then we jump to a report that states that the fire doors have failed the testing. But there seems to be a gap of information in between because we do not have the information whether a fire safety certificate was ever received between those dates. So, I would be very grateful if the hon. Minister could come back with the information as to whether an actual report from the GFRS was ever received certifying that those doors, the fire doors passed safety certificates.

2525 **Hon. G Arias-Vasquez:** Madam Speaker, we have a comment of an email from GFRS to GJBS stating that the doors required to be FD30S compliant, and subsequently we have an email from GJBS to GFRS stating that all the fire door works were complete. I would assume that what that means is that all of the doors have indeed been changed and now meet the FD30S requirements that is stated in that report. I have no issue with trying to find a certificate and I have no issue with sharing it if it is indeed found, but the email would seem to suggest that given that all fire door works were complete and all the doors have been changed, therefore the requirements were met.

Hon. J Ladislaus: Madam Speaker, I note moving on to page 2 of the 16th July 2026, it says:

The Director of Elderly Residential Services advised that the replacement of the fire doors would not proceed, bearing in mind that these fire doors, 48 of them, had failed the GFRS's inspections, given the high probability of residents being relocated to the Rooke location.

2535

Madam Speaker, the question here I think to be asked is: what is the level of risk that has been concluded by the GFRS to residents in these fire doors not being replaced?

2540 **Hon. G Arias-Vasquez:** Madam Speaker, the email correspondence shows, and the list that we have given shows, that the standard of the fire doors which were FD30S in 2020 then subsequently changed. So, we are talking about a change of regulation as to what those fire doors should be. What has actually happened is that they have put in place a list of mitigation measures in order to make sure that if there were a risk of fire, the mitigation measures are all in place in order to satisfy the Fire Brigade. We then have an email confirming that this is in fact a proactive approach and that the GFRS are satisfied with the mitigation measures that have been carried out, and in fact they thank the ERS for their proactive approach. So, I am quite satisfied that despite the change in regulation what we are talking about, Madam Speaker, and it is very necessary to be very, very clear what this is about because I do not want this to be misquoted, we are not talking about a system of fire protection which is now broken. We are talking about the same system which in 2020 were recommended, that the fire doors were changed. All the fire doors were changed in 2020 to be fully compliant in 2020, and there has subsequently been a change in regulation. So it is not that something has broken, it is not that there is something which is faulty; it is that there has been a change in the underlying regulations and the GFRS have been in constant communication with ERS about all of the mitigation measures which are necessary in order to bridge that gap between the current regulation, which has just changed, and in fact we are doing that and not changing the fire doors again because in the next few months the residents will be moved in their entirety. So, there is an email confirming that GFRS are satisfied with the mitigation measures and that in fact they are satisfied with the procedures being carried out.

2560 **Hon. J Ladislaus:** Madam Speaker, is it the case that the GFRS are satisfied, or is it the case that they have had to be satisfied with these mitigation measures? Because it is very two different things. Are they satisfied that there is no risk if these mitigation measures are put in place, or is the preference that the doors are actually replaced and the Government is saying no, we are not replacing them? Which is it? Are they satisfied that there is no risk with these measures in place that is the key here or is it the case that actually they prefer the doors being replaced and there is risk, but they have no choice and so mitigation is better than nothing?

2570 **Hon. G Arias-Vasquez:** Madam Speaker, the Opposition and the hon. Members opposite dislike me categorising the tone of their questions as catastrophising, as doom mongering, but yet they insist on taking the same tone over and over and over again. It is a pure question of would we want to put any residents' life at risk, and of course we would not wish to put anyone's life at risk. The mitigation measures are as a result of a change of regulations, not in a change of the deemed safety of the fire doors at Mount Alvernia. The ERS staff and the executive of the GHA have

engaged consistently with the GFRS to make sure that the mitigation measures are such that the GFRS are satisfied that these mitigation measures are sufficient, are adequate, are okay for the residents. So, I would resist any mis-categorisation or any catastrophising of the situation because what it is, and what has happened and it is very clear, and the hon. Lady will understand despite trying to play mischief is that there has been a change in the underlying regulations. The GFRS have engaged with the ERS, and they are perfectly happy with the mitigation measures that the ERS are putting in place.

Madam Speaker: Anything on 306?

Hon. A Sanchez: Madam Speaker, apologies. Madam Speaker just going through my notes here I understand that the Hon. Minister may have made this clear already, but just to confirm: the complement that is outlined here includes the entire staffing complement of Mount Alvernia and John Cochrane Ward is that correct?

Hon. G Arias-Vasquez: Sorry, Madam Speaker. I missed what question this was in relation to.

Madam Speaker: This is supplementary to 306, and just for the record, there was not an answer on 306 it was the handing over schedule, so the supplementary is on the schedule.

Hon. G Arias-Vasquez: Madam Speaker, yes, the complement that is outlined, the 317 full-time equivalents that are outlined are the staff of Mount Alvernia, the staff of Cochrane Ward, and the additional 13 staff that I referred to a second ago.

Hon. A Sanchez: Madam Speaker, I note here Allied Health Professionals such as Physiotherapists, Occupational therapists, amongst others. Would the Hon. Minister be able to clarify whether these are solely for the Rooke facility or whether they will be shared amongst other ERS facilities?

Hon. G Arias-Vasquez: Madam Speaker, it is slightly remarkable that this question arises now. These Medical and Allied Health Professionals are not a new development that has been incurred as a result of the Rooke facility. These speech and language therapists, occupational therapists, physiotherapists etc were part of the complement of ERS previously, so they are moving with the staff to the new Rooke facility, and what in fact happens is that they are shared amongst all other Elderly Residential Services.

Hon. A Sanchez: Well, Madam Speaker, I do not find it remarkable. The Director General was speaking about a new model of care and perhaps the Director General has decided to make changes, and I am just checking whether in fact part of the changes is designating a physiotherapist for the Rooke. It is just a question; I do not find it remarkable.

Madam Speaker, in respect of the activities team, it is not designated specifically in the estimates book, it is part of the nursing complement, so I would like to ask the Hon. Minister whether they would see an increase in their team in respect of staffing complement given that there are more floors in the Rooke than in the Mount Alvernia building for example.

Hon. G Arias-Vasquez: Madam Speaker, it is remarkable because the Elderly Residential Services has always had or at least within the tenure of this Government has always had a speech and language therapist, an occupational therapist and a physiotherapist, so it is not a new development. What the Director General is talking to is additional teams within the GHA, not the complement that currently exists. The question in this instance is about the complement of the new Rooke facility. Therefore, what I said was remarkable was the fact that this is being spoken about as something new which is happening here when in fact this Government prides itself on

this having happened for years. If the hon. Lady were to review the complement of the Elderly Residential Services, the activities coordinator is not expressly set out in that complement and it has never been. It is a nursing assistant that normally takes on the capacity of the activity's coordinator, as it is indeed the case in Ocean Views and other such services. So, the activities coordinator will carry on being the activities team as they are in Mount Alvernia.

Madam Speaker: The Hon. Mr Reyes has had a question.

Hon. E J Reyes: Thank you, Madam Speaker. Yes, I seek some clarification because I am a bit confused. With respect to the grades on the first page of the schedule, it says that in domestic laundry there is a total of full-time employees of 8. Yet if one goes to the second page, again the same grade, domestic laundry it says 4 full-time employees, increasing complement for Rooke decisions still pending. So, I do not know: is it 8, is it 4, is it 8 plus 4? We will take that one first perhaps we can have some clarification.

Hon. G Arias-Vasquez: Madam Speaker, the answers to the questions that are provided set out the complement as it currently is and as it is currently being discussed and as it will be moved. The answer that the hon. Gentleman alludes to on the second page is the vacancies that may or may not be announced depending on the requirements of the Rooke. So, the 4 full-time equivalents industrial and domestic laundry are vacancies, as it is clearly stated at the top of that page.

