



**OFFICIAL REPORT**

**OF THE**

**STATES OF DELIBERATION**

**OF THE**

**ISLAND OF GUERNSEY**

**HANSARD**

**Remote Meeting, Guernsey, Friday, 22nd May 2020**

*All published Official Reports can be found on the  
official States of Guernsey website [www.gov.gg](http://www.gov.gg)*

**Volume 9, No. 24**

**ISSN 2049-8284**

**Present:**

**Richard McMahon, Esq., Bailiff and Presiding Officer**

**Law Officers**

Miss M. M. E. Pullum, Q.C. (H.M. Procureur);

**People's Deputies**

**St Peter Port South**

Deputies P. T. R. Ferbrache, D. A. Tindall, B. L. Brehaut, R. H. Tooley

**St Peter Port North**

Deputies J. A. B. Gollop, C. N. K. Parkinson, L. C. Queripel,  
M. K. Le Clerc, M. P. Leadbeater, J. I. Mooney

**St Sampson**

Deputies L. S. Trott, P. R. Le Pelley, J. S. Merrett,  
G. A. St Pier, T. J. Stephens, C. P. Meerveld

**The Vale**

Deputies M. J. Fallaize, N. R. Inder, M. M. Lowe, L. B. Queripel,  
J. C. S. F. Smithies, S. T. Hansmann Rouxel

**The Castel**

Deputies R. Graham L.V.O, M. B. E, C. J. Green, B. J. E. Paint,  
M. H. Dorey, J. P. Le Tocq

**The West**

Deputies A. H. Brouard, A. C. Dudley-Owen,  
E. A. McSwiggan, D. de G. de Lisle

**The South-East**

Deputies H. J. R. Soulsby, H. L. de Sausmarez, P. J. Roffey,  
R. G. Prow, V. S. Oliver

**Representatives of the Island of Alderney**

Alderney Representatives S. Roberts and A. Snowdon

**The Clerk to the States of Deliberation**

C. Foster (H.M. Deputy Greffier)

**Absent at the Evocation**

R. M. Titterington, Q.C. (H.M. Comptroller); Deputy S. L. Langlois (*relevé à 09h 58*)

## Business transacted

Evocation .....	5
<b>Billet d'État XII</b> .....	<b>5</b>
Elections and Appointments .....	5
I. Election of Members of The Ladies' College Board of Governors – Deputy Soulsby and Mr Acton re-elected .....	5
<b>Billet d'État XI</b> .....	<b>6</b>
Legislation for Approval .....	6
I. The Alderney Property Tax (Enabling Provisions) Law, 2020 – Proposition carried .....	6
II. The Human Tissue and Transplantation (Bailiwick of Guernsey) Law, 2020 – Proposition carried .....	8
III. The Population Management (Guernsey) (Amendment) Law, 2019 (Commencement) Ordinance, 2020 – Proposition carried as amended .....	18
IV. The Machinery of Government (Transfer of Functions) Ordinance, 2020 – Proposition carried as amended .....	19
V. The Pilotage (Amendment) Ordinance, 2020 – Proposition carried as amended .....	20
VII. The Taxation of Real Property (Guernsey and Alderney) (Amendment) Ordinance, 2020 – Proposition carried as amended .....	22
Procedural – Order of Business .....	25
<i>The Assembly adjourned at 10.56 a.m. and resumed at 11.05 a.m.</i> .....	25
XIII. Urgent Capital Bid – Replacement of the Electronic Patient Record System – Debate commenced .....	26
<i>The Assembly adjourned at 12.33 p.m. and resumed at 2.30 p.m.</i> .....	42
Urgent Capital Bid – Replacement of the Electronic Patient Record System – Debate concluded – Propositions carried .....	43
Procedural – Order of Business .....	58
<b>Billet d'État XII</b> .....	<b>59</b>
II. Dates of States' Meetings – 1st September 2020 to 31st August 2021 – Debate commenced .....	59
<i>The Assembly adjourned at 4.17 p.m. and resumed at 4.25 p.m.</i> .....	66
Dates of States' Meetings – Debate continued .....	66
Motion to sit until 6.30 p.m. to conclude Item II – Proposition carried .....	80
Dates of States' Meetings – Debate concluded – Propositions carried as amended .....	80
Procedural – Motion to reconvene States' Meeting on 3rd June – Proposition carried .....	94
Procedural – Motion to re-order business to deal with Schedule for Future States' Business before adjournment – Proposition lost .....	96
Assembly's thanks to whole community .....	97
<i>The Assembly adjourned at 7.04 p.m.</i> .....	97

*PAGE LEFT DELIBERATELY BLANK*

# States of Deliberation

*The States met at 9.30 a.m. in the presence of  
His Excellency Vice-Admiral Sir Ian Corder, K.B.E., C.B.  
Lieutenant-Governor and Commander-in-Chief of the Bailiwick of Guernsey*

[THE BAILIFF *in the Chair*]

## PRAYERS

*The Deputy Greffier*

## EVOCATION

# Billet d'État XII

## ELECTIONS AND APPOINTMENTS

### **I. Election of Members of The Ladies' College Board of Governors – Deputy Soulsby and Mr Acton re-elected**

*The States are asked:*

*(1) To re-elect Deputy H. J. R. Soulsby as a member of the Ladies' College Board of Governors, who has been nominated in that behalf by the Chairman, the two States-appointed Governors and the two Governors appointed by the States on the nomination of the Committee for Education, Sport & Culture, on the expiry of her current term of office on the 31st May 2020.*

*(2) To re-elect Mr Brian Acton as a member of the Ladies' College Board of Governors, who need not be a member of the States, on the expiry of his current term of office on 31st May 2020, in accordance with Rule 16 of The Rules of Procedure of the States of Deliberation, as set out in Section 1 of The Rules of Procedure of the States of Deliberation and their Committees.*

**The Deputy Greffier:** Billet d'État XII. Article I. The election of members of the Ladies' College Board of Governors.

**The Bailiff:** Members of the States, there are two Propositions here. The first is to re-elect Deputy Soulsby. Do I have somebody to nominate Deputy Soulsby? Was that Deputy St Pier?

**Deputy St Pier:** It was sir, yes please.

**The Bailiff:** And is that seconded?

**Deputy Le Clerc:** Yes sir, Deputy Le Clerc will second it.

**The Bailiff:** Thank you very much. This is an election to the Ladies' College Board of Governors, Members of the States, where nominations cannot be made from the floor of the Assembly and therefore I am going to put to you the Proposition to re-elect Deputy Soulsby as a member of the Ladies' College Board of Governors, who has been nominated in that behalf by the Chairman and others, to you and ask you whether you approve or not, which you are already doing.

*Members voted Pour.*

**The Bailiff:** Thank you very much, Members of the States, I am satisfied that there has been an overwhelming support for Deputy Soulsby's candidature and therefore I declare Deputy Soulsby re-elected as a member of the Ladies' College Board of Governors.

The second Proposition is to re-elect Mr Brian Acton as a member of the Ladies' College Board of Governors, is that nomination proposed by any particular Member?

**Deputy Soulsby:** Yes sir, I propose Mr Brian Acton.

**The Bailiff:** Thank you very much, Deputy Soulsby. Is that seconded?

**Deputy Le Clerc:** Yes sir, Deputy Le Clerc. I will second that.

**The Bailiff:** Now, this is an election where it is permissible for other nominations to be made. Does any Member wish to nominate somebody to stand against Mr Acton? On the basis that there are no other nominations, I will put to you the Proposition, Members of the States, to re-elect Mr Brian Acton as a member of the Ladies' College Board of Governors, as proposed by Deputy Soulsby, seconded by Deputy Le Clerc.

*Members voted Pour.*

**The Bailiff:** Members of the States, thank you very much. I am satisfied that there is, once again overwhelming support, no opposition that I can see, to that Proposition and therefore I declare that Mr Brian Acton has been re-elected as a member of the Ladies' College Board of Governors. Thank you all very much.

## Billet d'État XI

### LEGISLATION FOR APPROVAL

#### POLICY & RESOURCES COMMITTEE

##### **I. The Alderney Property Tax (Enabling Provisions) Law, 2020 – Proposition carried**

*Article I.*

*The States are asked to decide:-*

*Whether they are of the opinion to approve the draft Projet de Loi entitled "The Alderney Property Tax (Enabling Provisions) Law, 2020", and to authorise the Bailiff to present a most humble petition to Her Majesty praying for Her Royal Sanction thereto.*

40     **The Deputy Greffier:** Billet d'État XI. Article I – Policy & Resources Committee – The Alderney Property Tax (Enabling Provisions) Law, 2020.

**The Bailiff:** Members of the States, is there any debate on this particular draft *Projet*? Deputy St Pier, do you wish to say anything?

45     **Deputy Brouard:** Sir, it is Al Brouard, I am introducing it.

**The Bailiff:** Very well, Deputy Brouard then.

**Deputy Brouard:** Thank you, sir.

50     This is the overarching Law that the States approved back in 2019 and it follows a request from the States of Alderney to have greater autonomy over the taxes that they have and therefore this is just the over-arching Law, as I mentioned, and I commend it to the States.

      Thank you, sir.

55     **The Bailiff:** Does anyone wish to speak on the *Projet*, which you will find at page 3 onwards, on Billet d'État XI? Deputy Tindall.

60     **Deputy Tindall:** Yes sir. When we discussed this *Projet* at the Legislation Review Panel, I did raise the question as to why we were actually legislating for Alderney. It seemed quite bizarre when we are two completely separate jurisdictions, but it was set and therefore obviously we accept the advice that we were given in this regard. May I say, because I thought it was a worthwhile piece of information and exchange, again in my view it should have been part of a letter from the Legislation Review Panel, indicating considerations, when we have some, worthy of report. So I finish there, Thank you, sir.

65     **The Bailiff:** Alderney Representative Snowdon.

**Alderney Representative Snowdon:** Thank you, sir. I will be very brief.

*[Audio connection lost.]*

70     **The Bailiff:** Alderney Representative Snowdon, I am afraid we cannot hear you at all.

**Alderney Representative Snowdon:** Can you hear me sir?

**The Bailiff:** I heard that last little bit, but nothing else. Do you want to try again?

75     **Alderney Representative Snowdon:** Am I clear, sir? Not clear? No? Okay, do not worry, sir.

**The Bailiff:** I am sorry, Alderney Representative Snowdon, but if you are having difficulties, none of us can hear you, I do not think. Any other Member wishing to speak? Alderney Representative Roberts.

80     **Alderney Representative Roberts:** Just to say, sir, that this is a piece of legislation that Alderney welcomes and we welcome it.

85     **The Bailiff:** Thank you very much. Any other Member?  
Deputy Brouard, do you wish to reply to that very short debate at all?

**Deputy Brouard:** No sir, just to thank the people who have commented and please go to the vote. Thank you, sir.

90      **The Bailiff:** Members of the States, I will put to you the single Proposition as to whether you are minded to approve the draft *Projet de Loi*, entitled the Alderney Property Tax (Enabling Provisions) Law, 2020, and invite you to vote in the Chat column.

*Members voted Pour.*

95      **The Bailiff:** Members of the States, I am satisfied that there has been overwhelming support, once again, through the Chat column, with every vote that I have seen being a shout Pour and no one wishing to shout Contre. Therefore I declare that Proposition duly carried.

## COMMITTEE FOR HEALTH & SOCIAL CARE

### II. The Human Tissue and Transplantation (Bailiwick of Guernsey) Law, 2020 – Proposition carried

*Article II.*

*The States are asked to decide:-*

*Whether they are of the opinion to approve the draft Projet de Loi entitled "The Human Tissue and Transplantation (Bailiwick of Guernsey) Law, 2020", and to authorise the Bailiff to present a most humble petition to Her Majesty praying for Her Royal Sanction thereto.*

**The Deputy Greffier:** Article II – Committee for Health & Social Care – The Human Tissue and Transplantation (Bailiwick of Guernsey) Law.

**The Bailiff:** Deputy Soulsby, do you wish to say anything in opening on this particular *Projet*?

100

**Deputy Soulsby:** Very little, sir, other than to say ... sorry, I saw some people waving around and I thought you could not hear me and I had left my mic on mute again!

Just to say, this is legislation which follows directions of the Assembly earlier this term. Since then, Alderney and Sark have agreed that they would like to be included in this, and so they are.

105

In summary, we have moved from an opt-in to a 'soft opt-out' scheme, so organ donation will not go ahead if a family member believes that person did not want the organs donated.

110

I think it is important to point out that this will only come into effect through an enabling Ordinance and the Committee does not plan doing that until there has been a real ramp-up in terms of a local awareness campaign, to give Islanders the information and time they need to make a decision as to whether they want to be a donor or not.

I think it is important that at the moment it will not be in the immediate future, certainly the NHS Blood and Transplant Service is currently providing a reduced service at the moment, so we will be waiting until further down, probably later this year.

115

**The Bailiff:** Deputy Inder.

120      **Deputy Inder:** Briefly sir, I will not be supporting this for the reasons I laid out in the original debate and I think it has got significantly worse. Without wanting to open debate again, I am not of the view that silent consent is consent. Secondly sir, if I look at the legislation itself, and I am not an expert in this area, if I look at page 10, 'conditions for removal of human tissue from deceased persons', it says, under 3(b):



... an authorised person has issued a certificate to the effect that the person is of the opinion that there is express consent or deemed consent for the removal of that human tissue for the activity or purpose concerned.

There is nothing here that shows me how anyone is protected. If we move onto 'deemed consent for adults', on page 14, 7.1 (c):

... a decision of the adult not to consent to transplantation activity is in effect ...

125 Well, where is that? Where is the database? When we had this debate a couple of years ago, I think we were pointed towards an NHS database. I am not an expert in ... well I am, actually ... I am not much of an expert in where data is held more than that but I have not seen anything in this at all, or since that debate, where I am convinced that data will be held in Guernsey, whether it is a Guernsey database or whether we are going to be told basically, log onto a foreign country's database and put your name in there if you do not want it, or if you do want it.

130 So, for all of those reasons, sir, I will not be supporting this. There is no such thing as silent consent. None whatsoever.

Thank you.

135 **The Bailiff:** Deputy Stephens, to be followed by Deputy Dudley-Owen and then Deputy Paint. Deputy Stephens.

**Deputy Stephens:** Thank you.

140 I accept that the legislation reflects accurately the Resolution of the Assembly but, like Deputy Inder, I have got a particular interest in Part III, section 7, and I want to comment on practical issues related to opt-out and deemed consent, which will be important to some members of the community as this legislation is enacted and may well require close attention when the Committee make regulations to regulate the issue of a certificate to the effect that there is deemed consent from an individual.

145 As the introduction of opt-out is a Resolution of the States' Assembly, I suggest that all Members share in the responsibility with HSC towards those people, firstly, who need transplants; secondly, those who are willing donors, but also to those who have a real concern that their organs could be taken because they have been unable to register their desire to opt out and this, as I have said before, will be relevant to the regulations and the issue of the certification.

150 I am aware that, since the policy debate, an admittedly premature attempt has been made to access information from local GP practices, also to register with the UK Registry, who it is reported refused access because they would not recognise a Guernsey postcode, offered by a member of the public anxious to opt out.

155 On 3rd April this year, I shared this information with Deputy Soulsby and I agree with her that there are a range of options for people to make their wishes known. HSC identify that the most important message to give the public is that people should discuss their wishes with the family. But, of course, some people will have no close family. Some people will not wish to have this conversation.

160 There are other safeguards offered. One being to make a will. Because some people will not do that and I am also unsure of the practical implications of accessing information from a will at the point when a clinician might wish to remove organs. It seems to me that, for those wishing to register their opt-out decision entirely independently, it is important that they know how to do this and also that the system is tested and demonstrated to work by HSC, otherwise the issue over a certificate might be unintentionally be done erroneously. So I shared this view with Deputy Soulsby and, at the time, this is what I wrote to her:

It is unreasonable to leave those people who are wishing to opt out in the position where they cannot, with ease, manage the opt-out process, because of any failure to ensure that the process is available, it is reliable and it is uncomplicated. I am sure that this is HSC's intent, but in shifting the responsibility of opt-in to opt-out to the individual, it is important

that the practice of opt-out is tested for efficiency and demonstrated to be effective before or as it is required and that the testing of the process is repeated and that testing is regular and effective.

165 So, I do ask Deputy Soulsby, although she has referred to this in her introduction, to actually, perhaps, give more reassurance on this matter as she sums up.  
Thank you, sir.

**The Bailiff:** Deputy Dudley-Owen.

170

**Deputy Dudley-Owen:** Thank you, sir.

I too am speaking this morning against this *Projet de Loi*. I spoke against this in the original debate and I feel deeply concerned about the adoption of the principle of deemed consent and the ethics surrounding that. We often focus on the potential benefit that this particular type of  
175 legislation brings us, which it really undoubtedly does, but the adoption of deemed consent, when we did not need to, really raises deep concerns and I know it does for other Members of the Assembly, who spoke also against this in the original debate.

Deputy Stephens has brought out some very valid concerns, which I have also raised when I was reading the draft legislation in our Billet. I think I would have liked to have seen more information  
180 forthcoming about the code of practice. I realise we would not have done that in this particular context but there could have been some extra communications from Health & Social Care about the code of practice and how they envisage putting the regulations in.

In addition to that, in the original debate, I did mention raising awareness around this subject and an educational piece and a communications piece that would have gone out to the Island, to  
185 talk about the benefits of organ donation so that members of the community knew exactly how they could go about opting in or opting out and that does not seem to have transpired at all and I think that should have gone hand in hand with this before the legislation came to us so people had more awareness, for exactly the reasons that Deputy Stephens was talking about.