Madam Speaker: Next question. Sorry, on to 316.

Hon. E J Reyes: I did say, Madam Speaker, that I have questions on 3 different grades. I broke down my question into small bits.

Madam Speaker: Alright, one more.

Hon. E J Reyes: Yes. For the record, Madam Speaker, perhaps we would have to ensure that it is recorded in Hansard that page 2 refers to future vacancies that they hope to have. However, can I ask clarification: apparently, for the future vacancies we are going to have one administrative officer, whereas on the previous page it shows under administrative grades there is one GDC grade 1 and one GDC grade 2. Does that mean that the vacancies that are going to arise are not going to be under the GDC, are going to be perhaps under the normal civil service which they are referred to as administrative officer? Why are they changing in nomenclature?

Hon. G Arias-Vasquez: Madam Speaker, I am sorry that any confusion arises in respect to the answers to the question. I thought they were quite, quite easily set out. If you look at the answers to the question on page 306, the administrative grades are already in existence and will transfer to the Rooke, so those will carry on being in existence and those will carry on being operationally. The vacancy the additional AO that is coming up is an AO and is likely to be a GHA admin officer rather than an AO. So even though here it says it is an AO, it is likely to be a GHA junior clerk or whatever the equivalent is of the administrative officer in the GHA.

Madam Speaker: Anything on 316? 318? 318? Does the Hon. Mrs Sanchez have anything on 318? No. Oh, it was yours, I beg your pardon. Yes, the Hon. Mrs Ladislaus.

Hon. J Ladislaus: Madam Speaker, we heard that there was another contractor pre the dates on the schedule, so pre-November 2025/2024. Can the Hon. Minister perhaps inform this House as to who that contractor is, who we are awaiting the schedule from?

Hon. G Arias-Vasquez: Yes, Madam Speaker, it was E&M.

2680 **Madam Speaker:** Can the Hon. Minister repeat that please?

Hon. G Arias-Vasquez: Apologies. It was E&M Contractual Services.

2685 **Madam Speaker:** Alright, anything on 329. Thank you, we will move on then to 343, I think.

Q343/2026

**Business Licence applications approved –
Start-ups or young companies moving to Gibraltar from UK**

Clerk: Question 343, the Hon. C Sacarello.

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Hon. C Sacarello: How many Business Licence applications have been approved from start-ups or young companies moving to Gibraltar from the UK since the new rules on residency and status were applied?

2695 **Clerk:** Answer, the Hon. Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I am advised that our data records do not extend to that data that has been requested by the hon. Member on startups, young companies, or the previous location of people moving to Gibraltar.

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Hon. C Sacarello: Madam Speaker, so would the Hon. Minister have any figures regarding the equivalent period before the new residency and status rules were introduced, and whether any assessment has or will be applied in connection to any reduction in applications, employment levels or investment in Gibraltar?

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Hon. G Arias-Vasquez: Madam Speaker, the question requests information on the originating place of the business. We do not collect the data in respect to that. We are always monitoring what the business community tells us in relation to these applications and yes, we will be keeping stock on what it is that occurs in the coming months. We are in constant communication with the GFSB and with the Chamber on the impact of the residency rules, as indeed we are with the GBGA etc.

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Hon. C Sacarello: Madam Speaker, precisely on the topic of the impact of the residency rules that this question is directed and also the concern, actually, with which this side of the House views the Government's stance on this, which is one of stand back or sit back and simply speak to the trade bodies.

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The point of this, Madam Speaker, is that we share a concern that this will have a negative effect, a cooling effect on the economy. So, I would ask for a further question: will the Minister provide evidence of the projected or actual economic impacts, including any data on whether employers have adjusted their hiring practices, pay structures, job descriptions or business models as a result?

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Hon. G Arias-Vasquez: Madam Speaker, we do not share his concerns, as indeed we have made public on numerous occasions in respect to the hon. Member's Executive colleague, because I note that this matter is being dealt with by a Member outside this House rather than the hon.

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Member directly. However, we do not share his concerns, but we will keep on monitoring the situation to see if they have any substance whatsoever.

2730 **Hon. C Sacarello:** Madam Speaker, that is purely bluster and it is purely language that is meant to appease the public but actually serves no purpose to them. If there is no collection of data, then how can they monitor, what are they monitoring? There is a genuine concern that these rules negatively impact on the economy and certainly a flow of people and skills from the UK into Gibraltar. If there is no vehicle or methodology behind collating that data and analysing it, how on earth can this be monitored? My last question on this, Madam Speaker, is: how many UK
2735 entrepreneurs or businesses have withdrawn applications, abandoned plans to relocate, or been unable to proceed because their owners or key employees could not satisfy the new requirements? Will the Government review the rules if they are shown to be deterring the economic viability for these businesses?

2740 **Chief Minister (Hon. F R Picardo):** Madam Speaker, I rise as the Minister with responsibility for residents, noting that the hon. Gentleman was reading his supplementary which is really quite surprising, to say that actually what we found is a huge increase in applications for residents, which entirely counters all of the alleged concerns that the hon. Gentleman has, and most of them from British individuals, which entirely counters the things that hon. Members have said were
2745 their concerns. I recognise that they are trying to link things in different ways, but we do not share their concerns. We do not think there is any of the linkage that they are suggesting, and what we are seeing is increases in applications for residence that should assuage them and should not placate the public, should demonstrate why it is that the public do not seem to share their concerns.

2750 **Madam Speaker:** Right, next question. The last question had 3 supplementaries in it, although it was one stand up, but there were 3 questions in one question. One more.

2755 **Hon. C Sacarello:** Much obliged, Madam Speaker.

Madam Speaker: For the record, it is 5 questions.

Hon. C Sacarello: I stand corrected. So just as a quick response again there was reassurance there that figures are on the increase, but no actual production of increases. Will the Government
2760 commit itself to setting up a study or setting up some form of monitoring system to ensure that any reduction in such levels of input from the UK as a result of this regulation, their regulation will be put in place to ensure that it does not harm the economy?

2765 **Hon. Chief Minister:** No, Madam Speaker, because that is utterly nonsensical.

Madam Speaker: Next question.

[Q344/2026](#)
[Business sectors –](#)
[GibLink](#)

2770 **Clerk:** Question 344, the Hon. C Sacarello.

Hon. C Sacarello: Could the Minister please detail which business sectors the Government is prioritising for GibLink?

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I want to be clear at the outset: GibLink is not designed around Government selected sectors. It is a platform for Gibraltar's entire business community, and it is the sponsors and attendees themselves who shape each event, not the Government. We deliberately did not set out to prioritise one sector over another. What we have set out to do is to provide the platform and capitalise on the opportunities that the Treaty has now given us to take Gibraltar's story to new markets with genuine confidence behind it.

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At GibLink Marbella, for example, our global sponsors and attendees span a genuine cross-section of Gibraltar's actual economy. Given that the pool of any partner is itself primarily a tech hub, it was natural for that event to lean somewhat towards tech and the entrepreneurs' building businesses in that space, but it was by no means exclusive to it.

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At GibLink Manchester, the panel reflects people whose business interaction with Gibraltar has been positive in gaming, digital media and tax advisory. In London we go further still we are inviting our Gibraltarian alumni, the network based there and encourage them to bring their own networks along too, widening our reach.

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GibLink succeeds because it reflects the breadth of our business community and it adapts to each location and the attendees that express an interest in attending, rather than the Government's own preferences. Any business in any sector with an interest in what Gibraltar can offer them or their clients is welcome to take part as a sponsor or as an attendee.

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Hon. C Sacarello: Madam Speaker, I'd like to thank the Hon. Minister for her reply there. And in fact, I think in principle, this is a good initiative. One quick comment on what the Chief Minister said before, because

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Madam Speaker: No, no, a supplementary to this question. We are not going to use this question to go backwards.

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Hon. C Sacarello: So, my supplementary for this particular question is, if the Government does not have any idea on the impact of this regulation, and we share concerns with the business sector that this regulation could detrimentally affect recruitment, growing of the economy through...

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Madam Speaker: What regulation? This is on GibLink. We are not going back to the previous question. If this is specifically on GibLink, I am not going to have supplementaries on the previous question. So, it has to be directed to 344.

Hon. C Sacarello: Yes, Madam Speaker, I appreciate your concern. My question is linked because GibLink is about selling Gibraltar's attractiveness as a jurisdiction. Part of that is the regulations that we have in place to allow businesses to flourish.

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Does the Minister not see the contradiction between saying Gibraltar is open for business, saying we are standing alongside businesses, but at the same time introducing legislation that puts a charge on them to recruit at below a certain threshold? The target market for this, Madam Speaker, is in part young companies' entrepreneurs looking to set up, as mentioned by the Hon. Minister in her speech in the summer. Now, if that is the case and part of the MO of these companies is to keep their costs down and recruit people at the low level, does she not see the contradiction and the difficulties that she will face in going to the UK and trying to convince people to come over when they have to pay higher than normal fees?

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Madam Speaker: That relates to the previous question, not to the question on GibLink. I am not allowing it. Is there anything directly on 344?

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Madam Speaker: Next question.

Q345-349/2026

**Casemates, Chatham Counterguard and Main Street refurbishment –
Refurbishment and beautification programme**

Clerk: Question 345, the Hon. C Sacarello.

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Hon. C Sacarello: Can the Minister confirm that the Government remains committed to delivering the Casemates, Chatham Counterguard and Main Street refurbishment and beautification programme promised in the GSLP/Liberal 2023 Election Manifesto?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with Questions 346 to 349.

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Clerk: Question 346, the Hon. C Sacarello.

Hon. C Sacarello: The 2023 GSLP/Liberal Manifesto contained artists' impressions of the proposed beautification of Casemates, Chatham Counterguard and Main Street. Can the Minister confirm whether those proposals remain the basis of the Government's current plans?

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Clerk: Question 347, the Hon. C Sacarello.

Hon. C Sacarello: In relation to the Casemates, Chatham Counterguard and Main Street refurbishment and beautification programme, was it part of the Government's original 2023 proposal that individual businesses would be expected to finance elements of the beautification of their own premises?

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Clerk: Question 348, the Hon. C Sacarello.

Hon. C Sacarello: The Minister has told Parliament that Government will fund the public infrastructure and main works of the Casemates, Chatham Counterguard and Main Street refurbishment and beautification programme, while businesses may be expected to pay for elements relating specifically to their own premises, including furniture, pergolas, furnishings and terrace extensions. Can the Minister tell the House exactly what proportion of the overall project Government expects the private sector to fund?

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Clerk: Question 349, the Hon. C Sacarello.

Hon. C Sacarello: Can the Minister tell the House the Government's current best estimate of the total cost of the Casemates, Chatham Counterguard and Main Street programme?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): In answer to Questions 345 and 346: Yes, Ma'am.

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In answer to Question 347: The 2023 Manifesto set out the Government's commitment to the refurbishment and beautification of these areas and importantly made clear that the detailed proposals would be developed in consultation with the businesses and other stakeholders

concerned. The Manifesto did not prescribe the detailed funding arrangements for individual elements of the scheme, nor did it specify which elements associated with individual commercial premises would be funded by Government or by businesses themselves. Those details are precisely the type of matters that the consultation and subsequent development of the scheme are intended to determine. What has always been clear is that the Government is committed to investing in the public realm and delivering the principal infrastructure and beautification works. Where the scheme incorporates elements that are specific to an individual business and principally for that business's own commercial use, we will need to consider carefully and fairly where responsibility for these costs should lie.

As I have said previously, Madam Speaker, no final determination has been made on these individual elements. We will approach this reasonably and in consultation with the businesses concerned, ensuring that we strike the appropriate balance between protecting the interests of the taxpayer and not placing an undue financial burden on our business community.

In answer to Question 348: At this stage it is not possible to express the private sector contribution as a precise proportion of the overall cost of the project. The Government remains committed to funding the public infrastructure and the main refurbishment and beautification works. However, we still need to determine precisely which elements, if any, businesses may reasonably be expected to contribute towards. This will require careful assessment and consultation. In particular, the Government will want to ensure that any contribution expected from any businesses is reasonable and proportionate and does not place any undue financial burden on them. We will also consider what mechanisms may be available to mitigate financial impact on businesses where appropriate. Equally, we must be mindful of the interests of the taxpayer. It would not be reasonable to expect the taxpayer to meet the costs of every element of the scheme, where particular items are intended solely for the use of and principally benefit an individual commercial business. There has to be a fair and sensible distinction between investment in the public realm, which benefits Gibraltar as a whole, and expenditure which provides a specific commercial benefit to an individual operator.

At the same time, the wider purpose of this significant investment is to create a more attractive, welcoming and vibrant environment. We would expect businesses operating within these areas to benefit from the increased attractiveness of Casements, Chatham Counterguard and Main Street, both to visitors and to the local community, and from the additional commercial activity that this should help to generate. Once the updated scheme has been finalised and priced, we will be in a better position to assess these matters and determine a fair and appropriate balance between the works funded by the Government and any element to which individual businesses may be asked to contribute.

In answer to Question 349, no ma'am.

Hon. C Sacarello: Madam Speaker, I would like to take these one by one, start with 345 please. The manifesto commitment said that they would carry out some stakeholder engagement on Casements, and that would take place within one month. Would the Minister be able to tell the House what was done in that first month, with whom and what was agreed, and will the results be published?

Hon. G Arias-Vasquez: Madam Speaker, there has been stakeholder engagement with the owners of restaurants in Chatham and engagement with the restaurants in Main Street. We collated their views at the time, and we are therefore developing the plans in consultation with them, but they know the direction of travel.

Hon. C Sacarello: Madam Speaker, the manifesto also envisaged that works on Main Street would take place after a short consultation with the stakeholders, thus implying that works would be carried out relatively shortly afterwards. Does the Minister therefore accept that whatever the Government's present position is on timing within the life of the Parliament, that the timetable

implied to the electorate at the time of the elections in 2023, that it will be done shortly and therefore has not been met?

Hon. G Arias-Vasquez: No, Madam Speaker.

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Hon. C Sacarello: Madam Speaker, I move now to Question 346, which was whether or not the initial proposals have changed. The Government has come back saying that they have. Would the Minister at this stage be able to say which elements have changed and why?

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Hon. G Arias-Vasquez: No, Madam Speaker, we will shortly be in a position to publish the plans of what we are doing, and that would be far more accurate than me standing here and telling you exactly, or telling the hon. Gentleman exactly, what has changed. There will be design differences as the MNE and et cetera has been developed.

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Hon. C Sacarello: Madam Speaker, could I ask therefore why the Government was sufficiently confident enough to publish the artist's impression in their manifesto, giving the impression of a finished state for the electorate including businesses in that area, and yet now three years later they are still unable to show the public the final proposal?

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Hon. G Arias-Vasquez: Madam Speaker, the numbers of the timeline since the last election seems to fluctuate depending on which member of the Opposition you are talking about. The artist's impression is precisely that. It is an artist's impression of what was intended. These are then followed through with MNE plans. They are then followed up with surveys et cetera on the actual site. It would be remiss to carry out detailed works without carrying out these surveys. Therefore, the artist's impressions are an accurate description of the direction of travel which the Government wish to go in, and indeed they have the same sentiment as the actual plans developed, which the hon. Member will see shortly. The plans are a significant upgrade to Casements, Chatham and Main Street and he will be able to see that they are in the spirit of what was indeed discussed in the manifesto.