There are going to be people, undoubtedly, and it is not just going to be a handful, that do fall  
190 through the cracks with this particular type of legislation, who will not have given their explicit consent and who will not have opted out, who could end up becoming donors unwittingly, who probably would not have wanted to and I think we need to be very mindful of those people and make a very big, concerted effort to ensure that people are aware of how they can opt out and really iron out the issues before, once we approve this Law today, this *Projet de Loi*, it is going to be  
195 too late and I regret that we have come to this situation.

We should have done a communications piece seemingly beforehand but maybe the President, in her summing-up can seek to persuade me that that has been done but, on the basis of the deemed consent principle, I will not be able to give this my support today.

Thank you, sir.

200

**The Bailiff:** So it is going to be Deputy Paint next, to be followed by Deputy de Lisle and then Deputy Gollop. Deputy Paint please.

**Deputy Paint:** Thank you, sir.

205 I am in exactly the same position as Deputy Stephens and Deputy Inder. I do not think this has been done properly. I will not be able to vote for it. I have had unfortunate things in my life where, if I could have, I would have given my life, in fact, to somebody that was dying and I could not do it, obviously. But I think people have not had a proper explanation, how, or what or who they could give their organs to, so I just cannot go for it at the moment.

210 Thank you, sir.

**The Bailiff:** Deputy de Lisle.

**Deputy de Lisle:** Thank you, sir.

215 I will not be supporting this either. One should not have to opt out, sir, only to opt in, as far as I am concerned. This is very controversial legislation and needs the President of Health to really explain what it is all about to the public, given this opportunity. This must surely contravene human rights or is it that all human rights are lost on death?

Thank you, sir.

220 **The Bailiff:** I am going to call Deputy Gollop next, to be followed by Deputy Tindall and then Deputy Green. So Deputy Gollop, please.

**Deputy Gollop:** Thank you, sir.

225 I am sure this legislation has been through the usual legislative process of the Committee. I sit on the Committee, I think I could not attend this particular meeting, but nevertheless it has been considered in the normal way. I understand many of the objections, I think, that have been raised by people who have a variety of human concerns, philosophical concerns, maybe even religious concerns, and I do remember some rather heated, at least one heated email on this subject a number of moons ago, which was from a person who felt passionately concerned about the issues.

230 I think maybe this is where we need to develop in time our scrutiny and second and third readings of legislation. Because, clearly the principle of this is broadly accepted by the majority but maybe the actual detail and the implementation had not been and this, perhaps, is an example where a public select committee hearing in different times, where the President of Health & Social Care, legal experts and medical experts, would put across a message, which in turn would lead to improved communication. Maybe Deputy Tindall and Deputy Green will follow up on that.

235 But my main reason for wanting to speak is to give a bit of balance. I heard a very interesting radio discussion during the lockdown of policy analysts who have worked in social psychology and had actually been at the sharp end of policy development in the Downing Street administrations of Mr Gordon Brown and Mr David Cameron. They were very much keen on so-called nudge theory.

240 It may be paternalistic, you could almost define it as maternalistic, but it is very much a form in which public policy is developed to encourage positive outcomes and this kind of Law will save lives. It will improve treatments. It will deliver success in operations and maybe a complete rejuvenation for people who otherwise would not get it.

245 So, whilst I respect people's concerns and ownership of their body, I think we have to see the wider good. If there is anything that has come out of this unfortunate last two-month period, which is not over yet, it has been that politicians and Government and health experts have had to make harsh decisions, which occasionally go against economic rights and human rights, in the interests of the wider public good.

250 Now how far you take that is of course a huge political and legal debate but I think, in this instance, bearing in mind the States have already looked at this once, we should approve the legislation today and maybe then look at how communication and details could be further improved and developed and evolved. Thanking you.

255 **The Bailiff:** Deputy Langlois, is it your wish to be relevé?

**Deputy Langlois:** Yes, that is my request please.

**The Bailiff:** Then we will mark you as present. Thank you very much, Deputy Langlois.

260 **Deputy Langlois:** Thank you. Apologies.

**The Bailiff:** Deputy Tindall.

265 **Deputy Tindall:** Thank you, sir.

Obviously, I am going to support this legislation. It is of course the second debate on the issue but, like Deputy Gollop, I would like to add another point of view to this emotive subject, to be fair. The important aspect for me is in relation to those who will benefit from this particular legislation.

270 On 20th May, only a few days ago although it feels like an aeon after the debates we have had, the Max and Keira's Law came into force in England, which was basically as a result of two young children, one of course who passed away, and one who benefited from her organs. There were many illustrations of the benefit of such an opt-out law and the people whose lives were transformed as a result of the thoughtful approach families had taken.

275 Because of course it is a family decision. Yes, there will be occasions where there are few people – because of course there are very few who will be affected by this in any event because very few deaths are of such a nature that will enable transplantation – but there will be the few who have not got a family, either around, alive or available and there are safeguards within this. As Deputy Soulsby said, there will be full publicity on all the mechanisms of how this will work and of course it will be a while before it comes in and therefore the full publicity will have plenty of opportunity for  
280 discussion and confirmation that the opt-out will be effective.

I would just add one point about saying it through a will that Deputy Stephens said. Certainly, when I was responsible for holding thousands of wills, we were very rarely contacted within the first seven days of someone's death and for me I certainly would not rely on that as a means of communication. Best to go through the registered doctor.

285 Just lastly, a small point that was raised by Deputy Inder. When I say small, it is actually very important. He said there is no such thing as informed consent. There is informed consent and deemed consent as Deputy Stephens said and, whilst I was listening to speakers, I was trying to ascertain the voting on the Data Protection Law –

290 **The Bailiff:** Deputy Tindall, Deputy Inder wishes to raise a point of correction. Deputy Inder.

**Deputy Inder:** Just briefly. What I said was there is no such thing as silent consent. Thank you.

295 **The Bailiff:** Thank you, Deputy Inder, yes. Deputy Tindall to continue please.

**Deputy Tindall:** I apologise, I used the word informed consent, which of course is the legal term, and silent consent, which is the phrase that Deputy Inder used in his speech and I apologise. I took silent consent as deemed consent, which is what Deputy Stephens used and what we use generally in this scenario, because if you are silent and there is the necessary legislation or cut in law, etc. you  
300 are deemed to have consented by your silence and hence the reason I used the phrase deemed consent instead of silent consent.

But, in any event, the informed consent and deemed consent approach was taken in the Data Protection Law. But, unfortunately, in the time given, I have not been able to ascertain Deputy Inder, how he voted in that respect, but it was considered and it is part of legislation and other examples  
305 of it.

Naturally, this is a very much more important act that someone is doing. They are doing it during their lifetime, but of course the act takes place after their death, with as many safeguards as will be necessary because, obviously, we want to ensure that the wishes of the deceased are followed, as we do when we try and arrange funeral and cremation activities for the family, because it is the  
310 family who are the ones who will be there and be seeing what is happening.

It is also the family of those who receive a transplant that also will, if they do not get such a transplant for the family, will see that individual's death. It is for the lives of those who will live that I feel this is an extremely important Law and I hope that others will support it.

315 Thank you, sir.

**The Bailiff:** Deputy Green.

**Deputy Green:** Mr Bailiff, thank you very much.

320 I am glad that there is a debate on this draft legislation. This is not the kind of thing that should go through on the nod. When you think of the number of hours that we spent yesterday going around in circles and not really achieving a great deal, I think it is much more important to be having a proper debate on issues like this, which are incredibly emotive, incredibly important ethical issues.

325 I wanted to respond as Chairman of the Legislation Review Panel because there was a comment earlier on by a speaker who seemed to be saying that this legislation had not been done in the proper way, or something along those lines. I just wanted to say, sir, that the draft legislation was considered at fairly great length by the Panel, in the normal way, by the Legislation Review Panel. It is the case that the Resolutions of the States are reflected accurately in this draft legislation, as far as my committee is concerned. We have looked at this legislation in the context of the mandate that we have.

330 I thought Deputy Gollop made some very interesting points before and it is probably a convenient time to place on *Hansard*, sir, that my committee, or rather the Scrutiny Management Committee, in concert with the Legislation Review Panel, is actively looking at doing a review of how legislative scrutiny actually operates in Guernsey, because I think there are improvements that we can make. So, I think the comments of Deputy Gollop, generally, were valid, and we are looking 335 to take that forward, together with the Legislation Review Panel as soon as we can.

This is a very emotive and difficult subject. I respect, fully, those who, for ethical and philosophical reasons, reasons of conscience really, who take a different view on this and who will vote against this, but I will support this legislation because I think in the end there is an obvious public good and I thought Deputy Tindall spoke to that quite powerfully just a moment ago.

340 I take the view now as I took the view when we discussed the policy letter, that ultimately the end does justify the means in this context and I will be supporting this legislation. But in terms of the process of how we got here, my panel, the Legislation Review Panel, has conducted its mandate on this and the Resolutions of the States, which the States passed itself, are reflected accurately in this draft legislation.

345

**The Bailiff:** Alderney Representative Roberts, to be followed by Deputy Roffey.

**Alderney Representative Roberts:** Thank you, sir.

350 I am not going to get into a debate about the terminology of deemed consent or silent consent, because I will be challenged. You can see the problems that are really involved with individual cases, where no direction was placed, or the family object. If there is no family, then surely it is up to medical or social bodies to advise those lone individuals to advance or deny donorship?

355 In 2009, my own wife Anna died, needing a lung transplant. Had more organs been available she may be here today. We are losing children due to the shortage of organs on a regular basis. Deputy Gollop touched on some very good points indeed and perhaps balance is needed for the living, as well as those less fortunate people at that time in their lives. More people will ...

*[Audio connection lost.]*

... and it is difficult subject to deal with. I will be supporting this.

**The Bailiff:** Deputy Roffey, to be followed by Deputy Hansmann Rouxel. Deputy Roffey.

360

**Deputy Roffey:** I also, sir, will be strongly supporting this. In fact, I do not think it goes quite far enough. I object to the fact that, if an individual wishes to leave their organs, I understand why but the fact that basically if their family object after their death and say, 'I do not think that is what they really wanted to do,' they can be overruled by their surviving family. If somebody takes a conscious 365 decision they should be able to leave their organs come what may.

Maybe our system of Government will change but at the moment we do have a system whereby we basically have the substantive debate at the policy letter stage and as long as the legislation accurately reflects those decisions that have been taken at that time, then we go along with it, unless the facts have changed somehow in between.

370 So, I understand people who are saying this has not been given a huge amount of public outing and there has not been a huge amount of debate at this stage, but that was all done at the time when we decided – and I respect all of those that are objecting today objected then, so I do not expect them to have changed their minds and to vote in favour – but I think it is a little unfair to say that this is sort of being slipped through without being highlighted properly, because that was done  
375 when we took the decision.

Like Deputy Barry Paint, I too had an occasion where I would have happily given my life for a younger member of my family, because it seems perverse when somebody further down the generations dies before you. But unlike him, I come to a conclusion about that. I am aware that there are many young people around the British Isles and occasionally in Guernsey as well that are  
380 dying through lack of organs being available for transplant. Actually, when the research is done, in the large number of cases people would have been willing to have donated their organs, they have just never got around to taking the positive action to do it.

I completely respect those, I do not understand it, but I respect they have a different philosophy from me that they would never want to donate their organs after they have died. This legislation  
385 will allow them to safeguard their position absolutely, by opting out of that situation. But when it comes down to it, we are talking about lives here. Very often young lives, not always young lives, but very often young lives that are being lost and lost unnecessarily, the grief that causes to their families and/or their surviving friends and relatives.

I think this is an overwhelmingly good piece of legislation. I wish we had brought it in years ago.  
390 I am delighted that HSC are bringing it forward today and, on the balance of good concern, I think we will be foolish not to pass it. I strongly recommend it and I will be voting in favour of it.

**The Bailiff:** Deputy Hansmann Rouxel.

395 **Deputy Hansmann Rouxel:** Thank you, sir. Like Deputy Roffey, I will try and be brief.

I would not go as far as to say that I do not think the legislation goes far enough, I think it does try to strike what is a very awkward balance and I think that it is a difficult balance to strike and it is reflected in the emotive responses to this legislation so far in debate.

One thing I just wanted to pick up on is during the original debate, which I do remember at the time from some of the comments that came through from a particular member of the public, who was not particularly nice about the Members who had voted for the legislation, and particularly singled out myself and my mental health and told me to shove it somewhere, so I do remember the debate. At the time, I felt the policy letter outline the balance that it wished to try and strike, which is finding the capacity to allow those who would have donated their organs, to capture all of those  
400 individuals but still allow those who objected to be safe in the knowledge.

I think what is being expressed by those who object to this is they do not feel that those individuals, who would object, can feel safe yet. I think that is the piece of work and, as Deputy Soulsby mentioned right at the beginning, there is still another step to this and that is the enabling Ordinance and it is unfortunate that it has come at this time, that we are agreeing the legislation  
410 now. I have no problem with agreeing the legislation now but I do think that HSC does – and there is no indication that HSC is not going to do this – but that piece of work does need to be quite robust.

I think it is right that HSC have decided, well not decided, but the process will enable them to do it at a point where all of those ducks are in a row and we are actually able to express that and explain that to those individuals who have that concern, and make it as easy as possible for them  
415 to feel secure in the knowledge that their wishes will be known.

The last thing is those individuals who feel that way but might not be captured by the information, I think Deputy Stephens brought this up. For me, when looking at the legislation, in the controversial part, which is under the deemed consent, it is under 7(e), where we are going through the list of different reasons why tissues, when there would not be deemed consent and (e) for me is all important because ...

... (e) the adult would not have consented to the transplantation activity ...

Now that is quite broad and that, I do think, allows any interpretation or, if there is a hint that the person would not have, that does allow for the protection that people are seeking, that it is not just open season. There is the possibility, and I appreciate it will not give comfort to those who feel very strongly against it, but I think the broadness of (e) does allow for interpretation, which would cover, as far as possible, all those eventualities.

So, for me, (e) has given me a little bit more assurance that I did not have when we were discussing the policy letter. That was my major concern, how would you know that that individual would not consent and, if there was a hint of that amongst the family, that they would not have consented then that is the right of those individuals who survive the member of their family, or whatever relationship they have with the individual. It is not an easy decision but I think that we have struck the right balance with this and I will be voting for it.

**The Bailiff:** Deputy Laurie Queripel.

**Deputy Laurie Queripel:** Thank you for calling me, sir. We have heard some really good speeches in support of this legislation. Deputy Gollop, Deputy Tindall and Deputy Roffey have clearly conveyed the benefits of transplants and of course you cannot have transplants without organ donation.

One accepts all of that. But it seems to me there has been some talk about this being an emotive or an emotional issue. I think we need to, just for a second, take the emotion out of this matter, because it is more basic, it is more fundamental than that, in regard to what some Members are talking about in regard to objecting to this legislation.

This is simply about the right of a person, in the first person, to say 'no' clearly and explicitly or 'yes' clearly and explicitly. I think actually it would have been far better for HSC and the States generally to embark on an effective, high-profile publicity campaign in regard to encouraging people to opt-in and to make that very clear that that process is available.

My concern about the opt-out process, I have got many concerns about it, one of my concerns is it has not been made clear to the public yet. The States are going to pass this legislation but it has not been made clear yet to people who wish to opt-out how they can do that.

Deputy Soulsby says that information is imminent, that campaign is going to be run. It needs to be a very simple and accessible in all formats campaign. I know of people who would like to opt-out but, for example, they do not have access to online facilities. So those people need to know clearly how they can opt-out without having to go online. It has to be very accessible and very simple.

Now, sir, for me the other thing that I am struggling with is the fact that this seems to kick against the times that we live in, when the need for express or explicit consent is increasingly becoming the norm, the main principle, the standard in policy, law, across society and every area of life, it seems.

So I view this move towards deemed consent in this case as, to put it mildly, a sort of anomaly, really, accommodating and facilitating in law of deemed consent when, in every other way, we seem to be moving towards express or explicit consent. So this is my quandary. Of course I can see the benefits, as put forward by or expressed by Deputy Roffey and others, but I think actually moving towards deemed consent kicks against the times that we live in.

So, I am going to struggle, sir, to support this, because of the deemed consent. The opt-out rather than the opt-in options. Because the fact is, when you have opt-in, it is by and large a simple

process. When you have opt-out, it is potentially a complex one and that is what we are hearing about this morning: the complexities, the grey areas, regardless of the safeguards that are in legislation, the grey areas around opt-out, sir. So, much as I can see the benefits of what is being put forward here, I am probably going to have to vote against this legislation for those reasons. Thank you.

**The Bailiff:** Members of the States, if there is no one else ... Deputy Mooney.

**Deputy Mooney:** Yes sir and thank you.

My belief is that the change in the Law is open to abuse, with the possibility of death being hastened to secure an organ for another patient and, for me, it needs to be very clear as to how one can opt out and I will not be supporting this.

Thank you.

**The Bailiff:** Members of the States, on the basis that no one else seems to want to speak in debate, although I am pausing very briefly, there is nobody else that is indicating a wish to speak, I will turn to the President of the Committee for Health & Social Care, Deputy Soulsby, to reply to the debate.