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Hon. C Sacarello: Thank you, Madam Speaker. Moving on to Question 347 on the timings informing the private sector of their need to fund. I believe the answer was ambiguous in that the manifesto did not actually say either way, but it could have been implied, and it could have been interpreted in such a manner that the costs were going to be covered by Government. Does the Minister accept that this is a materially different proposition following its manifesto commitment to Government-led beautification of the areas?

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Hon. G Arias-Vasquez: No, Madam Speaker.

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Madam Speaker: Anything on 347?

Hon. C Sacarello: Yes, just one more If I may please Madam Speaker. If businesses decline to pay for the elements relating to the works, will Government nevertheless deliver on the standard that their consultancy and architect drawings et cetera deliver and that they wish to deliver, if there are businesses that do not wish to comply, or will they be forced to?

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Hon. G Arias-Vasquez: Madam Speaker, we have not said that businesses will have to contribute, we have not said what will happen if they do not contribute. These are questions which are premised on future events, we will cross that bridge when we get to it and therefore, we do not know, and we have not said either way on whether businesses will be contributing, and therefore that is not a question that I can presently answer.

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2980 **Hon. C Sacarello:** Thank you, Madam Speaker. Moving on to 349, which is a question on the total cost. The Hon. Minister has said this is not a figure that she has available to her given that the plans have yet to be finalised. However, would she be able to provide details on amounts already spent such as architects, consultants, surveys, stakeholder engagement and other design work?

2985 **Hon. G Arias-Vasquez:** Madam Speaker, I do not have those figures on me presently. I am very happy, should the hon. Member give me notice of the question, I am very happy to provide them.

Hon. C Sacarello: Will the Minister commit today to publishing the final cost estimate including professional fees and contingency before any major works commence?

2990 **Hon. G Arias-Vasquez:** Madam Speaker, as the Hon. Chief Minister has committed to previously, of course we will outline the costs and of course we will say exactly how much they cost. Again, Madam Speaker, there is this hint going through the questions which seems to suggest that we do not want to publish costs. Madam Speaker, every time any Member opposite has asked me any question whatsoever, I have provided a detailed breakdown of the costs incurred.

2995 **Madam Speaker:** Next question.

[Q350/2026](#)
[Implementation of the UK-EU Treaty –](#)
[Transaction Tax](#)

Clerk: Question 350, the Hon. C Sacarello.

3000 **Hon. C Sacarello:** Can the Minister for Business state what additional revenue has been generated from Transaction Tax since the implementation of the UK-EU Treaty, and whether any of that revenue has been directed towards businesses through the support schemes announced in her Budget address or through any additional schemes introduced since the Treaty came into effect?

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

3010 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, following the implementation of the UK-EU treaty on 15th July, the total amount of transaction tax levied to date is £7,921,602.

3015 **Hon. C Sacarello:** Madam Speaker, I thank the Hon. Minister for the figure. Given that I noticed that the second limb of the question has not been answered, I would ask her to address that as my first supplementary.

3020 **Hon. G Arias-Vasquez:** Madam Speaker, I did not wish to embarrass the hon. Gentleman opposite. The way that the transaction tax deduction rules are set out, you take your first three months of trading, you look at the difference that you paid on transaction tax to what you would have paid on import duty, and then there is a payment that can be made on that basis. Therefore, until the first three months have concluded, we cannot make any payments. We have published those rules, and we are currently asking businesses to look into that and to submit that information.

3025 **Hon. C Sacarello:** Madam Speaker, similarly I would not wish to embarrass my Hon. counterpart, the Hon. Minister for Business, but just to remind her that there are different schemes available that she mentioned in her budget address that do not just rely on retrospective fees on transaction tax being reimbursed. So, there are, for example, the Business Impact Adaptation and Modernisation Support Scheme which is yet to be published. There are also
3030 business rate relief which the Hon. Minister in her budget speech mentioned would be published within two weeks. So, this was early July, mid-July, we are coming up to three months later and any notion of that at least I have not been able to find any, nor have I heard of any. So perhaps the Hon. Minister could refer to some of the other schemes such as rates relief and explain why these were not delivered within two weeks as she promised in her budget speech.

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Hon. G Arias-Vasquez: Madam Speaker, as the hon. Member may be aware, the first invoices on rates are due to go out in the course of this week. They are sent out quarterly to businesses and they will be sent out today as per the budget debates.

3040 **Hon. C Sacarello:** Madam Speaker, I beg to differ. The budget debate talked about everything being published within two weeks and as, yet I understand and I stand to be corrected, nothing has been published. Would she like to address that and perhaps correct me or her own statement, which are incompatible?

3045 **Hon. G Arias-Vasquez:** Madam Speaker, the rates invoices which are sent out today will be exactly as set out in the budget speech. The rules will follow but the rules will reflect exactly what was said in the budget speech. The transaction tax deduction rules have been published already. They were published two weeks ago and in fact I committed to the Chamber and the GFSB that the block exemption regulations, which is the impact rules that he is talking about, that the hon.
3050 Member opposite is speaking about, would be published in the course of the next two months, September and October. They will be published but they are a backward-looking exercise so they can only be looked at once the businesses have paid the transaction tax. Therefore, they will only be relevant as from the 15th of October.

3055 **Hon. C Sacarello:** Madam Speaker, will the Hon. Minister be able to provide the House with any information as to how many businesses have actually benefited or stand to benefit through their application to these schemes, i.e. what the level of take-up is, and is it consistent with the Government's assessment that businesses are performing exceptionally well?

3060 **Hon. G Arias-Vasquez:** Madam Speaker, as I explained to the hon. Gentleman at the outset of this question, it is a backward-looking exercise, so the businesses that will apply as from the 12th October, so three months from the date of the implementation. So as from three months of the date of the implementation, we will start receiving information on the businesses that wish to apply. Therefore, none of the questions that have been asked address that figure specifically, but
3065 even if they did, we would not be able to supply that information because the information will only be available as from three months after the treaties come into force or provisional application.

Hon. C Sacarello: Thank you, Madam Speaker, and a press release by the Government earlier
3070 on in the summer pointed towards businesses doing extremely well on the back of excess transaction tax compared with the previous period last year being generated and paid into HM Treasury. That was a press statement that was made saying that they were doing extremely well in the hype of the new treaty being implemented. So, does the Hon. Minister not see that additional tax revenue could simply be attributable to the additional level of taxation, and that
3075 the appropriate test would probably more likely be the profitability and sustainability of these businesses, and would she not agree that that would be a far better test?

Hon. G Arias-Vasquez: Madam Speaker, two seconds. I am just trying to dig out the actual press release that the hon. Gentleman is referring to.

3080 Madam Speaker, the press release states in its first paragraph the Government says a number of Gibraltar businesses have reported higher sales in the first two weeks since the UK-EU treaty. Nowhere in the press release does it suggest that an increase of transaction tax shows this, as it would be ridiculous to suggest so because transaction tax did not exist before the 15th July.

3085 So no, I do not agree with the categorisation of the hon. Gentleman's question, and I think that if you walk up and down Main Street and indeed if the hon. Gentleman continues to have the coffees that he loves to have, he will find that most traders on Main Street actually say that they need an entire year before they can properly assess what the impact of the Treaty is. They do agree, however, that there has been an increased footfall in Main Street this summer and there has been an increase in the number of sales this summer.

3090 **Madam Speaker:** Next question.

[Q351/2026](#)
[Detailed policy and strategy –](#)
[Gibraltar's electricity distribution grid.](#)

3095 **Clerk:** Question 351, the Hon. C Sacarello.

3100 **Hon. C Sacarello:** Can the Government provide the House with its detailed policy and strategy for the upgrading, modernisation and futureproofing of Gibraltar's electricity distribution grid, including the specific infrastructure projects identified, their prioritisation and anticipated timescales for delivery, and the total costs budgeted, committed and forecast for this programme?

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

3105 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, the GEA shall continue with the electricity network modernisation programme and completion of Intelligent Fault Loading Shedding System, the IFLS, network-wide substation communications, central SCADA visibility and control, protection modernisation and HV network resilience, designated as critical infrastructure priorities. These priorities have been confirmed by an independent technical assurance review of the GEA completed in July 2026, which identified specific and immediate
3110 distribution network priorities including completion of IFLS commissioning, protection coordination across the network, integration of the existing battery storage system into the network resilience planning, and the remediation of specific earthing and current transformer issues at the Waterport Substation.

3115 The GEA will progressively connect all critical electricity substations to the central SCADA control system using fibre communications wherever practical and secure GSM mobile communications where fibre is unavailable. This will enable remote network monitoring and switching, intelligent fast load shedding and automated system restoration, significantly reducing the extent and duration of electricity interruptions whilst improving the resilience and security of Gibraltar's electricity supply.

3120 This also reduces resilience on physical intervention by GEA's engineering workforce at substations at a time when a significant proportion of that workforce is approaching retirement, making automation a further contributor to long-term resilience, not only a response time improvement.

3125 The initial objective shall be to provide the power station control room with real-time visibility of all critical substations and progressively all technically appropriate substations, together with a secure remote-controlled capability, automated system restoration and an integrated intelligent fast load shedding system capable of responding dynamically to generation contingencies.

3130 The combination of SCADA communications, remote switching and automatic restoration should enable healthy sections of the network to be restored rapidly within 10 minutes following a fault, reducing reliance on engineers and technicians having to travel to substations to carry out initial tests, fault location and manual switching operations. All network capital projects shall thereafter be prioritised according to quantified reliability, safety, capacity and asset condition and system reliance risks, rather than principally according to asset age. Priority will therefore be given to infrastructure whose failure presents the greatest risk to continuity of supply, including
3135 critical substations, HV cables, switchgear, transformers, protection systems and communications infrastructure. This risk-based prioritisation will be produced through the asset management framework now being established as part of the GEA's technical assurance programme, so the priorities are evidence-led rather than based on anecdotal condition assessments.

3140 The initial assets, SCADA, IFLS and financial baseline exercises referred to above are already underway and are being delivered through a validated phased programme. So, the mobilisation and stabilisation of critical safety and asset management priorities were between months 1 and 6. The building and embedding of network protection, resilience and asset management capabilities were implemented in months 7 to 18. And the assurance and optimisation of SCADA, IFLS and automated system restoration across the network between months 19 to 30. The transfer
3145 of sustained capability into the GEA's own organisation between months 31 and 36. We are looking at dedicated technical services capability to deliver this programme. We are currently in negotiations to bring over the capability to the GEA. The intention is to bring over this additional capability to the GEA workforce to train up the future workforce of the GEA, to include apprenticeships and general support.

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Hon. C Sacarello: Madam Speaker, I thank the Hon. Minister for a lengthy answer there, for the detail and also for some of the actions that the Government hopes to be taking to remedy what is ultimately a sometimes-failing system.

3155 I would ask the Hon. Minister: would it be within her gift and willingness to share the reports with us so that we can digest it ourselves? And for the moment, for the House, would it be possible for her to announce if there is a costed programme and firm milestones with the person responsible for delivering it, and would she be able to elucidate on that if that is the case?

3160 **Hon. G Arias-Vasquez:** Madam Speaker, as I stated in my response, we are currently negotiating those milestones and those costs, and as soon as they are delivered a press release will follow with all the associated costs of delivering the programme.

Madam Speaker, I am happy to share the report with the hon. Gentleman behind the Speaker's Chair. I do not wish to make the report public for obvious reasons.

3165 **Madam Speaker:** Next question.

Q352/2026
Government rental flats released –
Tangier Views and C Block

3170 **Clerk:** Question 352, the Hon. D J Bossino.

Hon. D J Bossino: Is the Government now in a position to state whether any government rental flats will be released to the housing stock and if so, how many, to include details of their room configuration when users are moved to Tangier Views and C Block?

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

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, the Government is not yet in a position to provide details on the number or configurations of Government rental flats that may be released when users are moved to Tangier Views and C Block.

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Hon. D J Bossino: The explanation that was given by the Hon. Minister on the 14th January this year, this is why I thought it would be appropriate to ask a question by way of update now was that she was not in a position to answer my question, which was very similar, not in exactly the same terms, because at present and I quote Hansard,

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the Government is awaiting the outcome of the Care Agency's Block C consultation process,

which she said also included Tangier Views,

which will determine the next steps.

Does that remain the position? The Government is still in a process of consultation and that is why the hon. Member is not able to provide the answer to the question?

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Hon. G Arias-Vasquez: Madam Speaker, as the hon. Gentleman is aware, the consultation was finalised earlier this year. We are now moving to the development of the design of the building. The reason is that the number of flats that will be released is a very fluid situation, so the number of service users does change regularly, and so we are not able to confirm the number of flats that will be available.

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Hon. D J Bossino: Do I take it now that if one is to elicit a response to the question that I have now posed on two occasions, that it is now not linked as she said back in January to the process of consultation, but in fact it is now more linked to the process of development and should I add completion of the site? Is that the position?

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Hon. G Arias-Vasquez: Madam Speaker, the design of the building will necessarily follow up with the consultation, so the answer to the question is yes.

Hon. D J Bossino: If I may, is the hon. Lady able to state when that is likely to happen, so that we have and I am thinking of my hon. Friend Mrs Sanchez who has direct responsibility for this area when it is likely that she will be in a position to answer this question and indeed to announce how the project at Tangier Views and C Block is developing and when the users are likely to be moving in?

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Hon. G Arias-Vasquez: Madam Speaker, the plans and designs will be published as soon as they are available. We envisage that to be shortly. The answer to this question is very difficult to confirm because it is a moving situation, so we do not know the number of users that will actually be able to move into Tangier Views, how many users there will be at that point in time. So much like the configuration of the 85 beds in the GHA at present, this is a fluid situation which I would not want to give a precise number in Parliament and have that figure change.

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Hon. D J Bossino: If I may push her further, there will be a moment in time when one will be able to, I accept that this will always be a moving feast to a certain extent because there will be

3220 more users and there will be more users occupying potentially more Government flats. But what I am trying to establish is: when the hon. Lady is able to provide a full answer to the points which at the minute are still slightly in the air, at that precise moment she will surely be able to say at this precise moment I have X number of users and there will be a release of the following flats with the following configuration at that precise moment. I just want to pull that thread slightly to ask her to confirm that my understanding is correct, that there will be a precise answer at the relevant time, but I accept it is a fluid situation.

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Hon. G Arias-Vasquez: Madam Speaker, that answer needs to be broken down into two separate, my answer needs to be broken down into two separate sections. One is: when will the designs be ready? And that will contain the number of flats that will be available, the number of users that can move into it, and we can confirm that as soon as the designs are ready, which we hope to be shortly. Separate to that, we will be able to confirm at a given point in time how many flats will be able to be released back to the Housing Agency. But the answer again is the same as in the GHA it is an answer at that precise moment in time, and then we cannot be held to that answer because the situation may change thereafter.

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Madam Speaker: Next question.

[Q353-356/2026](#)
[Westside reclamation –](#)
[Cost, start date & subsequent development](#)

3240 **Clerk:** Question 353, the Hon. D J Bossino.

Hon. D J Bossino: Which entity is now expected to carry out the Westside reclamation and its subsequent development?

3245 **Clerk:** Answer, the Hon. Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, I will answer this question together with questions 354 to 356.

3250 **Clerk:** Question 354, the Hon. D J Bossino.

Hon. D J Bossino: When will the works related to the Westside reclamation begin?

Clerk: Question 355, the Hon. D J Bossino.

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Hon. D J Bossino: What will be the cost of the Westside reclamation and its subsequent development?

Clerk: Question 356, the Hon. D J Bossino.