**Deputy Soulsby:** Thank you, sir.

There were some interesting speeches that really seemed to not get the point of what we are putting forward here today. As I said in my opening speech, this is the legislation and it follows the Resolutions of the States. We have had Deputies Laurie Queripel, Inder and de Lisle all talk about the benefits and the rights and wrongs of opt-in and opt-out schemes, we had that debate when we were debating the policy letter. The policy letter passed, the Resolutions were approved and the legislation, as Deputy Green pointed out, and I am grateful for him for doing so, the legislation reflects a Resolution of the States.

So that is what we have done today. We have in front of us, a piece of legislation, which brings forward the actual Resolutions of the States when we last debated it. Nothing else. As I said in my opening speech, this will not come into effect until there is an enabling Ordinance. Now that enabling Ordinance in turn will have to come to the States.

So anybody who has an objection to what we have done or what we have not done, in terms of the developments of codes of practice, guidelines, comprehensive public awareness and information programmes, that is the opportunity to have the debate and say I am not happy, I have not seen an proper codes of practice for clinicians, the public do not know what the heck is going on, I do not know how to register, it is not fair for this person who has got special needs, who cannot access online. That is the time to have that debate.

We have not produced all that yet because, well, there have been other things going on. But, and as I said in my opening speech, we have no intention of moving this forward, bringing an enabling Ordinance to the States until such time as we have done all that that people have been getting their knickers in a twist over.

Deputy Inder talked about there is no such thing as silent consent. I do not know, silent consent does not enter into the legislation. It is deemed consent and deemed consent is defined within the legislation. I am just trying to think, Deputy de Lisle questions whether it is human rights compliant – well that work was already done and discussed as part of the policy letter debate and, if it is not, then I will be surprised if it is not, but Jersey, Wales, Scotland and now England are following on the opt-out scheme.

I am trying to think about any other comments. I thank Deputy Roffey. Yes, this is long overdue and to Deputy Hansmann Rouxel, hopefully I have made clear in terms of making sure the information will be clear for the public. That is what we commit to do. There is no way we want to force people into this and want to make the public be able to be empowered to make the decisions that they want to do and that is at the heart of what we want for a new model of health and care



520 and that will be the same for this as it is for this, but for the whole system and, on that basis sir, I ask people to support this legislation.

525 **The Bailiff:** Members of the States, we now go to the vote on the single Proposition as to whether or not you are minded to approve the draft *Projet de Loi*, entitled the Human Tissue and Transplantation (Bailiwick of Guernsey) Law, 2020. There has been a request for a recorded vote and therefore I will ask the Greffier to call that.

*There was a recorded vote.*

*Not carried – Pour 25, Contre 14, Ne vote pas 0, Absent 0*

POUR	CONTRE	NE VOTE PAS	ABSENT
Deputy Tindall	Deputy Ferbrache	None	None
Deputy Brehaut	Deputy Lester Queripel		
Deputy Tooley	Deputy Leadbeater		
Deputy Gollop	Deputy Mooney		
Deputy Parkinson	Deputy Le Pelley		
Deputy Le Clerc	Deputy Stephens		
Deputy Trott	Deputy Meerveld		
Deputy Merrett	Deputy Inder		
Deputy St Pier	Deputy Laurie Queripel		
Deputy Fallaize	Deputy Smithies		
Deputy Lowe	Deputy Graham		
Deputy Hansmann Rouxel	Deputy Paint		
Deputy Green	Deputy Dudley-Owen		
Deputy Dorey	Deputy de Lisle		
Deputy Le Tocq			
Deputy Brouard			
Deputy McSwiggan			
Deputy Langlois			
Deputy Soulsby			
Deputy de Sausmarez			
Deputy Roffey			
Deputy Prow			
Deputy Oliver			
Alderney Rep. Roberts			
Alderney Rep. Snowdon			

**The Bailiff:** Members of the States, the voting on the Proposition as to whether to approve this draft *Projet* was as follows. There voted Pour, 25, Contre 14 and therefore I declare the Proposition duly carried.

**COMMITTEE FOR HOME AFFAIRS**

**III. The Population Management (Guernsey) (Amendment) Law, 2019  
(Commencement) Ordinance, 2020 –  
Proposition carried as amended**

*Article III.*

*The States are asked to decide:-*

*Whether they are of the opinion to approve the draft Ordinance entitled "The Population Management (Guernsey) (Amendment) Law, 2019 (Commencement) Ordinance, 2020", and to direct that the same shall have effect as an Ordinance of the States.*

**The Deputy Greffier:** Article II – Committee for Home Affairs – the Population Management (Guernsey) (Amendment) Law, 2019 (Commencement) Ordinance.

**The Bailiff:** And I invite the President of the Committee for Home Affairs, Deputy Lowe, to open debate if she wishes to and, if not, to move the amendment to this draft Ordinance.  
Deputy Lowe.

[Amendment](#)

*In section 1 of the draft Ordinance entitled "The Population Management (Guernsey) (Amendment) Law, 2019 (Commencement) Ordinance, 2020" (Article III of Billet d'État No. XI of 2020), for "6th May, 2020" substitute "22nd May, 2020".*

**Deputy Lowe:** Thank you, sir.

Yes, the only reason I need to open it is I actually have a draft Ordinance, which is about changing the date, but it is pretty straight forward what Members have before them and, with your permission sir, I place the amendment, which will be seconded by my Vice-President, to change the date because of what is in the Ordinance, which was sent before the Greffier at the time but, since then we have changed the dates of States' Meetings. So, with permission of the States, their approval of the amendment, I ask Members to support the amendment and the Ordinance sir.  
Thank you.

**The Bailiff:** Deputy Leadbeater, do you formally second the amendment?

**Deputy Leadbeater:** I do, sir.

**The Bailiff:** Members, is there any need to debate the change of date? It is because of moving the business. I do not see anyone doing that, so I will put to you the amendment, proposed by Deputy Lowe, seconded by Deputy Leadbeater, to change the date of commencement from 6th May to 22nd May.

*Members voted Pour.*

**The Bailiff:** Thank you very much, Members of the States. The amendment has been carried and therefore I declare the amendment has been approved, with a number of votes Pour and I did not see anyone voting against.

Now, Members of the States, does anyone wish to debate the commencement Ordinance, as amended? In which case, I will put to you the single Proposition as to whether or not you are minded to approve the draft Ordinance entitled the Population Management (Guernsey) (Amendment) Law, 2019 (Commencement) Ordinance, 2020, which is due to commence today if approved.

*Members voted Pour.*

**The Bailiff:** Thank you very much, Members of the States. Once again there was an overwhelming shout for Pour. I did not see anyone shouting Contre and therefore I declare the commencement Ordinance duly approved and the Proposition carried.

## **POLICY & RESOURCES COMMITTEE**

### **IV. The Machinery of Government (Transfer of Functions) Ordinance, 2020 – Proposition carried as amended**

*Article IV.*

*The States are asked to decide:-*

*Whether they are of the opinion to approve the draft Ordinance entitled "The Machinery of Government (Transfer of Functions) Ordinance, 2020", and to direct that the same shall have effect as an Ordinance of the States.*

**The Deputy Greffier:** Article IV – Policy & Resources Committee – the Machinery of Government (Transfer of Functions) Ordinance, 2020.

**The Bailiff:** I invite the Member of the Committee, Deputy Le Tocq, either to open debate on the Ordinance or, if you prefer, simply to place the amendment that you have.

#### [Amendment](#)

*In section 9 of the draft Ordinance entitled "The Machinery of Government (Transfer of Functions) Ordinance, 2020" (Article IV of Billet d'État No. XI of 2020), for "11th May, 2020" substitute "1st June, 2020".*

**Deputy Le Tocq:** Yes, sir, I will place the amendment and just briefly address both. Obviously, the amendment deals with a timing issue similar to the one that we have just approved for Home Affairs, and it refers to the Ordinance, which is a transfer of the functions for health benefits and travel allowances associated with that from the Committee for Employment & Social Security to HSC, so I so move sir.

**The Bailiff:** Deputy Trott, do you formally second the amendment?

**Deputy Trott:** With pleasure, sir, yes I do.

**The Bailiff:** Does anyone wish to debate the amendment first? If not, Members of the States, I will put to you the amendment proposed by Deputy Le Tocq, seconded by Deputy Trott, which has the effect of changing the commencement date of the Transfer of Functions Ordinance from 11th May 2020, which was originally envisaged, to 1st June.

*Members voted Pour.*

**The Bailiff:** Once again, thank you very much, Members of the States. I am satisfied that there was support through the number of people shouting Pour, I did not hear anyone shouting Contre, for me to declare that the amendment has been duly carried. Is there any Member who wishes to speak about the draft Ordinance as now amended? No, very well. Thank you, Members of the States.

585 I will therefore put to you the Proposition as to whether or not you are minded to approve the draft Ordinance entitled the Machinery of Government (Transfer of Functions) Ordinance, 2020, as amended by the amendment you have just carried.

*Members voted Pour.*

**The Bailiff:** Once again, thank you very much, Members of the States. There was a good loud shout for Pour. There was a little bit of a shout, but not much of a shout, for Contre, as a result of which I declare that the draft Ordinance as amended is duly carried.

590

## STATES' TRADING SUPERVISORY BOARD

### V. The Pilotage (Amendment) Ordinance, 2020 – Proposition carried as amended

*Article V.*

*The States are asked to decide:-*

*Whether they are of the opinion to approve the draft Ordinance entitled "The Pilotage (Amendment) Ordinance, 2020", and to direct that the same shall have effect as an Ordinance of the States.*

**The Deputy Greffier:** Article V – States' Trading Supervisory Board – the Pilotage (Amendment) Ordinance, 2020.

**The Bailiff:** I invite the President of the Board, Deputy Ferbrache, to open debate on the item if he wishes, or if he prefers can we deal with the two amendments, one after the other, please, Deputy Ferbrache, so if you want to place the first amendment first, that would be helpful.

595

#### [Amendment 1](#)

*In section 3 of the draft Ordinance entitled "The Pilotage (Amendment) Ordinance, 2020" (Article V of Billet d'État No. XI of 2020), for "6th May 2020" substitute "22nd May 2020".*

**Deputy Ferbrache:** Thank you, sir. It will be seconded by Deputy Smithies and again, sir, it really relates to the dates, and I have got nothing further to say.

600

**The Bailiff:** We will deal with the amendments, first, Members of the States, so Deputy Smithies do you formally second Amendment 1, which is to substitute the date of commencement?

**Deputy Smithies:** I do sir.

**The Bailiff:** Does anyone wish to say anything about the first amendment? In that case, I will put to you the amendment, proposed by Deputy Ferbrache, seconded by Deputy Smithies, which has the effect of substituting the commencement date from 6th May, in the past, to 22nd May, today.

605

*Members voted Pour.*

610 **The Bailiff:** Thank you very much, Members of the States. I am satisfied that there has been sufficient support and have not seen any opposition in respect of Amendment 1. Therefore I declare Amendment 1 duly carried.

Deputy Ferbrache, you have, first of all a motion, under article 7(1) of the Reform (Guernsey) Law, 1948, to propose to suspend Rule 24(1). Do you wish me to put that motion to the Members of the States, and that is seconded by Deputy Smithies?

[Motion under Article 7\(1\) of the Reform \(Guernsey\) Law, 1948](#)

*To suspend Rule 24(1) of the Rules of Procedure of the States of Deliberation and their Committees, as modified by the Rules of Procedure of Remote Meetings of the States of Deliberation, to the extent necessary to permit the amendment set out below to be debated.*

615 **Deputy Ferbrache:** It is, indeed, sir, I would be grateful.

**The Bailiff:** Thank you very much. Deputy Smithies, do you formally second the motion?

620 **Deputy Smithies:** I do, sir.

**The Bailiff:** Members of the States, this motion is necessary because of the timing of Amendment 2, which is another rather technical one. Are you minded to approve the motion, so that Amendment 2 can then be placed?

*Members voted Pour.*

625 **The Bailiff:** Thank you very much, Members of the States. I am satisfied that there was support for the motion under Article 7(1), enabling Amendment 2 to be placed and therefore the motion is duly carried and I invite Deputy Ferbrache, as the proposer of Amendment 2, to place that amendment now.

[Amendment 2](#)

*In section 1(6) of the draft Ordinance entitled "The Pilotage (Amendment) Ordinance, 2020" (Article V of Billet d'État No. XI of 2020), for "the Maritime and Coastal Agency" substitute "the Maritime and Coastguard Agency".*

630 **Deputy Ferbrache:** Thank you, sir. I so do and it is self-explanatory sir and it will be seconded by Deputy Smithies.

**The Bailiff:** Thank you very much. Deputy Smithies, do you formally second the amendment?

**Deputy Smithies:** I do, sir.

635 **The Bailiff:** Thank you very much. Is there anyone who wishes to speak on Amendment 2? Very well. In that case, I will put to you, Members of the States, Amendment 2, proposed by Deputy Ferbrache, seconded by Deputy Smithies, which has the effect of correcting one word in the name of the Maritime and Coastguard Agency. Those in favour and those against in the Chat function, please.

*Members voted Pour.*

640 **The Bailiff:** Thank you very much, Members of the States. I am satisfied that, once again, there has been a good, loud shout of support of Pour. I did not see anyone who wanted to say Contre and therefore I will declare Amendment 2 also duly carried.

Does any Member wish to speak on the draft Ordinance, as now amended by those two amendments? No. Therefore on that basis I will put to you, Members of the States, the single Proposition as to whether you are minded to approve the draft Ordinance, entitled the Pilotage (Amendment) Ordinance, 2020, as amended by the two amendments and invite you to vote in the Chat function, as you are already doing.

*Members voted Pour.*

**The Bailiff:** Once again, thank you very much, Members of the States. I am satisfied that there was overwhelming support, with the number of Members voting Pour. I did not spot anyone who wished to vote Contre and therefore I declare the Proposition duly carried and the Ordinance as amended approved.

## POLICY & RESOURCES COMMITTEE

### VII. The Taxation of Real Property (Guernsey and Alderney) (Amendment) Ordinance, 2020 – Proposition carried as amended

*Article VII.*

*The States are asked to decide:*

*Whether they are of the opinion to approve the draft Ordinance entitled "The Taxation of Real Property (Guernsey and Alderney) (Amendment) Ordinance, 2020", and to direct that the same shall have effect as an Ordinance of the States.*

**The Deputy Greffier:** Policy & Resources Committee – the Taxation of Real Property (Guernsey and Alderney) (Amendment) Ordinance, 2020.

**The Bailiff:** I invite Deputy Le Tocq, a Member of the Policy & Resources Committee, to open debate on this matter.

**Deputy Le Tocq:** Thank you, sir. It is very similar to the issue before. Sorry, sir, my screen has frozen, can you still hear me?

**The Bailiff:** I can hear you and I can see you as well, Deputy Le Tocq.

**Deputy Le Tocq:** Okay. Thank you, sir, I have nothing else to add. Thank you.

#### Amendment

*In section 22 of the draft Ordinance entitled "The Taxation of Real Property (Guernsey and Alderney) (Amendment) Ordinance, 2020" (Article VII of Billet d'État No. XI of 2020), for "6th May, 2020" substitute "22nd May, 2020".*

**The Bailiff:** Do you want to move an amendment?

**Deputy Le Tocq:** Oh sorry, yes I have to do that! So, I move the amendment for the same reasons before. That is where I was. So, the timing issue, we have had to lay this amendment, so please, sir, can I lay that?

**The Bailiff:** That amendment is to be seconded by Deputy Trott. Do you formally second the amendment, Deputy Trott?

**Deputy Trott:** I do, sir, thank you.

675

**The Bailiff:** Does anyone wish to speak on the amendment? If nobody wishes to speak on the amendment, then I will put to Members the amendment, proposed by Deputy Le Tocq, seconded by Deputy Trott, which is another one of those, as a consequence of moving this item of business, so that the commencement date will move from 6th May to 22nd May, namely today.

*Members voted Pour.*

680

**The Bailiff:** Thank you very much indeed, Members of the States, I am satisfied that once again there was overwhelming support through the number of Members voting Pour. I did not spot anyone who voted against and therefore the amendment to change the date, proposed by Deputy Le Tocq, seconded by Deputy Trott is declared duly carried.

685

Now who wishes to speak in debate on this? I have got a request from Deputy Gollop to speak, so I will call Deputy Gollop.

**Deputy Gollop:** Thank you very much sir.

690

I support the Amendment Ordinance as far as it goes but, just as earlier today we transferred to the parliament, the Assembly, in Alderney, difficult decisions on raising revenue there, especially in this particular year, for their own tax on rateable property Law, here I think we see some changes. For example:

Where a building has a mezzanine floor, each square metre of the plan area of that floor is an assessable unit, in addition to the measurement of assessable units set out in subsection (2) ...

That is amendment of Ordinance point two.

Then:

For the avoidance of doubt, nothing [...] shall prevent the internal or external measurement of a building where the Committee considers it appropriate.

695

We have details of property references, repayment of over-payments and so on. This approach, although clearly meticulous is, in a way, quite formalistic and bureaucratic. My concern is that whereas we spent two days, virtually, debating a topic that we already should have settled on the General Election date, which is still unsettled, people are beginning to ask in the community what is the point of having an Assembly of 40 people, or 39 people? They are saying that decisions can be made better by a small, elite, talented few.

700

I want the Assembly to have more of a role in actually talking about the bigger questions. It does seem to me that, reconsidering afresh both the implementation and the details and the purpose of taxation of real property is essential in this time, because we actually do need to make quite radical changes, perhaps, in the way we tax business and premises, in order to ensure that taxation is both fair and that businesses who have gone through difficult periods are not unnecessarily disadvantaged.