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Hon. D J Bossino: Who will be responsible for the cost of the Westside reclamation and its subsequent development?

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

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Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, in answer to Question 353, the Westview reclamation will be undertaken by His Majesty's Government of Gibraltar, as will the subsequent affordable housing development to be built upon it.

3270 In answer to Question 354, the Westview reclamation works physically commenced on the 21st September 2026 with the main contractors starting their site set-up at the northern corner of the park.

In answer to Question 355, the total cost of the Westview reclamation project is £59 million, inclusive of the demolition of the extension jetty and other related items. It is not possible at this stage to provide costs for the subsequent affordable housing development.

3275 In answer to Question 356, the Westview reclamation and the subsequent affordable housing developments will be funded by His Majesty's Government of Gibraltar.

Hon. D J Bossino: Can I, if I may, Madam Speaker, take the Hon. Minister to the answers she has just given in respect of 354, where she said if I have taken an accurate note and understood her correctly, or heard her correctly the work started already on the 21st September 2026. But I think when she is referring to the works, it is basically the demolition of the jetty that is what started on the 21st September. But what we have not yet seen is sand being deposited in the area. Is that understanding correct, if I may ask?

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Hon. G Arias-Vasquez: Madam Speaker, the phase plan of all projects will contain a mobilisation phase, so the extension jetty has already commenced, as it is very visibly seen, but what I mean by the commencement is the mobilisation works which precede every project.

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Hon. D J Bossino: Yes, so she refers it to the mobilisation works. I am not entirely sure what that is meant to encompass. I know that was her area of law when she was in practice, but perhaps for myself and indeed for the wider public, can she be more specific and provide particulars as to what it is that she is referring to?

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Hon. G Arias-Vasquez: Madam Speaker, that is the phase of the works where the site office will be set up, where they will begin to get the methods in which they will be able to apply the materials, and they will set up the infrastructure for the entirety of the project.

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Hon. D J Bossino: So, is she able to provide a response to the question that I really was asking in the Order Paper, which is: when is it that the reclamation proper is going to start? When is it that we are going to see the dredging machines or however the process is going to be conducted the depositing of the sand and the earth in that area? When is the reclamation proper going to be started?

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Hon. G Arias-Vasquez: Madam Speaker, as I have told the hon. Members opposite numerous times, if there is a genuine question that you want me to answer specifically, please do ask that question specifically. I do not have the phased plan in front of me, so I cannot answer the question directly on when we will start to see the sand in the water. If I am given notice of the question, I am very happy to answer that. But at the moment what I can confirm is sorry, I see the hon. Member surprised and flummoxed at me not answering the question. The question is: when will the works related to the Westside reclamation begin? The works have begun; the mobilisation phase has begun. If you wanted to know when the sand will start going in the water, that is a very different question to the one that is currently posed. Apologies for being pedantic, but that is a separate question.

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Hon. D J Bossino: Madam Speaker, I thought that the question was drafted sufficiently widely to include the question that I posed by way of my third supplementary question. So, I do not agree, with the greatest respect to the Hon. Minister, with what she has just said. I think the question

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that I have now asked by way of a third supplementary is more than capable of being answered to and does arise from the question in the Order Paper.

3320 But be that as it may, and if that is the way she wants to deal with this, that is fine. The people out there will be none the wiser as to when it is that the reclamation proper, the works proper, will commence in respect of the reclamation.

3325 But can I ask her this: in respect of that, and given that, well, I was going to say we do not have an answer as to when they are going to be commencing, so none the wiser in relation to that point is the Hon. Minister taking account of and meeting the residents of the area to assuage their concerns and deal with their complaints in relation to this particular project?

Hon. G Arias-Vasquez: Madam Speaker, I resist the categorisation of that question. The question is: when do the works begin? I apologise for understanding that question to mean that 3330 the works have already begun, and by any construction of a construction contract mobilisation phase is an extremely important phase of the contract and it has already begun. The extension jetty has already begun to be demolished, but that is a separate contract as it were, not the main reclamation phase. The main reclamation has started on the 21st September, and the mobilisation has already started. When will the residents see it?

3335 As I have often said when previously asked, I lived right first line in front of the last reclamation that was there. I lived in Valiant House as anyone that lives in Varyl Begg will know is front line to the reclamation, and I assure the hon. Members opposite that the residents will be very aware of exactly when the sand starts going into the water because they will visibly see it. It is a very obvious point. But if the hon. Gentleman wants to know when the sand will start to be poured into the 3340 reclamation, it is a question which does not come naturally to my mind from the question that was asked on the Order Paper. I would urge the hon. Member opposite to be more specific in his questions.

3345 However, Madam Speaker, I would point to the fact that this is the most exciting reclamation project that Gibraltar has seen for a very, very long time, with a total of over 2,000 houses being built on that project for many generations of Gibraltarians. It is a huge project and therefore yes, it is true that I do not have the information available to me because the question was not posed to me about when the sand is going to be poured for the reclamation. But the end result of the reclamation, the 2,000 homes which will be built in the reclamation, is a very exciting project and one that deserves to be celebrated by both sides of the House.

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Madam Speaker: No, I am not counting you there. The Hon. Mr Clinton had one question on there, either you or he can take it, but I am not going to keep... yes, the Hon. Mr Clinton. (Interjections)

3355 **Hon. R M Clinton:** Sorry, thank you, Madam Speaker. Just a simple question for the Minister. If I understood correctly, the Government of Gibraltar will be responsible for the reclamation project and its costs. But could the Minister advise the House when we understand the Government is that the Government itself directly, or is there to be a Government-owned company that will be undertaking all the contractual arrangements, and if that is the case, can she 3360 advise the House of the name of that company?

Madam Speaker: I will allow the question but I think that is 353, not this question, the question beforehand, but I will allow it anyway on 353.

3365 **Hon. G Arias-Vasquez:** Madam Speaker, we are currently in the process of determining that and I will be making a statement on exactly those issues as soon as the matter has been settled.

Madam Speaker: 355?

3370 **Hon. D J Bossino:** On 355, the Hon. Minister said in answer that the cost was I think I quoted correctly £59 million. I think that was in respect of the reclamation, and I think she was not in a position to offer a reply to the second limb of the question and its subsequent development. So, we are talking about the building of the flats and the whole infrastructure related to that. Does she not have a notion, a notional figure, as to what she expects that will be? Because there is a governmental commitment already highlighted of providing 2,000 flats, so surely the Government will have an idea and a notion of what that will mean, because they would have thought that if they are going to be true to their promise that they will be able to afford it.

3380 **Hon. G Arias-Vasquez:** Madam Speaker, in answer to the hon. Gentleman's question, of course we have an idea of roughly what construction costs are in the market. We would expect that all such construction contracts go out to tender and therefore we cannot outline what the costs will be once the tender process is complete and once we have the price, we are very happy to share that at that point in time.

3385 **Hon. D J Bossino:** And fine, only to the extent that they are committed to build those flats. But can I ask her to confirm that the reclamation costs that I have properly set out and understood from her response that it is the reclamation costs which are going to already have a price tag, and that would include the mobilisation and I dare say the putting in of the sand in the area out of £59 million? Is that understanding correct?

3390 **Hon. G Arias-Vasquez:** Madam Speaker, when we talk about the costs of the reclamation, it is the costs of the reclamation contract, so it is the entire contract for the reclamation. So, in order for a reclamation to appear out of the sea, all of the costs associated to that are included in the £59 million, inclusive of the demolition of the extension jetty. So, the entirety of the contract, from the mobilisation to the demolition to the sand coming out of the sea, is all included in that figure that I gave earlier.

3400 **Hon. D J Bossino:** And Madam Speaker, in respect of 356, given following on from the question that was asked and posed by my friend Mr Clinton in respect of 353 I suspect it is linked. When I asked for the responsibility and the liability of the costs and the hon. Lady said the Gibraltar Government, is it also the case that that is at sea at the moment, subject to the statement that she indicated earlier she will be making as to the financing of that?

3405 **Hon. G Arias-Vasquez:** Yes, Madam Speaker.

Madam Speaker: Next question.

[Q357/2026](#)
[Potable water reservoir –](#)
[Stocks by calendar month](#)

3410 **ANSWER TO QUESTION 357**

Month	End of Month Stock (m³)	Month	End of Month Stock (m³)
January 2021	70,858	November 2023	59,195
February 2021	59,248	December 2023	55,458
March 2021	63,185	January 2024	65,126

April 2021	63,712	February 2024	58,121
May 2021	47,882	March 2024	65,899
June 2021	35,822	April 2024	67,627
July 2021	44,301	May 2024	60,896
August 2021	46,219	June 2024	62,401
September 2021	46,446	July 2024	63,578
October 2021	51,061	August 2024	63,696
November 2021	44,323	September 2024	41,424
December 2021	60,871	October 2024	49,220
January 2022	57,142	November 2024	63,410
February 2022	56,173	December 2024	67,592
March 2022	44,132	January 2025	59,765
April 2022	34,508	February 2025	62,064
May 2022	27,959	March 2025	62,702
June 2022	32,437	April 2025	65,202
July 2022	21,655	May 2025	63,089
August 2022	31,453	June 2025	55,796
September 2022	34,010	July 2025	56,754
October 2022	46,635	August 2025	44,684
November 2022	66,025	September 2025	52,594
December 2022	64,816	October 2025	57,445
January 2023	64,620	November 2025	62,845
February 2023	60,071	December 2025	67,789
March 2023	57,893	January 2026	61,537
April 2023	55,446	February 2026	44,045
May 2023	65,200	March 2026	43,039
June 2023	57,596	April 2026	49,429
July 2023	65,687	May 2026	53,116
August 2023	63,637	June 2026	58,161
September 2023	64,532	July 2026	59,897
October 2023	64,975	August 2026	56,321

Clerk: Question 357, the Hon. Leader of the Opposition.

3415 **Hon. Dr K Azopardi:** What were potable water reservoir stocks by calendar month from January 2021 to date?

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

3420 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, I now hand over the schedule with the information requested.

3425 **Madam Speaker:** We can move on, but all the questions that are remaining on the Order Paper belong to the Hon. Leader of the Opposition, so I shall not really be able to give much effective time.

Hon. Dr K Azopardi: It is fine I do not need time, I am sure I do not. Madam Speaker, with the aid of this schedule, it might make sense to pass on to the next question and then I can ask because they are related in many respects and it may be easier just to take them together.

3430 **Madam Speaker:** Yes, alright Question 358.

Q358/2026
Increase rolling potable water reservoir stocks –
Measures being taken

3435 **Clerk:** Question 358, the Hon. Leader of the Opposition.

Hon. Dr K Azopardi: What measures are being taken to increase rolling potable water reservoir stocks?

3440 **Clerk:** Answer, the Hon. Minister for Health, Care and Business.

Minister for Health, Care and Business (Hon. G Arias-Vasquez): Madam Speaker, AquaGib advises us that due to space constraints it is not possible to build more storage reservoirs and the next best option is to provide resilience to ensure that production capability is higher than consumption for as much time as is possible.

3445 AquaGib monitors this using a 7-day average when considering the monthly figures issued in Parliament in Question 122. Following the fire at Powers Drive in 2022 the average closing monthly stock for the period 23–25 has been approximately 60,000m³. This represents the storage reservoirs being approximately 83% full over the 3-year period.

3450 Due to the move of the RO plant from the Waterport site to North Mole in late 2025 and late 2026, which restricted water production for periods, reservoir stock levels fell. However, the investment and commissioning of a new RO plant to replace end of life equipment and the investment in a temporary RO plant have allowed AquaGib to recover comfortably.

3455 Additionally, it should also be noted that AquaGib has assisted the MOD over the busy summer period by providing circa 37,000m³ of potable water to supply the Gibraltar public on MOD networks and MOD estates. It is AquaGib's intention to continue utilising the temporary RO plant to ensure that production capability stays above the consumption during the coming months when consumption will fall. This will ensure that stocks are raised to as close as 100% full as possible, along with facilitating the maintenance of permanent RO plants during the winter months.

3460 During 2027 a further RO plant will be procured to ensure that AquaGib's production capability is above consumption for 100% of the time and will reduce the operational need for the temporary RO plant, reserving it only for exceptional periods of consumption or other exceptional occurrences if required. This will allow stocks to remain as close to 100% as possible.

3465 **Hon. Dr K Azopardi:** I am grateful for the answer and for the schedule. Of course, as the hon. Lady has indicated in her principal answer, this is related really to understanding a bit the whole impact of the Powers Drive, I always forget the name of the tunnel in 2022 where what stemmed from that was that of course the water stocks were very badly affected because of the fire. I remember asking some months later about water reservoir stocks and I was interested in trying to track precisely what we are talking about.

3470 Can I just ask the hon. Lady, because I notice on the schedule that it does oscillate up and down of course it is not ever as bad as it was in the period of summer 22 when we had the fire. It goes up and down, and she mentioned in her principal answer that I understood her to use the number

3475 60,000 as a sort of critical mass, 80% or whatever she said. But of course, there are some months where it is below that; some of the months go down to the 40s. Does she have any information so for example in February 26, March 26, April 26 you are down to 44,000, 43,000, 49,000 is there a kind of critical moment where AquaGib considers it should not go below? Is there that kind of assessment by the company?

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Hon. G Arias-Vasquez: Yes, Madam Speaker. The figure is 50,000 and at 50,000 civil contingencies are notified in case they need to monitor it. The months that the Hon. Gentleman has referred to are the months where the RO plant was moved from North Mole Power Station, sorry, from the North Mole site currently to be developed as Bob Peliza Mews to the new North Mole site.

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Hon. Dr K Azopardi: And can I ask, just on that, the hon. Lady talked about resilience as I understood it, she was going rather fast in her reading, but from memory I think she spoke about resilience on MOD for a while, and also that in 2027, next year, there are plans to acquire a plant.

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Can I just understand that a bit better, because she started her principal answer saying due to space constraints certain things cannot be done but ended with the plant to be acquired.

Does that mean then, as I understood it, the consequence of that would be that AquaGib would aspire to have much more capacity nearly 100% that means what, like 80,000 something like that and when would it be reasonable for AquaGib to aspire to have that kind of capacity on a monthly basis?

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Hon. G Arias-Vasquez: Madam Speaker, I will try and take those questions in turn and apologies for speaking rapidly it has been quite a long session.

The answer referred to AquaGib assisting the MOD, not the other way around, so during the summer months AquaGib have assisted the MOD by providing circa 37,000m³ of potable water to supply the Gibraltarian public which run on the MOD network. I did indeed refer to an additional RO plant.

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The question, and indeed the hon. Leader of the Opposition, is entirely correct in saying that the two questions that he has asked are related. The reservoirs are huge, usually inside the Rock, and we are unlikely to be able to build a reservoir of that size again. So, the combination of the reservoirs and the RO plant means that the RO plant produces more water than is currently being stocked. So, what that answer was alluding to was having more RO plants and indeed we are buying a new RO plant to replace the temporary RO plant so that we always are able to produce more water than the reservoirs are able to hold, because we are unlikely to be able to create an additional reservoir. I think that answers the hon. Gentleman's question.

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Hon. Dr K Azopardi: Thank you. Can I just also then finally ask this, so AquaGib are aspiring I think she did not answer the tail end so I will ask it again, when would AquaGib be aspiring to have that capacity of 100%? And related to that, which is really the question that I got up to ask, given the population expansion census to census keeps going up, is AquaGib, is the Minister confident that the plans that she has described will cater for that population expansion that we clearly have?