705

So, whilst I think we can support this today, on the assumption that prior work has been done leading to it as a worthwhile policy, I think we should be flexible enough to ensure that we as a States consider more widely the future of TRP and how best it can be adapted, both medium-term and through the economic and business circumstances that we find ourselves in at the present time. So I would like to see, perhaps, more feedback from Economic Development and Policy & Resources on this kind of question.

710

Thanking you, sir.

**The Bailiff:** Well, Members of the States, does anyone else wish to speak in debate before I turn to Deputy Le Tocq to reply to the short debate?

No, in that case, I invite Deputy Le Tocq, if he wishes, to respond to Deputy Gollop's contribution. Just a minute, Deputy Le Tocq, Deputy Merrett.

**Deputy Merrett:** Thank you, sir. I apologise, I simply cannot type quickly enough and my Chat function is a little dodgy.

I will be very brief sir. I concur with everything Deputy Gollop has just said and I do hope that Deputy Le Tocq, when he sums up, will reference it and will try to give Members, including myself, some comfort and assurances that TRP, going forward, when we have got a recovery package, will be taken into consideration.

Thank you, sir.

**The Bailiff:** Deputy de Lisle.

**Deputy de Lisle:** Thank you, sir.

My concerns over TRP are that the charges are far too onerous on property owners and I am a little concerned, here, and I think we need really an explanation with regard to the Propositions as to whether in fact these are going to be additional charges again. Because, when I read for example the amendment to the Ordinance, 1 and 2, where a building has a mezzanine floor, are we actually imposing more charges on owners rather than retracting costs to owners at the current time, with regard to TRP on their properties?

Thank you, sir.

**The Bailiff:** On the basis that no one else is indicating a wish to speak, I will turn to Deputy Le Tocq to reply to that short debate on behalf of the Committee. Deputy Le Tocq.

**Deputy Le Tocq:** Thank you, Mr Bailiff.

I think the concerns raised by Deputy Gollop are valid and certainly ones that we need to take into consideration, bearing in mind that the States approved the changes that are in this brief Ordinance some time back and since then times are changing and circumstances will change.

To address Deputy Merrett's concerns, yes, absolutely, the recovery package will need to consider all forms of income, taxation, levies, resources, all of that will need to be included in terms of what Deputy de Lisle said. Similarly, I think the reforms that this particular piece of legislation brings in place may need further reconsideration in the light of both the recovery package and our future budgets. But, at the moment, this is what the States has resolved to do and this Ordinance brings that into effect. So I encourage Members to support it.

Thank you.

**The Bailiff:** Members of the States, I will put to you the single Proposition as to whether you are minded to approve the draft ordinance, entitled the Taxation of Real Property (Guernsey and Alderney) (Amendment) Ordinance, 2020, as it has been amended to change the commencement date. I invite you to vote in the Chat column.

*Members voted Pour.*

**The Bailiff:** Thank you very much, Members of the States. I am not quite sure what the last vote means, but it is quite clear that there was a majority in favour of approving the draft Ordinance. There were a handful of Members who did vote Contre but I am satisfied that the majority have quite clearly voted Pour and therefore I declare the Proposition duly carried and the Ordinance, as amended, approved.



**Procedural –  
Order of Business**

**The Bailiff:** Now, Members of the States, I forewarned you, just so that you could have a think overnight, that when we got to this stage in the Order of Business, for the remainder of this Meeting of the States of Deliberation, we might need to take stock and identify the order in which the remaining items be dealt with. I did that because I was aware that Deputy Soulsby in particular, on behalf of the Committee *for* Health & Social Care, had in mind that Article XIII is potentially more time-critical than some of the other matters.

Does any Member wish me to put a motion before Members of the States to re-order the business that is remaining for this Meeting? Deputy Tindall does. What would like me to put to Members Deputy Tindall?

**Deputy Tindall:** As you have just described please, sir, that we can discuss EPR now?

**The Bailiff:** My understanding, as well, from Deputy Brehaut, as the President of the Committee *for the* Environment & Infrastructure, whose Energy Policy Propositions would be debated next, that you do not oppose such a move. Is that right, Deputy Brehaut?

**Deputy Brehaut:** That is correct, sir. There was an exchange of emails yesterday and the President of Health & Social Care asked that the EPR be taken ahead of Energy Policy, because it is a time-sensitive policy letter and my Committee agreed to that request, sir.

**The Bailiff:** Members of the States, without further debate, I am going to put to you a motion that instead of taking Article VIII next, we interpose Article XIII at this point, and invite you to vote in the Chat function, whether you support the re-ordering of business that way, or whether you would rather stick to the Agenda as it has been published?

*Members voted Pour.*

**The Bailiff:** Thank you very much, Members of the States, I am satisfied that there is sufficient support for that motion, that the next item of business that we take will be Article XIII. But it strikes me that this is a convenient point to have the mid-morning break and therefore we will resume at 11.05 a.m. and run for about an hour and a half or so. But I am conscious that there are events at lunchtime so we will not go too far beyond 12.30 p.m. We will find a convenient place to break and when we resume at 11.05 a.m., it will be Article XIII.

Thank you, Members of the States.

*The Assembly adjourned at 10.56 a.m.  
and resumed at 11.05 a.m.*

**COMMITTEE FOR HEALTH & SOCIAL CARE  
AND POLICY & RESOURCES COMMITTEE**

**XIII. Urgent Capital Bid –  
Replacement of the Electronic Patient Record System –  
Debate commenced**

*Article XIII.*

*The States are asked to decide:*

*Whether, after consideration of the Policy Letter entitled "Urgent Capital Bid - Replacement of the Electronic Patient Record System", dated 2nd April 2020, they are of the opinion:-*

- 1. To agree that the Replacement Electronic Patient Record system is formally included within the capital portfolio at a maximum cost of £20 million, to be funded from the Capital Reserve.*
- 2. To delegate authority to the Policy & Resources Committee and the Committee for Health & Social Care to approve the Outline Business Case.*
- 3. To delegate authority to the Policy & Resources Committee to open a capital vote for the Replacement Electronic Patient Record system, of a maximum of £20 million, subject to the Policy & Resources Committee approval of the Full Business Case.*

**The Deputy Greffier:** Article XIII – Committee for Health & Social Care and Policy & Resources Committee – Urgent Capital Bid – Replacement of the Electronic Patient Record System.

**The Bailiff:** And I invite the President of the Committee, Deputy Soulsby, to open debate on this matter. Deputy Soulsby.

**Deputy Soulsby:** Sir, I believe the Vice-President of Health & Social Care will be opening.

**The Bailiff:** Very well. You might have to remind who that is, then, please.

**Deputy Soulsby:** Deputy Tooley.

**The Bailiff:** Deputy Tooley, I do apologise. Deputy Tooley, then.

**Deputy Tooley:** Actually, sir, I have got to tell you that, as it is a joint policy letter from P&R and Health & Social Care, Deputy Le Tocq will be opening debate this morning.

**The Bailiff:** Ah, I was going to call the Committee for Health & Social Care first because that is the first named Committee, which is the customary way of doing it, and then I was going to call Deputy Le Tocq, who I had been informed would be speaking on behalf of the Policy & Resources Committee. But if you are deferring to Deputy Le Tocq, to go first and to go last, Deputy Tooley, then I will do it that way.

**Deputy Tooley:** Sorry sir. The conversation that Deputy Le Tocq and I had suggested that he would open and I would close this debate.

**The Bailiff:** Very well, Deputy Le Tocq.

**Deputy Le Tocq:** Thank you, sir.

I am going to leave my camera off because I have a problem with my screen freezing and I am sure people will be relieved not to see me. But I am going to open on behalf of P&R and I will keep my comments as short as possible because the policy letter is quite comprehensive and Members have also had a briefing, recently, on it.

But I do need to emphasise certain points because, sir, from a P&R point of view, as well as from an HSC point of view – and I will be primarily, obviously, speaking from P&R’s perspective with regards to its mandated responsibilities for the financials, the IT, provision, Smart Guernsey, *etc.* in this respect – but from both of our Committees’ points of view, in terms of background, this is time sensitive, which is why the States has allowed us to bring this forward and it is absolutely essential because it is well overdue.

Our current electronic patient record system is fairly ancient. It is often referred to as Trak. Its full title is Trak 2012 and it is very much an out of date version. It was put in place as a result of decisions made in 2008 by the Assembly at that time, at a time when IT was seen almost as a standalone type of provision and, whilst there have been significant improvements from the previous system before that, or systems rather, to this one, it has not delivered everything that was desired and part of that is to do with the fact that in any IT system change there is a cultural change that needs to happen. But I will come back to that later.

So I am going to concentrate primarily on the responsibilities from P&R’s perspective and Deputy Tooley will handle the issues from HSC’s focus. So, as I was saying, the system we have got is out of date. It has been heavily customised and, as a result of that customisation, it has really prevented us from upgrading properly and fully over time.

Support for our current Trak 2012 system will come to an end at 31st March 2021. This is after three contract extensions from the suppliers and they have indicated to us it cannot be continued beyond that date. So it is absolutely essential that we find the right solution, which is why these proposals are being laid before us today. There is not an alternative means of supporting the system available to us, that would help us recover from any failure and a system failure, I am sure Members will agree, sir, would be very problematic and detrimental at this time.

The Propositions that are put before the States are totally aligned with both the Partnership of Purpose, which I am sure Deputy Tooley will refer to, and Smart Guernsey. In other words, from Smart Guernsey’s perspective, particularly, they do enable us to work more efficiently. Trak is used by a number of teams currently that it was primarily not designed for and, particularly in terms of community, those who work in the community, both nurses and other care workers, it is not at all fit for purpose and so the system is not efficient in use of time and in functionality, those that are very important, particularly at the moment.

Even when it is used in acute services and the hospital, it does not provide many of the time-saving functions that people have come to expect today, available in modern software. And the data that flows through Trak is very limited indeed, so it does also prevent us, in terms of our Smart Guernsey initiatives, to move towards a true single patient record that can enable us to have the information and data available for making informed decisions in the future and helping our community.

So we are absolutely convinced, as far as P&R is concerned, that this move towards and investment in a new system that fits these objectives and achieves them, is essential at this time. In terms of cost, a major point I think to make here is that the £20 million capital ceiling we are asking for has been developed from our understanding and learning from the market and from earlier funding requests and gaps, where we have seen that implementation costs were often under estimates or missing the sorts of things I was referring to earlier in terms of culture change, training and ensuring that all users are familiar with any new system that is brought in.

I am sure all of us as States’ Members can understand the importance of that, particularly in terms of the functionality of the equipment we are using at the moment and the systems we are in order to have this Meeting.

Another point that I think we need to draw out is that, while we do need to pay a specialist provider for their software licence and implementation support, this does not mean that we are not leveraging or investing through Agilisys. This is a partnership process, involving Agilisys Guernsey and we will be utilising their network and server functionality and infrastructure for provision of this.

One question that I know certain States’ Members will have, and it is one that P&R have completely used in terms of scrutinising these proposals, is there a viable and substantially cheaper

alternative and this is a good question and it is an important question and, as a Committee, we are convinced that the answer to that is 'no'.

880 I just want, sir, to highlight some of the major reasons for that. For example, we did explore whether staying on Trak 2012 could be a possibility, bearing in mind as I have said, we have extended the contract three times. But, as I alluded to earlier, there is a lack of workable support in this to make it a viable alternative. It would just not be possible for us to build our own capacity to keep it going. It would be like propping up something that is far out of date and is danger of falling  
885 over. We cannot get the support outside, so that alternative was discounted.

We have explored also, sir, upgrading to a brand new version of Trak in some detail. There were three factors why we felt this was not value for money and not a good idea. The differences between our build of Trak 2012 and the current version are so large that, in effect, what it would be doing is to introduce a brand new system. So it would be liking moving to a new electronic patients' record  
890 in any case and the costs and training involved in that means that what we are proposing is effectively that but to do so without a proper options appraisal. Going out to tender would not have been wise.

Similarly, a review by independent experts cast doubt on whether the new version of Trak can meet all the requirements that we, as a States, require at the moment. We could be in danger of  
895 going back to recreating a highly customised and rapidly obsolete system, that we are in at the moment. We should note, however, that Trak could be a viable contender in the procurement process. But that means that they need to compete in a competitive way, alongside others, with all the scrutiny that needs to go into that.

We are not here, I know some people will consider this an option, we are not buying something  
900 which is platinum-plated with nice to have bells and whistles on it. This is something that fits our functionality. We did explore doing the maximum as an option but we have rejected that on the basis of increasing cost without benefit, and so we are going to market with a specification directly informed by the requirements articulated by our clinicians and reviewed and validated by external experts.

P&R believe fundamentally that this is a realistic, a funded and timely proposal that is the best  
905 way forward for where we are at the moment, and as it is stated, it is an urgent need that we do need to move on because of the timing. In terms of funding, if I can just raise one thing before I close, in terms of opening, on this debate, this investment had not originally been included in the capital portfolio. I know some people have asked this question.

910 Because at the time when it was originally set and again the need to update was seen some four years ago, when we did a big review before the Future Digital Services report came to the States, we assumed at the time that we could find a software solution, procure the software as a service and this would therefore have been funded in the usual way, through revenue costings.

It has become very clear to us that this will not align with our data sovereignty position and, as  
915 a result of this, given the need for security, on-Island hosting *etc.*, that we need to move in this direction, which is using the capital portfolio, which has been constructed in a manner that recognises the reality of these sorts of changes and allowance for urgent emergency projects, of which this is one.

So, it has been confirmed that we have enough to cover this investment and to bring it into  
920 place, which will ultimately, in the end, be saving us money, and be more resilient. I think I have said enough in terms of opening. Obviously, I am willing to address, at the end, any questions relating, particularly to P&R's mandate in this respect, but I will hand over now to Deputy Tooley, Thank you, sir.

925 **The Bailiff:** Deputy Tooley.

**Deputy Tooley:** Thank you, sir, and I apologise for the confusion earlier. It has been quite a busy time as a Member of Health & Social Care and Education, as I am sure you understand. I want to say, really, just how important and actually entirely necessary for the continuation of business as

usual and the unlocking of the opportunity to take great strides ahead, in advancing the work of the States, through the Partnership of Purpose, that this purchase really is.

The smooth working and integration of the Partnership of Purpose is dependent on the ability to integrate data and service provision and to support more efficient working. The TrakCare system that we use at the moment and the replacement we hope to be able to purchase as a result of this, are used by our acute teams at Health & Social Care, where they are vital to support the time-critical work that is done with patients. And they are used by the community based teams, including those who provide mental health services in the community. In fact, it is those mental health services teams at the moment who make the most use of this connected system.

Actually, this heavily customised, bolted together system that we have at the moment makes that working very difficult. So, when we come to look at its replacement we did, as Deputy Le Tocq says, consider whether it was possible to simply patch up and upgrade the system that we have and it has been made quite clear that, a, that is not possible and, b, it still would not give us the kind of system that we need to have and, in fact, would be a more costly way of going about things in all likelihood under any circumstance.

The electronic patient record needs to be the spine or ring road for communication between systems, both within HSC, where our systems do feed into the current Trak system, and externally where they do not support mobile working at the moment. Those connections are complex to put in place and they are hard to maintain.

Modern EPRs use greatly improved technologies, which make these interactions simpler to effect and which can open the door to a true single patient record. There will be huge clinical benefits to this, both in terms of wasting less clinician and patient time collecting data twice, but also in avoiding clinical harm being caused by inconsistent or partial data.

A better running Electronic Patient Record will allow us better tools in order to capture population health data and use that to plan and model for current and future health care and ensure that prevention work is targeted and effective. That is because we will use the electronic patient record as a core tool in collating and presenting data on healthcare provision. This is true for the individual but also for cohorts of people, for example diabetics, and the whole population.

Again, the power of new EPRs to really allow for rapid and accurate analysis, including predictive analysis based on extrapolated trends, is significantly greater than that which we currently use. Investing in an up to date, modern EPR is essential for our continued safe and effective operation.

A modern EPR would allow us also to adopt a number of efficiencies, such as the automation of administrative tasks, which are not currently available to us with the system we are using. Beyond that, we expect a generational shift in the EPR we use would unlock major areas of inefficiency. It would allow us to use truly integrated working and that can save a huge amount of time in data sharing, completing work for patients, for example ordering and returning lab results, and will avoid wasted effort.

Mobile working will see significant improvements. We would expect to see the ability to truly support mobile working, with data being inputted into smartphones or tablets in wards and communities. Again this would provide a much better patient experience and significant efficiencies.

At the moment we have staff, in effect, queuing to use computers, which are wheeled onto wards as televisions used to be wheeled into school classrooms. Community teams take notes on paper or on their phones, sometimes emailing them into the centre and updating the record later. This can cause genuine physical logjams. We could have staff congregating around computers, in order to be able to input their data, trying to retain that data in their minds while they are waiting to do so. It is time-hungry and inefficient.

A single patient record would allow a certain amount of self-service. It would enable the members of our community to see information about their health and care or perhaps about the health and care of loved ones, for whom they have responsibility. For example, GP advice on management and condition, an up to date record of the drugs they were using or a social care plan.

This could significantly decrease unnecessary contact with health professionals and simultaneously enable people to make choices, which would help keep themselves physically and

mentally well. The new system will be more resilient. Our current system is outdated and old. It was designed and modified to suit professionals working in a time and place, which in real terms no longer exists and has not been changed simply by Covid but already was subject to massive change from that original design period.

That very customisation has made it difficult to upgrade, because you cannot just buy new operating software off the shelf and upload it. The system we have is no longer being updated anyway. Support for it officially ended quite a long time ago and we have now several times had extensions at considerable cost to that support.

We are now beyond the possible extended period. Only Covid has allowed us to push back the deadline and I need to flag that a failure in the system would very quickly lead to detriment of services. The hospital's business continuity arrangements can withstand a short system outage but they would not cope well with any extended or permanent system failure.

I cannot stress enough the importance of our making this change, making this purchase, at this time. I know that there will be some who are concerned that we have proposed Electronic Patient Records before and what has been delivered has not necessarily been what people have thought they were buying at the time and I think there is a genuine concern around there and there is genuine reason for that concern.

But I think that, to a certain extent, disregards what we did get from those earlier purchases. We were then operating at a time when this was incredibly new technology, when people thought what they could offer much more than was ever going to be deliverable and we were working at a time when this was a very much developing technology.

We have a much clearer understanding now of what is needed, of what will need to be done in order to deliver it. This is not being presented this time as an IT project, but as a change management project, because it is absolutely critical and is recognised as critical that what needs to change as much as the IT system itself is the training and the understanding and the way people, our staff and so on, will use this system going forward and that is absolutely central to the programme that we are putting forward and that we are proposing.

So I will do my best later on to answer any questions you have and I open up the floor to debate, hoping that people will engage with this in order to help us provide the population with the patient record that they deserve and need.

Thank you, sir.

**The Bailiff:** Thank you very much and I will now open it up to debate and call Deputy Green, followed by Deputy Merrett, followed by Deputy de Lisle. So Deputy Green.

**Deputy Green:** Mr Bailiff, thank you very much.

I speak in this debate on behalf of the Scrutiny Management Committee and Members may well have seen a letter of comment that we submitted last week, I think it was, in relation to this policy letter. The joint policy letter from the Committee for Health & Social Care and the Policy & Resources Committee is requesting £20 million for a replacement digital system to better monitor, integrate and organise the Island's healthcare data.

My Committee wishes to make it absolutely clear that it concurs that it is essential that the current TrakCare system is replaced as soon as practicable. However, the committee has a number of points it wishes to raise regarding the approach outlined in the policy letter and earlier on in debate this morning.

These comments are based on my committee having reviewed the previous electronic Health & Social Care records system post-implementation reviews, as well as the policy letter here and the outline business case. Firstly, regarding the timing of the submission of the bid, my committee would question why this bid was not presented to the States' Assembly for consideration earlier on in the political term, rather than as an urgent bid under the current, unprecedented circumstances. It would therefore be helpful if a full explanation as to the timing of this policy letter could be included in the summing up speeches.

1035 My committee also notes that should the request be approved by the States' Assembly, the project will take up a significant amount of the current Capital Reserve but will apparently not provide significant benefits to the local economy. My committee believes that at this time a general reprioritisation of the capital investment programme should be undertaken, arguably before any individual projects are permitted to proceed.

1040 Whilst noting that the procurement process has already commenced, pending approval of the policy letter, my committee is concerned the timescale for implementation is actually very limited. The expiry date of the current support agreement means that a significant risk does exist in terms of the tendering process may not be completed in the allocated time remaining. No doubt the current unprecedented times will clearly make the tendering and implementation process more difficult.

1045 Whilst an excessively long implementation period would not militate towards success in this programme, my committee does question whether the 18-month period is too short, based on experience from the previous implementation and indeed experience gained in the UK on similar projects.

1050 Secondly, it is clear that this urgent bid is the first stage in a wider Guernsey electronic Health & Social Care records system programme. If full value is to be derived from this procurement, then it must be based on the assurance that it will enable the actual delivery of the further enhancements suggested, particularly those specifically outlined in paragraphs 1.4, 4.2, 4.4 and 5.3 of the policy letter, and do so in a timely and cost-effective manner.

1055 My Committee has a specific concern that this development does not encompass full integration with primary care systems but is limited to services using the current electronic Health & Social Care system. It is of concern to my committee that the policy letter does not clearly outline the status of this programme and the indicative costs of those additional stages.

1060 There is also limited commentary on the related financial benefits of this project, a key lesson highlighted following the previous electronic Health & Social Care record system's implementation. It is essential that the financial benefits of this project are not forgotten. Whilst my committee accepts that the case for the proposals is not based on cost savings as such, we do note that there does not appear to be any clear evidence spelling out the financial benefits to be derived from the project. Indeed, on the contrary, the policy letter recognises an additional annual cost of £400,000 per annum.

1065 On this basis, my Committee believes further clarity should be provided regarding the financial benefits and the overall road map in place to deliver the proposed new system. My committee recognises that there does appear to be a full understanding, this time around, that this project is not merely about information technology but is, in essence, a change management programme. My committee further wishes to highlight another of the key learning points from the post-implementation reviews undertaken following the implementation of the TrakCare system.

1070 The post-implementation reviews emphasise the need to fully resource so-called organisational change management by ensuring that senior clinical staff are central to the decision making process in all phases of the programme, including procurement and the committee that I lead does believe that this is essential to success. I hope that will be the case this time around.

1075 My Committee broadly supports this essential development but does believe that the costs and the risks associated with the programme should be fully understood by States' Members before the decision is taken to proceed. Finally the Committee notes that should the request be approved by the States' Assembly, the project will take up a significant amount of the current Capital reserve but will not apparently provide any significant benefit to the local economy. That is why we believe that a general re-prioritisation of the capital investment portfolio does now need to be undertaken. Sir, that is all I propose to say.

1080 Thank you very much.

**The Bailiff:** Deputy Merrett.

**Deputy Merrett:** Thank you, sir.

I was listening very carefully to Deputy Green because I am on Scrutiny and I will try ... I do not think I will actually repeat anything he said, I will try my best not to. My concern, and I have raised this previously, and Deputy Tooley referred to this when she spoke, she referred to integrated data and service provision.

But this policy paper, as in 5.2, which I can quickly read out in one moment, basically it does not include primary care, as in GPs, which arguably are the initial contact base for members of our community before they get referred into secondary care. In fact, that is the only way you can get referred in secondary care, on most occasions, without having to pay privately or statutorily to do so.

My concern is that this potential IT will not have the capability to interface with GPs' surgeries, So, in 5.2, it does say, given the urgency, of this paper, how HSC is not ...

... looking to extend the replacement EPR system to additional healthcare providers ...

for example, GPs. But, it says, this new system will ensure future development and data sharing are not restricted. So there is a bit of a light at the end of the tunnel there.

So if we go on to read the policy papers, I am sure all the Members do, it says that they are going to return to the States in 2021, this is in 5.3, it says the Committee ...

... through a separate policy letter focusing on primary and community care ...

so that is a good tick in my box ...

... direction to return to the Assembly during 2021 with proposals for a costed digital solution enabling integration and/or the aggregation of data between primary care and the wider health and care system.

That, I think, is what Deputy Tooley is referring to, with a healthcare passport and individual members of our community being able to access as such.

But how much does Health & Social Care consider, in their next policy paper in a year's time, that they have alluded to, it may cost to have this, I refer to it as, a bolt-on? The bolt-on of GPs and community care? I would argue, as I said, many of our community, their care starts at the GP's surgery. How are we going to pay for that?

Deputy Green alluded to the concerns that SMC, as a member of, have regarding the Capital Reserve. The balance of the Capital Reserve, pre-Covid, I believe was £23.7 million. This is estimated at a maximum of £20 million. I just do not know how this is going to fit into the recovery plan, or a recovery plan, I should say, because I do not think there is a recovery plan at the moment, certainly not that I have been aware of.

Deputy Green spoke more diplomatically than me, because I would strongly argue, that the capital portfolio needs to be visited and it should be re-prioritised and we need to understand, as an Assembly, that the broader picture of how this sits into the recovery strategy. Because spending up to £20 million, reserving that kind of money at this time, obviously I just have concerns over.

I am very appreciative that HSC gave Members the opportunity to meet, virtually obviously, and many questions were asked and some were answered, some were not. These questions I do not believe have been answered in the public domain or even in the private domain. So I pose the questions again.

The question really is how much does HSC consider in the next policy letter, in 2021, this bolt-on for the GP and community care potentially will cost? I am a bit confused who is summing up, I have to be honest, if a Member of P&R that speaks at some point in debate, could they please give me any indication or the Assembly an indication what consideration they are giving to the capital portfolio and how/if they see this as being part of our recovery plan and if this £20 million, which was not in the previous capital project plan, how that is going to be financed?



Without those questions being answered, I am going to struggle to support this policy paper. I believe many Members will support it but I just do not have enough information at the moment to enable me to understand, I think Deputy Tooley said, did she say this morning, that actual, to me, the primary – excuse the pun – the primary source of interaction for our community going in with a health concern is usually their GP and to not have that in amongst this, it just concerns me. Not knowing how much that will cost next year just concerns me.

There must be an indication of sorts because they said they did not do it because it was too urgent but they clearly must have looked at this, because I think that is common sense to do so. If they can give some sort of indication I would be very appreciative.

Thank you, sir.

**The Bailiff:** Deputy de Lisle, to be followed by Deputy Inder.

**Deputy de Lisle:** Sir, thank you.

I would like to bring up the issue of timing. The concerns of Deputy Le Tocq and Deputy Tooley are well taken, in terms of their desire for updating the current system and effective and efficient process with regard to information. But I think it is all a matter of priorities at the present time. Twenty million on IT and digital Electronic Patient Record System, the EPR, to record and track and analyse data, this in many people's minds is not the time for that.

Testing and tracing and being well-prepared for a second outbreak of the virus upon us and economic regeneration are the critical areas of health and a public concern. I would call for EPR to be delayed, sir. In all due respect, it is the timing. It is not if, it is when. All systems, I agree, need updating periodically, there is no doubt about that.

On another issue, why another £20 million when Agilisys, the States' strategic partner is involved, with £40 million more over 10 years, to increase IT and digital services. Already, £200 million over 10 years is being spent on IT and Digital Services by the States. Why not they help to modify – that is, Agilisys – the existing system, known as TrakCare, provided by InterSystems, and not just provide advice from Agilisys to ensure the replacement delivers good value for money; why not they help modify the existing system for future use?

They are in place for 10 years, sir, so there is no reason why they should not be integral in modifying the existing system as part of the £200 million that is being spent on IT and Digital Services over the next 10 years.

The Government needs to invest in the necessary equipment, employing and training more staff to enable Guernsey's health system to cope with the virus and any further developments within that area and also patients waiting for cancer and other care. A prompt diagnosis and treatment remain crucial to give patients the greatest chances of survival and I think this is where the main concern should be concentrated on at this time.

Also, I note Dr Dickinson in the UK making points about imaging and the fact that so much imaging equipment is required throughout the NHS but also it is an issue here, sir. He is very concerned that we may find that patients are suffering unnecessary treatments or unnecessarily damaging treatments and losing the opportunity for care of cancer and other serious illnesses. So I think that is a very important concern that should be priority within the health service.

It is all about having the equipment and trained staff nurses and doctors. That is where nations have fallen, this pandemic. Surely the lessons have been learned and I think this is where the money has to be spent, with regard to our health service. It is not on replacement of digital systems to better the Island's health care data at this point, because the speed of change in digital systems it is such that they are outdated very quickly, almost as soon as they are put in place.

So it seems to me that this is not the most important and urgent of matters that need consideration at the current moment. Financing is strapped at the moment, across the Government of Guernsey and every penny has to be very carefully considered.

Thank you, sir.

**The Bailiff:** Deputy Inder.

1185 **Deputy Inder:** Sir, thank you.

I have got some experience in this, inasmuch as I spent 15 years of my life in the trade. Sir, Members, HSC particularly, if you strip out all of the Partnership of Purpose, passports, problems with IT systems, what you are all looking at is effectively, what we would call in our trade, an intranet.

1190 The difference between intranets and the actual internet itself, what the intranet effectively is, it is a private network, facing the organisation's employees, run by the organisation's IT administrations and data administrators and it effectively has an internal CMS or content management system, where users can go and log in and update data and files and all that kind of stuff and I suppose it is in part a customer relationship/management server.

1195 It has got high levels of security, obviously, it is regulated by the organisation and it has very limited users. Not a limited use, it is obviously very useful for HSC. In terms of the actual structure itself, we are talking application servers, possibly one and two, an intranet server, probably one, the application software itself, which I assume oddly is probably the most expensive bit, because the rest of the TIN is not. You have a content management system and levels of security. So that is how the architecture would be structured, the TIN, effectively, that is how the servers would look.

1200 This is not very big, it really is not very big. Now there is likely to be 63,000 records – every citizen of Guernsey. In terms of database records and terms that is a very small database. There is actually no information from here whether the, something that we call inter-operability, whether there is any ability to shift the data from the old system onto the new system to make any savings or whether you are starting from scratch.

1205 Fundamentally, I think Guernsey has made a mistake and I think it has made a mistake in terms of its whole strategy, which is based around the citizen data. That is where we should have started. We should have started with one single citizen data base and it would be one dynamic file for each citizen, which would include medical, educational, possibly job records, licensed information such as Population Management, car licences, all the other licences you have got to get nowadays, tax and possibly social.

1210 Now, I understand there are issues regarding, in legal terms, whether you can put certain types of data together, i.e. criminal, tax and social and all those kinds of bits of pieces, but I honestly believe Guernsey has made a fundamental error, not starting there, starting with one dynamic file for each citizen.

1215 If you understand what I am saying. If you listen to what I am saying, what you have realised is that we seem to have one heck of a price ticket for something which is a very small piece of data structure and content management. All it is is a content management system of which people within a single organisation can access. That is an extremely small application and for the life of me I cannot see how this has got a £15-20-million price tag attached to it. That is a substantial amount of money.

1220 What is probably worse than that, because we have not started in the right place, next year we will have the Home Department with the same argument. You take off EPRS, you will have something called a criminal management system, or some other system, a population management system, and we can take out EPRS and attach the Home Department to it and you can basically re-write and have exactly the same conversation with the same price tag attached to it. And a year after that you will have ESS coming to you with exactly the same document, with exactly the same price tag.

1225 This has gone wrong from the very start. This will be a mistake for us and will cost us millions and millions over the years, sir. For the life of me, and if you understand anything and if you believe anything that I say, having been in the business for over 15 years, for the life of me I can see obviously the benefits to the internal organisation itself, but for the life of me I cannot see £15-20 million for what are very small pieces of hardware, application servers, a couple of database servers, a data content management system, a bit of CRM, and a number of levels of security.

The work has not been done yet. The work just has not been done and I do not blame HSC for this because this is not their job. This is actually a procurement process and I think the failing here, and it is a huge failing, is there is something very broken within the system if, within a very small piece of paper, I have just looked at the financial case on the, oh my gosh I beg your pardon, the outline business case, which was sent to me by one of the secretariat, the financial case for a £15-20 million project.

I am minded what Deputy Fallaize said about how we gave him such a hard time over his costs on education, where he had a book as thick as the King James Bible, but here we are looking to make a decision of between £15-20 million, and I will repeat that again, on what is effectively, if you look at the outline business case, less than one side of A4.

We are in that kind of state. This is an absolute disaster. Part of our job is to at least try and scrutinise public expenditure. Part of our job is, at least, try and question some of the processes. So that is my pitch. I will not be voting for this because I do not trust this procurement process, the capital allocation process one iota.

I would encourage Members, and I do not blame HSC for this because they have had this handed by the procurement process, this is a disaster in the making and if you vote for this now you will see this time and time again because we never started in the right place, and I will leave it at that, sir, thank you.

**The Bailiff:** I am going to call Deputy Gollop next, to be followed by Deputy Ferbrache. So Deputy Gollop, please.

**Deputy Gollop:** Hello sir, Thank you, sir. Slight time delay there.

I found a lot of interest in what Deputy Inder has said because, unlike me, he certainly does understand business cases for this kind of technological software approach. But I think at this time, one of the reasons why the States as an Assembly has had a lot of criticism this year that maybe individual Members, to do with the Covid-19 pandemic and other areas, have had less criticism and more praise has been maybe we are in a different space in that there does appear to be more people who want supporters, in the Assembly, of the Government, rather than critical opponents.

That, I think, is a challenge of our times, because our political system is not built around a Government majority or the kind of sycophantic system of ministers and supporters we find in some other places. Therefore my support for this is measured because I am likely to vote for it, actually, even though I can understand the points Deputy Inder, Deputy Merrett and the Scrutiny president, chairman, Deputy Green has made.

I am unclear in looking at this system just exactly what it will do. I acknowledge that the TrakCare system was perhaps over-promised and in a way under-developed, although as Deputy Le Tocq says it was innovative in its time. If we go through the Report I am puzzled that the agreed contract arrangements end on 31st March 2021, when it is a probably that the procurement process will take at least six, if not 18 months, even in normal times, so we will end up with a period, if we are not fortunate, or we are going too quickly, of maybe six months to a year where we have not necessarily got those agreed contract arrangements. That is the first issue I think I want to point out.

I thought Deputy Tooley made some excellent points about the wider strategic goals of the Health & Social Care, the Partnership of Purpose, in which we will see providers brought together to deliver integrated care, which we will also integrate with community hubs and so on. But I am not clear exactly whether this system reaches out to those people.

I think Deputy Merrett has established that it will not include general practitioners in Guernsey or Alderney and if it does that would be after the procurement phase has been done in 2021, that is too optimistic, I think it will be 2022, and that will require an additional figure, which as Deputy Inder has suggested could be, if we are not careful, millions.