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Hon. G Arias-Vasquez: So, I am going to break that question into three separate elements. First of all, we are procuring or AquaGib is procuring an additional RO plant which will ensure that the 100% target is met. But even before that RO plant is acquired, over the coming months so the consumption of water is particularly high over the summer months for obvious reasons the consumption of water is now expected to drop into the winter months, and we now have the plants just outside North Mole Power Station along with the temporary plant, so it is expected that production will be at or close to 100% even before the new RO plant is purchased. Once the new plant is purchased then the temporary plant will be put out of production and the new RO

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plant will take over, only leaving the temporary RO plant for instances where the production falls below that which is expected. I believe that answers the questions.

Madam Speaker: Next Question.

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Q359/2026
Ships docked at the detached mole –
Last 10 years

Clerk: Question 359, the Hon. Leader of the Opposition.

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Hon. Dr K Azopardi: How many ships have docked at the Detached Mole in the last 10 years broken down by calendar year and by average length of stay and what are the general purposes of such visits?

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

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

ANSWER TO QUESTION 359

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Year	Vessels	Average Length of Stay
2016	29	20
2017	28	20
2018	30	14
2019	25	30
2020	67	5
2021	82	17
2022	92	17
2023	92	14
2024	80	16
2025	98	5

Hon. Dr K Azopardi: Yes, Madam Speaker. So, the part of my question which was about general purposes is not covered in the schedule, so perhaps the Hon. Minister can answer that part.

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Hon. G Arias-Vasquez: Madam Speaker, the purposes of such calls are varied, and they typically relate to ship-to-ship operations, yacht loading and unloading operations, repairs afloat and towage operations. Additionally, up to mid-2024 they habitually had a floating storage vessel berthed at the Detached Mole which supported local bunkering operations.

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Hon. Dr K Azopardi: But the Detached Mole was never used presumably for cruise vessels or anything like that?

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

3560 **Hon. Dr K Azopardi:** And so, in the column that says average length of stay, is that days or months?

Hon. G Arias-Vasquez: I believe that to be a reference to days, Madam Speaker.

3565 **Hon. Dr K Azopardi:** The hon. Lady says when I asked about purposes, she has given me a generic answer. That is from information that she has received so just for my accuracy: loading, unloading, towages, ship repair, I think she said, and there was a floating storage vessel. Generally, they would all fall into a bag of commercial shipping vessels. But can I ask, are they commercial meaning commercial civilian, or are they also MOD stays for MOD vessels?

3570 **Hon. G Arias-Vasquez:** Madam Speaker, these are commercial vessels but not commercial MOD vessels. The list only includes foreign going vessels and it does not include locally based vessels such as harbour craft etc. The port does not track the berth usage of harbour craft licenced vessels because they are typically used the Detached Mole for rest rather than anything else.

3575 **Hon. Dr K Azopardi:** Let me understand that. So, if a locally registered vessel, I mean I am not familiar with the berthing arrangements in the Detached Mole, but presumably a locally registered vessel cannot just berth there. They would need authority would they not from the Captain of the Port, in which case would there not be a log of domestically registered vessels that are berthed there?

3580 I am not sure I understand why the Minister is telling me these are foreign going but cannot tell me the number of the domestics. I am not sure I understand.

3585 **Hon. G Arias-Vasquez:** Madam Speaker, the use of the harbour craft licenced holder vessels that use it are very small scale, so because they are such small scale operations the port authorises their use but does not log it because it is a matter of hours usually rest or anything of the sort it would not be a significant number of days that any such vessel is using the Detached Mole.

Madam Speaker: Next question.

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Q360/2026
GHA or ERS make up to 25% savings –
Rooke Residential Home

Clerk: Question 360, the Hon. Leader of the Opposition.

3595 **Hon. Dr K Azopardi:** How precisely will the GHA or ERS make up to 25% savings in light of the opening of the Rooke Residential Home?

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

3600 **Minister for Health, Care and Business (Hon. G Arias-Vasquez):** Madam Speaker, Running 218 beds at the Rooke is projected to cost £90,287 per bed per year compared to £114,981 per bed per year at the current ERS estate. This represents a saving of £24,694 per year or £68 per bed per day. This equates to a 21.5% cost reduction per bed for GHA and ERS.

3605 When assessed against the combined cost of Moun Alvernia, Cochrane Ward and the 60 elderly care beds within the St. Bernard's hospital, which is an additional £7.2 million, sorry Mount Alvernia and Cochrane ward run at £17.2 million it is a total of £24.4 million per annum. The Rooke's projected gross operational annual cost of £19.9 million produces a direct annual cost

saving of approximately £4.5 million. Beyond this, the transfer of 78 patients, 78 again is a fluid figure, from St Bernard's Hospital and John Cochrane generates a projected gross operational saving of £6.3 million per annum at St Bernard's Hospital with a further £2.4 million in agency and bank staff savings, for a 57% reduction in occupied bed capacity.

The resulting net operational cost of £11.4 million represents a potential cost saving of 53% per annum. Such savings are a natural consequence of consolidating three separate clinical sites in one purpose-built facility. More efficient workflows, different staffing models and sharing of common GHA resources all clearly combine to deliver reduced costs when compared to the same services delivered over three split sites. Further, when nearly 40% of those services are being frequently provided in a much more expensive acute hospital setting, the savings are obvious.

Hon. Dr K Azopardi: Madam Speaker, I am grateful for that and obviously we will have to analyse that rather lengthy answer and to understand and unpack it a bit more because some of the costs are costs that are currently being deployed and therefore moving around but I understand that, so there is movement of costs, so costs that are currently being expended and are just moving from one part of the budget to another. And there is also, as I understand the Minister's answer, the expectation that by consolidating if I have understood her correctly it will then result in a reduction and hence the different figures she has given. Am I right in understanding that?

But of course, I asked about the 25% because it was a figure flagged by the Director General. She has given different figures: aspirational figures far in excess of the 25% and then a different figure in the low 20s as it were. But we will unpack the answer. Am I right at least in understanding the basic principle: there are movements of deployed costs but also the expectation of net savings because of the project?

Hon. G Arias-Vasquez: Madam Speaker, in this session of Parliament, we have described the complement that is currently going to be moved from Mount Alvernia, from Cochrane and from the hospital to the Rooke, so that is a defined complement. I think the figure given was 317 full-time equivalents to be deployed in the Rooke. Because of the movement of the patients to a residential facility there will be significant cost savings there, but there is a lot of bank staff in the GHA which will no longer be required, meaning there will be significant savings there as well. The first part of the answer however was a direct correlation of the current cost of a bed in Mount Alvernia or Cochrane at the moment compared to what the cost of the bed is going to be at the Rooke going forward, so the 21.5% cost reduction per bed is a direct correlation already of the cost of the provision of a bed in Mount Alvernia and John Cochrane compared directly to the cost of a bed in the Rooke.

Madam Speaker: I think that is the end of the questions to the Hon. Minister for Health, Care and Business.

Adjournment

Chief Minister (Hon. F R Picardo): So, Madam Speaker, I therefore now move that the House should adjourn to Thursday 8th at 3.30 in the afternoon.

Madam Speaker: Alright. I now propose the question which is this House to now adjourn to Thursday 8th October at 3.30 p.m. I put the question which is this House to now adjourn to Thursday 8th October at 3.30 p.m. Those in favour? **(Members: Aye.)** Those against? Passed. This House will now adjourn to Thursday 8th October at 3.30 p.m.

Hon. Dr K Azopardi: Sorry, before we rise, can I ask an indication from the Chief Minister, is that for Chief Minister's questions?

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Hon. Chief Minister: No, Madam Speaker. I think I indicated that I would be taking questions the week after on the Thursday. But Sir Joe has to answer his questions. We have still got the Hon. Professor Cortes. The hon. Professor Cortes who is back from Brussels next week so there are those two to deal with.

The House adjourned at 2.15 p.m.