The citizen campaign that he suggested is interesting, but Guernsey Government, of course, is not quite sure what it wants. Are we basing things around the consumer, the citizen, the subject, or are we basing them around the provider? Another dynamic and I think it is a contradiction, is that

the more we centralise functions like information technology, although that concentrates expertise and I think Deputy Le Tocq's contribution and senior officers' is an example of how perhaps we are not running like a normal kind of Government, because I think in other communities it would be the health ministry or the National Health Service that would be very much responsible for IT. But here it is a central corporate function.

That might make sense in a small community but it nevertheless runs the risk of the system not being as health-focussed as it should be. I am not clear as to the exact cost. Is it £15-20 million and do I personally have the tools to assess the clarity of that?

We hear that the software was used for symptoms, payments, X-rays, prescriptions, allergies, hospital stays, mental health care, social worker visits and so on. But I am not 100% clear if that includes all of the medical special list group services or physiotherapy group services, especially those not provided publicly within the hospital campuses but maybe provided semi-privately to patients who are nevertheless resident on the Island. That is not spelt out in the Report as far as I can see.

I have already mentioned the problem with the general practitioners and how far it also applies to Alderney and Sark although, implicitly, it certainly applies to Alderney. I am concerned on page seven, point 3.5, when the support term ends access to specialist support will no longer be guaranteed because we will, even if we support this today, have a transitional period and, like Deputy Green, I too would have concerns that maybe this should have been prioritised and developed at an earlier stage, particularly given the difficulties we clearly have in managing the transition period.

I accept that effective digital transformation underpins many of the Future Guernsey plans and that we are in a situation where, really, we have little choice but to get on with the job and get the change right and getting it right first time programme. But we certainly need resilience and continuity.

I support the aims of the project but regret, as has been pointed out in paragraphs 4.2 and 4.3, that we have not necessarily worked out how to deliver the benefits for the wider community and I think that will be ... 5.2 says:

Given the urgency with which a new solution is required, the Committees are not, at this stage, looking to extend the replacement EPR system to additional healthcare providers, such as the GP surgeries ...

But it does not say who the other healthcare providers would be. For example, would that include dentistry, cosmetic surgery, other forms of complementary therapy and professionals and I think that would be useful to know and, as I have said, 2021 does not appear to me to be that realistic. Moving further on, not only is the cost uncertain but I am not entirely clear why we cannot identify alternative support for the current system.

I do support the key improvement that patients will be able to get access to their own summary care record and to their care passport but we have heard a senior medical professional connected to Health & Social Care, who intimated that it might not be wise for all patients to have that kind of human rights demand without context and without knowledge and without certain clinical guidance. I think we need to be clear on whether those rights exist or not and whether they exist for physical patients and mental health patients and others and how, as Deputy Inder implied, the citizen will be able to access this all on one portal.

It is not clear how long the system would take to be implemented. We hear that it would last at least 18 months, which by my calculation would be a year beyond the existing contractual support for TrakCare. We also hear that, despite the excellent work of Agilisys, it is significantly extra to their core service and they acknowledge that they are not specialists in this form of digital infrastructure, which again indicates that we should be talking, perhaps, to health software providers who support the United Kingdom National Health system, maybe Jersey and, of course, continental countries such as France and places more like our size, like Malta or Lichtenstein, or Andorra or whatever.

I wonder if all of that has been done and whether the procurement will enhance. I support entirely what Deputy Le Tocq said about the need for data protection to be resilient and based on-

1335 Island because I think it is important we retain the confidentiality and security of our data on-Island and I also hope that training is appropriate.

But I feel this is an opportunity missed because it could have been more integrated into the change culture, the Partnership of Purpose, the integration of community hubs and general practitioners and greater clarity on its role with health tourism and the Medical Specialist Group.  
1340 Also, as to the costs and goals of the project, it appears as if it has been put on the shelf for too long and now faces a last-minute rush in a time of great strain for Health & Social Care, although there is opportunity as well. So, with great reservations, I am likely to support the project, but hope more improvement is done on this area any time soon.

Thanking you.

1345

**The Bailiff:** Deputy Ferbrache, to be followed by Deputy Smithies.

**Deputy Ferbrache:** Sir, we do not have any option but to approve what is put before us and I am comforted by the fact that Policy & Resources have looked at it and are supportive of it and are  
1350 joint authors of this Report and I thought the debate was opened very well by Deputies Le Tocq and Tooley.

But I look at our overall management, and I am not critical of HSC or anybody else, I am talking generally in the States, and it causes one to raise one's eyebrows, because we are spending £20 million, we are under pressure. As Deputy Gollop has just said, it seems as though it has been  
1355 taken off the shelf at the last minute.

I think Deputy Inder made very good points and normally I would support him in such contentions but I think we have not got any time at all to make an alternative decision. We are put in a very difficult position. But the figures are eye-watering, when I say that I am talking about the overall computer thing we talked about. We have got at £200 million contract with Agilisys over 10  
1360 years, we are being asked to spend another £15-20 million. We know that is not going to solve all the problems.

I am no computer expert and have now got some really good in-house computer people in the States of Guernsey. Is it not possible, and I appreciate that all hands are to the pumps at the moment in relation to the Covid crisis, but when that eases perhaps just a little, for those people to sit down and say, 'These are the computer projects, IT projects that we have got; this is likely what we are  
1365 going to need in the next two, three, five years; the cost of that, capital-wise is x, the cost of that revenue-wise is y'?

Because we just seem to be saying we need this now, we need that now. Clearly we do need this now. I am absolutely convinced of that. But again, as the point has been made, it is not just the £15-  
1370 20 million capital cost, it is also revenue cost. For example those are highlighted in paragraphs 9.5 and 9.6 of the policy letter and those could total, there is going to be extra cost to the supplier of £115,000 and it could be extra revenue costs in relation to the size of the team, I would say locally if I use that word somewhat inaccurately, another £188,000. Now some of that might be saved.

Bearing in mind that Deputy Tooley has identified to me a labour-intensive procedure now,  
1375 because people have got to write things down on bits of paper and then they can put it on the system later on, because the system is creaking, why does that not translate into a saving rather than additional?

We are under considerable revenue and capital stringency and normally, if one were to go to P&R and say, 'I am sorry, it is not in the capital projects, I need £20 million as a matter of urgency,'  
1380 they would rightly say no. I think they are rightly saying yes, now, I accept that. But why was this not foreseen and I would like to be given confirmation by Deputies Le Tocq and/or Tooley that the system that will be purchased will be resilient. I would like to know how long it is likely to last and I would also like a bit more information about why there could be an additional £188,000 cost.

As Deputy Inder has said and as Deputy de Lisle has indicated, it is unfortunate that this cost,  
1385 and I appreciate we have not got the kit, the expertise or whatever it may be, will be spent outside of the Island when we are trying to maximise expenditure within the Island. No option, no choice,

we have got to go along and do that, but we are exhausting, almost, the relevant fund. It has got £23.7 million in now. This could cost £20 million.

1390 When I hear about practice and procedure, and I know there are some Members of the States who almost get high on practice and procedure. They love it, they dance on the ground when practice and procedure are mentioned. It is their *je ne sais quoi*, it is their *joie de vivre*, it is what takes them forward. I am just the opposite.

1395 If procurement I going to take the time that Deputy Gollop says that it is and I think he is probably right, which takes us beyond the time when the supplier will continue to service the contract, why do we not just adopt the procedure to fit within the time? Why do we have to be led by the procedure? If procurement cannot do it within the time, then they will have to get a proverbial kick up the backside, cut down the procedures and get it done within the time.

1400 I do find it disappointing that we have effectively got a gun to our head, we have got no option but to vote for this. In normal circumstances, in fact until I re-read, which I did again yesterday, this policy letter and I saw how urgent it was, I was actually minded to vote against it. I actually think, sadly, that it would be irresponsible to vote against it, so I am going to vote with it, with a degree of reluctance.

Thank you very much sir.

1405 **The Bailiff:** Deputy Smithies.

**Deputy Smithies:** Thank you very much.

1410 Sorry, it is 30 years since I worked in systems analysis but I have to say that Deputy Inder's comments and advice seemed to me to be spot on and tie-in with my understanding and experience. Deputy de Lisle also made an excellent speech, I feel. I am not yet convinced that this matter is as urgent as we have been led to believe, but I am sure that these points will be addressed in the summing up and I will reserve judgement on which way I vote until I have heard the closing arguments.

1415 I would like to have a lot more reference to the outline business case, which is being presented, to back up some of the arguments, which are being put forward. I have to say I am leaning in the direction of Contre at the moment, because my head is overruling my heart. But remain to be convinced.

Thank you, sir.

1420 **The Bailiff:** Deputy Langlois.

**Deputy Langlois:** Thank you, sir.

1425 Deputy Merrett covered the issue which surprised me most when I read the policy letter, in other words the lack of integration with the primary care. Because about six or seven years ago I remember somebody explained to me that one of the flaws of the current EPR was that lack of integration, so I was assuming that, when we introduced a new EPR, that integration would be there. As I say, Deputy Merrett covered that quite thoroughly.

1430 Then Deputy Ferbrache brought up the subject of revenue expenditure, which is the other aspect of the policy letter which quite interested me. We are in a situation now where a very high proportion of revenue expenditure goes on health and care and I am beginning to think that actually what we do need is a specific Medium-Term Financial Plan which we can discuss at the beginning of each term, regarding that expenditure on health and care. Not just HSC, obviously, but also the long-term care funding as well.

1435 Because they are such a large proportion of our expenditure. I think they distort P&R's Medium-Term Financial Plan and, as we have seen in the course of this term, we increased the revenue costs by up to £12 million to pay for the NICE drugs and we have got the revenue costs for the support for EPR and when HSC brings their policy letter on extending the EPR to primary care there will be a lot more revenue expenditure involved in that.

We are never really certain about how much this is going to amount to. I think as Deputy Ferbrache pointed out in 9.5 it says the proposed new EPR will result in revenue expenditure of £115,000 per year more than we are currently paying InterSystems, because nobody has got an idea of what that total is.

That is the expenditure side of things but there is also something which is dear to my heart, which is the funding of health and care. We have taken one small step in the course of this term towards a more integrated and transparent funding for health and care in that the Health Service Fund was moved from under the mandate of Employment & Social Security to P&R to allocate in in the normal budgetary process.

Personally, I do not think we have gone far enough with that but that would be a part of a specific Medium-Term Financial Plan where the States could make a decision, an open and transparent decision on expenditure for the next, say, five years or so on health and care and also exactly how we are going to be funding that expenditure.

At the moment it is a cliché to say it is the elephant in the room but it dominates our expenditure to such an extent and yet we do not actually every sit down and discuss it specifically. It tends to get buried in more general discussions about Medium-Term Financial Plans and budgets and I think that would be a move in the right direction.

This policy letter seems to me to highlight the need for that and the urgency with which it has come, maybe panic is too strong a word, but it has come to the States, obviously, with a great deal of urgency, and a great deal of rush, and it is not a satisfactory way of proceeding, I think, in the future. Thank you.

**The Bailiff:** Deputy Graham.

**Deputy Graham:** Thank you, Mr Bailiff.

I will be very brief. Deputy Inder's speech was really excellent and it certainly, I think, epitomises the problem that some of us lay Deputies have when issues of a technological nature are in front of us, particularly when they come with a hefty price tag.

I have to say a lot of what he said rang very distant bells with me, from my experience in another jurisdiction about 70 or 80 miles to the north of here. The track record of government IT initiatives is pretty unimpressive over there and I think it is probably a part of the beast, really, that that sort of thing will always be a very high risk.

But it does highlight some significant problems but the problem that Deputies like me will have is that really, on the strength of merely what is delivered this morning, are we actually going to take the decision to vote against a project, which we understand simply needs to go ahead and the consequences if it did not would be pretty disastrous.

That is the dilemma. In passing I would mention that he also alluded to the relatively unconvincing outline business case that attaches to what is a large item of expenditure and it would be interesting to hear in the debate Deputy Prow's view on this, because I know he has strong views about convincing outline business cases, even full business cases coming to the States for debate before expenditure of this nature is embarked upon.

Finally, others have alluded to the problem of the lack of interface with the primary care sector and indeed the letter of comment from the Scrutiny Management Committee makes it plain that this is a fundamental weakness. I do not really criticise Health & Social Care for this, because I think it really reflects the fact that primary care in this jurisdiction is almost a discreet and certainly detached part of our overall health care, which I think, in the course of time needs to be reviewed as indeed it is being reviewed. So in a nutshell, I hear what Deputy Inder has to say. I cannot bring myself on the strength of what he said to vote against this Proposition.

**The Bailiff:** Deputy Roffey.

**Deputy Roffey:** Thank you, sir.

Unlike Deputy Inder I am certainly not a States' Member whose strengths and background lies in IT. But I do recognise what he says and I understood that the whole question almost over a single point of contact with the States for citizens of Guernsey in a digital fashion was a workstream that was underway. In fact, we were told several years ago that was going to be the case.

1495 It would be interesting to know when, maybe if Deputy Le Tocq, I do not know if he is able to speak again but if not somebody else who is involved in that side of things, can tell us where that stands. That said, it clearly is not about to go live in the next few months or couple of years unless it is being kept very much under a shroud and it is going to be unveiled with a klaxon all of a sudden.

1500 I am very much in the same position as Deputy Ferbrache. Slightly different. He said he would have voted against it if it had not been for having a gun to his head. I would have voted in favour of it any way. But I do feel slightly as if I have got a gun to my head and I do not fully understand why this, for most of us, seems to have emerged from left field as an urgent capital project. I think it is an urgent capital project but why that was not known about and therefore made known at an earlier stage.

1505 I do warn against, I know some Deputies do have expertise in IT, this sort of debate becoming one where a little knowledge is a dangerous thing. I have got form here. I was the one that brought forward the current, now obsolete system for approval by the States however long ago it was, about 15 years ago. At the time, about a third of the States' Members got up and made very similar speeches to some of the ones that have been made this morning, saying, 'This is enormously expensive.'

1510 Even though actually it was only relatively modest extra expenditure above the cost of simply replacing the old PAS or Patient Administration System. Even if with its resulting slight limitations, which were greater than we were hoping for, it goes way beyond what the old PAS used to have.

1515 But anyway the point is that nearly all of those people who were speaking against were speaking with one voice. They were saying why is Guernsey inventing the wheel here. A bit why Deputy Gollop said just before, he looked at the NHS, they are developing their own patient system, their record system, you can just piggy back on the back of that, save the States a lot of money.

1520 I resisted that and persuaded the majority of the States to go with Guernsey having its own bespoke system and my goodness I am pleased that I did because that, I have a lot of time for the NHS, but that was the most disastrous project probably in public sector IT ever to happen. They spent billions and billions on it and it ended up collapsing and just achieving nothing. It did not happen.

1525 So if we had piggy backed on the back of it, as the homespun experts in the States were all suggesting, we would have found ourselves in a very difficult position indeed. So this sort of system is absolutely essential.

1530 The last time it came forward, the last system that came forward, was not really predicated completely on there being a single patient care record, including the GPs. It is a bit like saying buying the Aurigny ATRs was predicated on fog-busting technology. It was mentioned as something that would be nice to have and nice to achieve, but the basis was actually just the nuts and bolts that were required and I think the same is true.

1535 One other reason I wanted to speak has been covered by Deputy Graham. It has not really been technological problems that mean that we have not got a single Health & Social Care record in Guernsey. There have been technological challenges, but the main point is that the GP practices have not been convinced that that is the path they want to go down and they are private businesses and we cannot coerce, or it would be very difficult to coerce private businesses to join in a joint project with the States if that is not their desire.

1540 It is interesting that Jersey are currently almost suspending the private nature of their GP practices, at least for the duration of the coronavirus threat and it will be interesting to see what comes out of the other end of that, because I do think there will come a time when we are going to have to look at how primary care is delivered in Guernsey and maybe not nationalise it but at least integrate it a little bit more closely into a broader Health & Social Care system, including how we control costs etc. But that is an issue for another day. I would warn that with the situation we



have at the moment, having a single patient record will depend on all parties actually wanting to achieve that.

1545 So I think in summary, I agree with Deputy Ferbrache, we have a gun to our head. I probably would have walked in the direction that the person holding that gun is suggesting, even if it had not been to my head, but Deputy Gollop is right. He is saying, why is this going to carry on beyond when the current system is supported? I think it is because there is no choice by that and we are going to have a dangerous period where it could fall over and I hope that, once we have made a  
1550 decision, we will be able to persuade the current contractors or the current providers to extend their support for another six or 12 months, knowing that it is not an ongoing situation.

But I think we have absolutely no choice but to do this. But I would like to know the background. I would like to know what is happening with the sort of Baltic state-style single point of contact between the citizen and the state, although that would obviously require huge security, but then so  
1555 does patient records, and I would also like to know why this has sort of being sprung on us.

As I say, I think we have to do it, I think it is right to do it. The old system is old. It makes me realise how long I have been around in politics now, because it was towards the end of my previous iteration that this obsolete system was steered through the States. So we have to do this but it does feel as if it has been sprung on us. It would be helpful, it will not affect my vote, but I think we  
1560 deserve an explanation about why it has been sprung on us in that way.

Thank you, sir.

**The Bailiff:** Deputy Prow.

1565 **Deputy Prow:** Thank you, Mr Bailiff.

I would like to just very briefly respond to two speeches, please sir. The one of Deputy Graham most recently and the one of Deputy Inder. I am a Member of Health & Social Care and I completely support this policy letter and I should say that right up front.

But I actually believe that Deputy Inder's speech was a good speech. I think it goes far wider, just  
1570 the specific issues of this piece of IT replacement. I thank Deputy Graham for perhaps giving me an opportunity to, perhaps again, question our practices, procedures and processes around the submission of requests for delegated authority.

I really believe, and I still believe, that we have not got this quite right. The speech that has nailed it for me, and I will not repeat the points made because they were made very eloquently, was the  
1575 speech of Deputy Ferbrache. For me, as a Member of Health & Social Care, it has balanced the need for an urgent replacement of a system against questioning the practice and procedures and the process and other Deputies have also questioned the amount of time and the procurement process.

I frankly believe that this is a debate for another day. One thing I will slightly pick up on Deputy Inder's speech is, in fact, there is an outline business case, and it is some 54,57 pages. I would just  
1580 like to quote one paragraph from the executive summary, because this is the position, I think Health & Social Care Committee has found itself in and I think it is pertinent and does answer some of the questions.

It says this, in the strategic case:

The States' EPR solution is ageing and with the version licensed by the States no longer being supported by its supplier elsewhere, the supplier intends to remove the support for the States next March as it is not thought it is either viable or beneficial to extend this. This creates a significant risk to the ongoing provision of health and care services, which it is imperative that we address.

1585 This is the background to which Health & Social Care have had to consider this and have had to consider this and have had to seek the advice of officers over a period of time. It is against that background.

I also would like to refer to the speech of Deputy Green and the Scrutiny Management Committee and I would like to perhaps give some reassurance. In his letter and in his speech, he  
1590 pointed out this is, in essence, a change management programme, and I think that this is a very

important point and Deputy Le Tocq, in his opening, spoke about a cultural change required, that is needed.

So this is not just about implementing a new piece of software, it is about this how this integrates with the Partnership of Purpose and how we take this forward, i.e. how we make the organisation use this piece of software to best effect. This is actually dealt with in the policy letter at section 7.4.

So, whilst I believe our whole process of application to the States for capital projects is flawed, in these particular circumstances, I urge the Assembly to support this. But I think, and I agree with Deputy Ferbrache, that there is wider work that the States needs to do in this. Particularly to the point Deputy Graham made, what I think is absolutely fundamental is that States' Members do need the information that they require for them to pass delegated authority onto Policy & Resources. I do hope the 57-page outline business case can be supported by the States and I would ask them to do so.

Thank you, sir.

**The Bailiff:** Deputy Lowe and then we will break for lunch. Deputy Lowe.

**Deputy Lowe:** Thank you, sir. I was around when Deputy Roffey was speaking earlier about the previous Trak system that we have got in Health & Social Care and it was a painful debate, because there were the same questions being asked then as I am hearing today. It was going to be all-singing, all-dancing, we would have just one record that if someone went into A&E at the time, it is now called Emergency Department, they could click on there and see the medication that had been given from a GP or from the MSG.

It was going to be a lot bigger than was actually received in the end and, of course, the plug had to be pulled, because a lot of it was running away with the money and going much more than the £7-9 million that was expected at that time.

That has been recognised by Health when they presented this Report earlier on and I thank them for recognising that. So, where we are at the moment, we have had an excellent speech from Deputy Inder and an excellent speech from Deputy Ferbrache. Both are absolutely right. This is the norm with many of the debates that we have before us, it is about trust.

Unfortunately, or fortunately, we are in a position unless we are an expert or a professional in a particular field, we have to take these reports on trust. We can challenge, we can ask questions, but unless we have that ability to understand exactly the technical natures of some of these very complex reports, it really does come down to trust and for the information we have got before us.

We all know that we can probably get a very good salesman who could sell a fridge to an Eskimo and you have to sort of try and unravel what is genuine and what is just sales pitch. But, for me, I will be supporting this, because I do believe it is a case that this needs to go ahead. I am trusting that this time we have got it right. I am trusting that the cost is right this time and I am trusting that I am not going to be hearing, when I am in my rocking chair in how many years' time, that actually the States have run away with the money and have had to pull the project because it has not worked. I ask Members to support this Report.

**The Bailiff:** Members of the States, because we have two speeches to conclude this debate and goodness knows what sort of voting, I think it makes sense now, because it has just gone 12.30 p.m., to adjourn until 2.30 p.m., so we will now adjourn until 2.30 p.m.

*The Assembly adjourned at 12.33 p.m.  
and resumed at 2.30 p.m.*

**Urgent Capital Bid –  
Replacement of the Electronic Patient Record System –  
Debate concluded –  
Propositions carried**

1635 **The Bailiff:** Welcome back, Members of the States. I am going to call Deputy Dudley-Owen next.

**Deputy Dudley-Owen:** Thank you, sir. Can you hear me?

**The Bailiff:** I can hear you, yes, thank you.

1640

**Deputy Dudley-Owen:** Good, thank you. Apologies for constantly checking. I am slightly sensitive about it given that my first few weeks doing Teams meetings I was generally muted or badly mic-ed up. Thank you, sir.

1645 On 15th May, the Health & Social Care Committee, Deputy Tooley and our Committee represented by Deputy Le Tocq, presented to States' Members the Electronic Patient Record capital bid proposals. Members were then provided with the relevant outline business case, FAQs and executive summary of the post-implementation review from the previous system.

1650 These documents supported the policy letter, which was lodged in early April. Most speakers today have highlighted their surprise over the haste with which these proposals have been presented and I too am among them and share that surprise. Whilst it is clearly a priority for the Committee, it has not been apparent from previous documented references that there was such an urgent priority, which is why I think many of us have been taken aback when this landed, especially given the coincidence of the unfortunate timing with the Covid virus. We just did not expect it and had not been sufficiently primed to.

1655 I still do not fully understand the rush to the States with a request for money. It has been explained that it was clear five years ago that TrakCare system was failing and project managers were removed from their positions because this was the case. I would ask, therefore, Deputy Tooley, in her summing up, to make it abundantly clear, for the record, why it has taken the Committee so long to come to the States.

1660 During the States Members' presentation, it was mentioned that clinicians needed to decided what they required of any system at an operational level. But the political board should surely have created the pace of change in the department in order to fit with the strategic direction they have set? It has taken nearly a full political term of office for this to come to the States and it is obvious that it could not have landed at a worse time. It is clearly a matter that needs urgent attention. That  
1665 I cannot deny, but I do not understand why it was not tackled earlier in this term.

As Scrutiny Management Committee have pointed out, this is actually as much about change of management as it is about the installation of a new IT system. I do not think that nearly enough has been made about that part of the process, in either the policy letter or indeed during the presentation. The training costs and time to change the culture of the organisation will be immense,  
1670 I believe.

I want to understand better what measures HSC have put in place to measure changes and that the new tech will bring to the department and the individuals concerned. Another point that I remain unsatisfied about is the data share with other medical practitioners outside the state, which includes MSG and the private practices.

1675 Deputy Soulsby mentioned this in this document and presentation, saying that talks are being entered into with the practice, but this does not give me the assurance at this stage that I need. There is a lack of detail such as the ownership of patient data and formality in regard as to what sort of binding arrangements or agreements might come out of those talks.

1680 Deputy Inder has raised an interesting, important point about base line information, from where this should actually have started. Some Members may remember there is an actually an ongoing programme of work, going back the last few years. We approved a Law last year in June, so that we

could create a master record, for each one of us, in the community that is, to share across all of the different platforms in a similar way to what Deputy Inder was describing.

1685 That work is currently being driven through the Future Digital Services contract and the first part of that, I understand, will be going live, with the individual online tax payments, this autumn. Deputy Le Tocq, maybe if is giving closing remarks, which I am also a bit confused about who will be doing that, might be able to give us a little bit further detail about this when he closes.

1690 So, in summary, whilst I appreciate the benefits that a replacement of the TrakCare system will bring, along with the enhanced digitisation, I am still unclear as to why this matter appears to have only recently hit the top of the Committee priority list. Effectively, this would have been the end of the political term.

1695 In addition to this, I feel insufficiently informed due to the speed at which the proposal has come to the States, as well as the lack of information around the management and training of the change that will be needed to successfully implement the changes. Regrettably, this means that I will not be able to support the proposal, but then neither will I oppose it either and I will keep an open mind by abstaining from the vote today, because I am unable to make a decision either way. Thank you.

**The Bailiff:** Deputy Laurie Queripel.

1700 **Deputy Laurie Queripel:** Thank you, sir.

1705 I just wanted to pick up on a few of the points that have been made by Members during this debate because they have got me thinking and of course that is the idea of debate, to some extent. In particular, to start with, I wanted to start with one of the things that Deputy Prow said just prior to our adjournment, because this made my ears prick up. I did not quite understand it. There is a disconnect here somewhere.

1710 Deputy Prow, and I will stand to be corrected, of course I will, I think said this project fits into the work taking place with regard to the Partnership of Purpose and yet, in regard to what I have heard and what I have read, it is something that primary care providers are not particularly keen on and are not going to take part in.

1715 But I thought the idea of the Partnership of Purpose, the overall aim, was to create greater collaboration and co-ordinated working within the wider health and care community, the health and care sector. Yet primary care providers, as yet, are not really involved in this or might not be involved in it. That does not seem to match up. So I just wonder if, when Deputy Tooley sums up, she could address that point, because that did concern me a touch to hear that.

1720 Now Deputy Lowe, once again I understand why she said this, she spoke about ultimately there is a need for us to trust Committees, to trust those involved in these projects and these workstreams. Now I get that. As an Assembly, we are expected to scrutinise these things and we are expected to challenge where necessary and most of us, sir, with the honourable exception of people like Deputy Inder, are blatant when it comes down to things like this, when we come down to things like IT.

1725 So there is an inequality of arms here built into the process anyway, so that will be difficult enough as it is. But it is even worse when something is almost, not quite but almost, thrust upon us. It makes it much more difficult for Members who are only lay people to properly scrutinise and that is not a satisfactory situation at all sir.

1730 Now there have been some good speeches this morning pointing out the shortcomings and problems with the way this has been gone about. Some good points made by Deputy Ferbrache, Deputy Roffey, Deputy Smithies and others. But some of them, Deputy Roffey, Deputy Ferbrache, the two of them, have gone on to say that although they can see problems here, there are shortcomings, they feel they have a gun to their head, it is one minute to 12 and so they have no choice but to support it.

1735 But my worry about that is how often do we do that? Are we not in danger of setting a precedent here, almost opening a door for this sort of thing to become more common practice so that committees and bodies of the States will, not routinely but more than occasionally, come to the States and say look this is something that you have overlooked or that crept up on us and it is now

a matter of urgency and we really would appreciate and expect you to support his and to approve this because we are getting towards a dangerous point.

That is a concern, sir. Because with this project, not only has this project bypassed the prioritisation process, but it has also avoided the reprioritisation process and that is one of the things that Deputy Green referred to when he spoke to the Scrutiny Management Committee's letter of comment.

Now, I agree with Deputy Ferbrache that you can have too much process. Process can be onerous. It can be there for the sake of it and it can stop good things happening. But there is such a thing as necessary and proportionate process. Process that creates valid filters that things have to pass through.

A cynic might say this thing here today, I am not saying it is happening on this occasion, this could be a tactic that is employed, a good way to circumvent good process, and then the States believe that they little choice but to roll over and to accept what is being put forward and I think we have to guard against that. I think we have to watch that.

I just wanted to move onto something that Deputy Langlois said, because he was on really good form today. I did not think he was on good form yesterday during another one of our debates but today he was on really good form. He often makes insightful observations and interesting points and he was right because HSC, I am sure within the HSC bubble as it were, they think that everything is well co-ordinated and one project fits into another and it is all part of a big plan, but for some of us on the outside, it does not seem like that. It does seem a bit piecemeal.

This project comes to the States and that project comes to the States and they all come with a price tag and that is without even mentioning the hospital modernisation programme, which is going to dig quite significantly into the Capital Reserve, so I think Deputy Langlois is right, if we are going to understand in the longer term and at least the medium-term, the requirements of the health and care service and what is expected of it and what is expected in regard to funding, I think we do need at least some sort of short, medium-term plan, five years or so, to understand what is coming from there and what funding will be expected and whether that can be accommodated or not. I thought that was a really good point.

Deputy Gollop, sir, I think it was him, I apologise if it was not, he spoke about where the responsibility for IT provision lies and as we know, it has now been, and has for a while, centralised. I do wonder if this problem we are seeing now has been created because there has been a lack of communication between HSC and that centralised function, that centralised provision. If IT is going to be a core way, and it has been for a while and it will of course be a core way the States works across the organisation, it is really important I think that there is really good and consistent and quality communication between that centre, IT in the centre, and all States' Committees so nothing creeps on anybody.

I think maybe that this has crept up on the central function and it has kind of crept up on HSC. That might be the case, I do not know, but I really do think that that is something that needs to be looked at. If IT is going to be a really core way the States works and it is a provision that is central, I really do think there needs to be really good open, clear, consistent, quality lines of communication between committees and that centre to try and avoid this kind of problem.

Most Members will now, I am a bit of sceptic. I am not a convert when it comes to IT but I accept that it is a way that we have worked for while so it is going to be at the centre of what we do in the future. But I agree with Deputy Inder, he is a bit of an expert in these areas, and he basically said if this whole IT provision, this whole area of IT working is not handled well, it is going to become a bit of a money pit. I always thought that was meant to make the States work more efficiently and actually cut down on costs, but it could be a money pit if we are not careful.

So I really do think that this whole area needs to be looked at. I know it is a bit of a hackneyed phrase now but there really does need to be an holistic look at this kind of thing to avoid it becoming a money pit and in reality to be what it is meant to be, which is to help the States to work more efficiently and effectively and hopefully to save some money.

1785 As I say, sir, I have always been a bit of a sceptic when it comes to these things. My worry is that  
how many times are we going to see the arguments made over and again so you get a super duper  
new system put in place, it seems to be the thing that is going to tick all the boxes and work really  
well and just eight or 10 or 12 years later you hear that system is no longer, for whatever reason, it  
has got to be replaced. I just how many times that we are going to have to see this across the States  
1790 and if really anybody is keeping an eye on the price tag that is being put up with that kind of thing.

I have always been a bit of a sceptic in regard to the storing and sharing of data. I appreciate  
the sharing of data, I can understand why it is understandable from a service point of view but I  
have never been convinced with electronic systems data can be held that securely. It could always  
be prone to be hacked or data systems or protection systems can be breached or they can be used  
1795 inappropriately. So I have never been a great fan of it from that point of view. But I do accept it is  
the way that the States and the world is going.

I just wanted to say that some of the things I have said now will become a bit of a theme as we  
move through this States' Meeting and the items were are going to look at because I might be a  
bit obsessed about it and that might be coming across but I really do think we need that re-  
prioritisation process sooner rather than later and I really do not think we should be doing much  
1800 more until we have that debate. So I am likely to be sort of saying these kinds of things again as we  
move on.

But as for this, I know Deputy Inder has said he is going to put his money where his mouth is  
and he is going to vote against it, I am not sure if I will be doing that, but I might have to abstain  
1805 because at this stage I am not totally convinced and I am not satisfied at the way that all of this is  
unfolding. Thank you, sir.

**The Bailiff:** Is there any other Member who wishes to speak? Deputy Soulsby.

1810 **Deputy Soulsby:** Thank you, sir.

I thought I would pick up on a few points that have been raised in debate so far and, focussing  
on Deputy Green what spoke about in terms of the timing and I think that was also alluded to by  
Deputy Laurie Queripel and Deputy Dudley-Owen, I thought I would do that by answering questions  
from Deputy Gollop what we had already considered.

1815 There are a lot of reasons behind the time it has taken, it has been considering both the approach  
taken and the sorts of systems that could be used, functionality and how we did it. One of those  
aspects was trying to see whether we could do something jointly with Jersey and, I have to say, that  
has taken some time to try and see whether that was possible. In the end, it has been something  
that ended up being too difficult to sort out and so that is why we decided to take the route we are  
1820 going.

Also, I think, it is kind of alluding to what Deputy Laurie Queripel was speaking about, in terms  
of the transfer of functions from Committees for IT, to what is euphemistically called the centre, I  
suspect at the start that probably was an issue here, understanding whose roles were whose and  
also that function, understanding the requirements of Health & Social Care at that time.

1825 But I think it is also important to bear in mind that certainly I work very closely with Chief  
Information Officer early on at the very end of last term and seeing the state, having to put right  
many aspects of the system we have got now. That does not sound terribly grammatically correct.  
What I am saying is various procedures and processes had to be put in place to at least give us  
some assurance as to the stability of the system.

1830 I thank the Chief Information Officer for the work he did back then. It was also a good learning  
experience. But this is a complicated system what we have been looking at. We have been looking  
at various alternatives. We have looked at different systems and how we put them together. We  
have looked at other jurisdictions. We have also looked at the UK preferred supply list as well. I  
think it is really important to understand this is not something that is all of sudden, beginning of  
1835 this year, we said, 'Ah, we need to do something.'

I think part of the other issue has been how it was thought it could be funded. At one point I think there was an understanding somewhere, although it was not within a Committee, that this could be funded from a different source and that has proven not to be the case. So that is why this policy letter has come to the States.

1840 There is also reference, I think Deputy Dudley-Owen said why did not HSC know about this and HSC should have done this and they should have been on top of that. I think it is important to know that IT and the procurement of IT really does sit with P&R, it is for HSC to say what our requirements are and I think this has probably been the first real evidence of the difficulties of that and learning as we are going along about what that actually means. But we got there in the end and so we have  
1845 the policy letter now.

I will just pick up on some other points. Deputy de Lisle says £20 million on IT is a waste, we should spend it on front line workers, on the doctors and nurses. Coincidentally, I was listening to, I think it must have been the World at One on Radio 4 yesterday at lunchtime, in between the States debates, and they had the head of a representative body of charities and he said that the UK  
1850 Government's focus just on the front line has been a real mistake and it has been negligent, he said, in ignoring IT and the risks that it has caused by doing so and the concerns and inefficiencies that have resulted.

I think it is so easy to say, right, we need to spend it more on front line workers but really, I think if you actually spoke to some of the front line workers they will tell you that they would really like  
1855 to have a system that worked and enabled them to work more efficiently and effectively, required less in terms of duplicated input and difficulty of input and was reliable and was easy to log into of the morning. Because at the moment it is not and they have been persevering for a long time.

Deputy de Lisle thought we could modify the system. Believe you me, I have seen it, and looked at how it is and modifying it, you just could not. You just need to see the system to understand that  
1860 modifying what is already broken is a complete waste of both time and money. The version we have got and what we are doing, we really have not got the right tool for the job. The best thing we can do for our doctors and nurses is give them the right tools and this is not it.

Deputy Inder, now he had a very forceful speech as usual and really making great statements about it all and talked about his 10 years in the trade by which I suspect he means IT. But I would  
1865 just say I have a bit of experience in this area as well, both implemented IT systems and being responsible for quite significant change programmes, so I have got a bit of experience in this area and I think that is why the comments that he made, talking about what the costs of these things will be, for a start he does not appreciate that health and care systems and electronic patient records are not simple and they do come with a heavy price tag. I can assure you that all the work that has  
1870 been done so far has demonstrated that.

In addition, he does focus on the IT side of things. As I say, I have been involved in change programmes, which were delivered on time and in budget, and this is not just about IT, in fact the IT is the side issue here. We have a huge opportunity to really change how we deliver Health & Social Care services.

1875 People are talking about how will this affect our patients and people in the community, that is what this is about. At the moment we cannot do all the things, we cannot share our data with patients, we cannot empower our patients because our system is so clunky and it is hard enough for our professionals to get in, let alone the public, and certainly not being able to do so in a way that is data secure, I think that is really important to make that point here. This is a change  
1880 management programme.

I think what went wrong with earlier times, when IT was brought in everybody thought it was about the IT, but it is not. It is about how we look at the organisation. This has got huge potential to really make health and care more efficient, to be able to ensure shared access to data and, on that, I will move onto primary care.

1885 Now it is unfortunate that we have got this policy letter, which seems to appear that it is in isolation and not joined up. Deputy Laurie Queripel made that point and I totally understand where

he is coming from on there, although this is all referenced within the Partnership of Purpose policy letter.

We have also drafted, and it is almost ready to go, a policy letter on the future of primary care. Now, we ended up pulling up because of the situation we are in and also the opportunities it has given us. In that policy letter, what still holds good is the desire and the will to move to more integration with primary care. I know people think that they are private business and they do not have to, well we have reached an agreement with Queen's Road Medical Practice to work to commit to Partnership of Purpose. I know that they are absolutely willing to be able share those records.

We have been in discussions with the other practices as well. They have got issues with their own system. This is a time, it is absolutely right then, to get the patient records, which is what we are talking about here, this is like the core system, that central database, from which we can then add on the other requirements within the health and social care sector and that will be in relation to primary care records. That is something that was going to be and is in our draft primary care policy letter, which is very much about that greater integration.

I know Deputy Roffey mentioned about this and wanted to know more about it, but very much in there. We are now revisiting that because we think there is even greater potential at this moment in time and that is why that will be coming to the States in the next few months and is being treated as a matter of priority.

So, really, I just would like to follow up on other aspects of this. Just answering what Deputy Gollop was saying how it would help the end user. This especially will enable us to develop the care passport, which will link in to the overall Digital Strategy of people being able to access Government services from one portal and very much the care passport will be part of that. I think if anybody has been to Agilisys' presentations on this, that is very much what is envisaged. The care passport will be just one of those aspects that people will have available to them as part of the whole Government portal.

I just want to just go through my notes here. I am picking up a few points that people have said. Deputy Smithies who really seems to say, 'I just do not think it really matters. I need more information.' I am afraid we just have not got the time. I know this is unfortunate. This is not a great way of doing it. I can assure you my Committee has not been happy about this at all. But if we do not support this policy letter now, we are in a really dangerous place.

It is on issues, working with bits of elastic and safety pins, in some respects. A lot of work, as I say, has been done by the Chief Information Officer and his team to make it as resilient and stable as possible, but it is way past its sell-by date and on that, these things change all the time.

There was something Deputy Ferbrache mentioned about how long it will last. Well, IT moves at a cracking pace now and things are changing all the time and the whole nature of IT is changing all the time and how systems are delivered in such a different way. I do not think anybody can say how long it will last. What we are trying to do is put in a system that will enable us to move more easily into any future system and that means being able to have that resilience across the different areas of sector, not being reliant on one system.

I think, in the past, people have tried to think that they could buy a system that would do everything, but they have ended up being a jack of all trades and a master of none and we have not got the best that we could from every bit of kit. So that is what it was trying to do and 15 years ago the hope was it could be one system, different modules, that would do that. Now that is not the case and we know that from a resilience point of view, it is better if we do not.

So at the moment this is the core piece of kit which has the core data records on it. But then there are elements that will be separate from that, which will be bolted on and they will be able to connect to each other.

I just want to see if I can pick up anything else. I just thought it was ironic, hearing some of the comments, because we do hear about, which I completely sympathise with, about the process being so slow. Yes the procurement processes have been very slow. I have moaned about that in this Assembly more than once. But then to have people saying, 'I need more information and an outline business case. We should not be rushing into it.' We cannot have it both ways here.



1940 I think I have covered virtually everything I was going to say. Just to really reiterate, I know it is unfortunate that this paper has been brought as it is. But we are where we are. This is a really important policy letter. If we do not get this policy letter approved now, it is not just about cost, because it will cost the States money, because we will then have to go into mitigation exercises and have to spend a considerable amount of money trying to put things right, but also we need to think about the people in the community who this could affect.

1945 Because, if we do not have the records and we cannot rely on our records, that will put people's lives at risks and I hate to say it, it sounds a bit OTT, but it is absolutely true. If we cannot ensure and trust the data and records that we have got, then we are endangering the service that we can provide. Thank you, sir.

1950 **The Bailiff:** Deputy Oliver.

**Deputy Oliver:** Thank you, sir.

I have really mixed views on this policy letter. Part of me is saying vote for it because I have been on the end of Trak where it really has not worked and unfortunately it completely failed me and very nearly did kill me. So, Deputy Soulsby was not exaggerating in that respect.

1955 But I want some reassurances, because I was under the impression that I had been told quite a bit of the Trak system had actually been fixed inasmuch as, it is going quite technical but I think it is quite important just to go into it, because when you have a blood test, if it is a standard blood test, it just gets ticked off on the sheet and then it comes back with the doctor, where if you have something slightly different and unusual it gets hand-written in the box.

1960 Those were not actually going into the Trak system and it was down to the individual doctor to actually go back into the Trak system and find it. So that left a huge amount of human error and memory that somebody had to recall. I want some reassurances that if, a, that has been either fixed or, b, will this new system tracking system actually fix that problem?

1965 Now the other thing is I know that GPs do not want to come onto the system straight away and that there could be a bolt-on system, which is great for the future, but what happens at the moment? Because, again, when the system failed me, it is because somebody had to send a fax over and they faxed the wrong blood results over.

I do not want that happening to anybody else and I want the doctors to be able to access what MSG have, so there is no actually sort of difference in opinion or difference in results, so it does not get mixed up and it does not actually do something more serious, like kill somebody.

1970 The second thing is that on page seven, 3.7, it says that the time period for the system for replacing is at least 18 months. Now the system, when I was unfortunately very ill and was using it quite a bit, it really was not fit for purpose. Is this system actually going to last 18 months are we going to have to patch repair it again or can it not be patch repaired and this is what it is and we are just going to have to hope for the best?

I just feel that, as so many things within the States, I just do not understand why this happens in Government so much that it is left until the 18th hour and suddenly this is an urgent requirement, we need to do this, because there is no other choice, otherwise people's lives are going to be lost.

1980 It just really worries me that the system which has been going for 15 years, and it even says that there was a lack of investment at the post-implementation review at the last Budget, when was it, from its inception to 2015. So how am I going to know that the same problems are not going to occur with this new system? It just seems that the States are so good at saying, 'Right we need a new system, we cannot repair the old one, we will just get a new one and that will fix everything.'

1985 When, actually, nine times out of 10 we are back not even 15 years later, normally five, saying, 'It is going to cost a lot more money because there are a lot more things that we did not quite envisage that just happened.'

It just concerns me that we are going to be back in the same place in five, 10 years' time. Fifteen years' time I think is actually, I suppose, is okay for an IT system, given how much we have moved

1990 on. But given that it is in such a dire place, surely we knew about this when we took on the Agilisys contract?

1995 So we looked at everything that the States needed. We have got I think it is an eye-watering £200 million that we have paid out for updates and new systems and everything and yet we have just suddenly gone, 'Oh, we forgot about the Trak system, that is another £20 million that we are going to have to pay out.' Is Agilisys almost getting paid twice?

**The Bailiff:** Deputy Oliver, Deputy Le Tocq wishes to raise, I think it is a point of correction. Deputy Le Tocq.

2000 **Deputy Le Tocq:** Yes, thank you, sir.

I hesitate to interrupt but Deputy Oliver has made comment I am afraid we have tried to address it several times but the Smart Guernsey/Agilisys Guernsey contract is not new money and the contract is over 10 years and it is money that we were already spending. But it is partly because that money was hidden in various different pockets of departmental budgets, we have now put it together into a contract which would have cost us far more. So it is not new money and I just wanted to correct her on that basis. It is a misconception.

**The Bailiff:** Thank you Deputy Le Tocq. Deputy Oliver to continue please.

2010 **Deputy Oliver:** Sorry, not new money, then; it is within, we have already budgeted for it. That is fine. But we are still saying fine, we have got this contract and then, less than a year later, I believe, we are saying actually we need to find another £20 million to set up this system, whether Agilisys do it or not, I do not know. I am sure that will go through the correct procurement.

2015 But I just want some reassurances that this system will be fit for purpose for the next 18 months and we are not going to have any more awful results. What happened to me, I would not want that to happen to anybody else in the Island. I would not want them to be put through what I went through because the Trak system was not up to standard and it just was not working.

2020 The other thing I want to ask is that, with data and how it is moving forward is that will patients be able to access their own records? It might not be that doctors will want them to see everything but there will be sort of a page where you can see your blood results, where you can see everything, so that they can almost just have a look at themselves, because I know I could have self-diagnosed myself and saved myself three months in hospital. I am just going to repeat that, three months I was in hospital because of the Trak system. So, if I could just have those reassurances please, that would be greatly appreciated, thank you.

2025 **The Bailiff:** Deputy Dorey.

**Deputy Dorey:** Thank you, Mr Bailiff.

2030 I just wanted a couple of questions answered if that is possible please. The problem with the existing system is that there have been so many changes made to the system, to the software, basically the package provider are not willing to support it. So assuming that we are buying another package, I just want some assurance that we are not going to have bespoke changes made to that package to meet our needs and people are going to compromise on the functionality in order to have a package which will be maintained by the provider in the future, and not have the problems that we have had with this current system.

2035 Also, from my time at HSC, I can recall there was a problem with MSG not being entirely satisfied with the package that we bought and they were using alternative systems as well, so I would like some reassurance that MSG will be using the new system.

2040 Also, Deputy Soulsby mentioned about primary care coming under the system and again I would like some reassurance that, in order to bring primary care onto the system, that there is existing functionality within the package for them and we are not going to have to start having bespoke

software added to the system, which will mean that we will have the same problems in the future in terms of maintaining it.

2045 Deputy Tooley mentioned about people queueing up to use the existing system. Surely that is just a matter of having the right hardware devices, so that there is sufficient number for people to enter the data into the system and surely we can save the time that is wasted for people queueing up by people just purchasing the right amount of equipment? Thank you. Those were the questions I had, sir.

2050 **The Bailiff:** On the basis that no other Member is seeking to speak in general debate, I am going to move into the wind-up phase and I am going to call Deputy Le Tocq first, because I understand Deputy Tooley is to have the last word. So Deputy Le Tocq.

**Deputy Le Tocq:** Thank you, sir.

2055 There has been a number of questions and concerns raised, many of them around a few central themes and, as I said in my opening, I am going to try and concentrate on those that affect P&R's mandate and Deputy Tooley, no doubt, will deal with those that affect HSC, although I note that Deputy Soulsby has already spoken and addressed a number of the issues, in fact some of the issues that, probably, I will be addressing as well.

2060 But can I start with the question that was asked by, at least, Deputies Green, Roffey, Smithies, Ferbrache, Merrett, de Lisle, Dudley-Owen and probably a few others. That is why are we bringing this as an urgent request? Why now? Well work has been ongoing for some time, as I explained in opening, to explore options available to the States and to understand in detail the requirements, bearing in mind the experiences of the previous system, I said the disappointment, that that had  
2065 brought about.

Various options, both in systems and funding, were looked at. That did take some considerable time. These included the consideration of the purchase of a solution of software as a service, coming out of revenue expenditure, but would not have supported the States' data sovereignty position and again it is a balance of risk.

2070 So, as I think Deputy Soulsby referred to it, sometimes we scrutinise something, we say, 'we want this', but there is another risk involved and we look at it from the other angle and we say, 'we want this'. Well you cannot have both. In this instance, the data sovereignty was deemed to be of utmost importance and therefore the solution that is being recommended is the capital expenditure.

2075 Now the absolute urgency of this work, bringing us to the point where, in terms of setting the next investments cycle, we only came to this particular view of a solution and the need for an urgent solution in quarter three of 2019 and that was because, due to the contract negotiation work in Smart Guernsey particularly, and a better understanding of various contracts in different States' departments and Committees, that it was not going to be possible to continue to extend and patch TrakCare any further.

2080 So, actually, it was a problem that was highlighted because we were doing the Future Digital Services and Smart Guernsey systems. I think that needs to be underlined here and, as a result of which, the urgency was identified late last year and rapid escalation of work has ensued to allow us to procure on time.

2085 But, as I indicated before, it is a very tight timescale and putting together a policy letter in this way, to be able to present to the States, does take some time, as people know, plus we have had the issues of Covid to deal with. So it is regrettable that we are having to do it in this way, but that is the fact in terms of the history of coming to an agreed solution and making sure that the clinicians involved were listened to, to make sure it was not just an IT solution, but it is something that fits the bill appropriately. So the drafting of this policy letter and the reporting of the supporting  
2090 business case was done in quarter one of this year.

Moving onto another theme of questions and that was to do with the concept of the single customer portal, which of course has been mentioned much in our debate on Smart Guernsey and

as part of that particular programme and this addresses questions that Deputies Inder, Ferbrache, Roffey, Dudley-Owen and others have raised.

2095 We are indeed committed to and have the strategic objective of delivering a single citizens'/customer portal for Islanders to access all Government services. That is part and parcel of our objective. It is a key aim of Smart Guernsey. However, it is not practical to create a single system that delivers the technology enablers to areas such as health, tax, social security, etc. These are specialist areas that need specialist systems to operate efficiently and effectively and, in particular  
2100 sir, there are certain laws and regulations, such as Tax Law, for example, and data protection issues, that prevent us from having one system that does deliver all those things because of the protection that is needed and the limitations between their existence.

But in terms of the customer-facing portal, it will be a one stop shop. So, I suppose the question that comes out of that, and it was a question that was alluded to by a number of speakers, and that  
2105 is what have we done and what is going on, then, in terms of the single customer portal?

Well, we have approved the Register of Contact Details (Bailiwick of Guernsey) Law, that was approved this year by the Assembly, which provides a legal basis for creating a master record for every Islander. We are currently building the single digital front of house with our Agilisys Guernsey partner, through which all of these transactions will take place and, I think as Deputy Le Clerc alluded  
2110 to, this is providing the sort of tax contribution revenue system, a unique electronic reference number, which we are calling a 'Guern', the MyGov portal, which Islanders will log into via all sorts of devices, it can be done on smartphones as well, customer identification access management, which provides the identity verification to keep Islanders' data safe.

The virtual call centre, to handle all calls to every part of the States and this was accelerated and  
2115 deployed in only three weeks to support the Covid-19 response. Just at that point, I will just address something that I think Deputy Laurie Queripel mentioned in that he alluded to the fact that he recognised that IT was important but he was somewhat questioning just how much should be invested in this. I would say, how would the last six or seven weeks look if we had not invested in IT? We would not, certainly, be able to do what we are doing now.

2120 So I think it is vital and I would congratulate those who worked very rapidly. We would not have been able to do it previously, but with the help of our partners in Agilisys Guernsey, much has been achieved right across Government.

We will link with the various specialist systems into this single digital front of house and what we are talking about now is all part of that. The first major launch, as I said, will be personal tax  
2125 returns, part of the revenue service programme, something which I think many people will be pleased with. If they are used to receiving information from the tax office, we know that the system there is in need of much improvement. Deputy Dudley-Owen referred to that. Then we can accelerate and link other systems, such as healthcare, to deliver care passports, which Deputy Soulsby has referred to, as part and parcel of the Partnership of Purpose.

2130 So this programme is underway and there is an overview and strategic plan as part of the wider public service reform programme and the principles of Smart Guernsey, so that everything is as integrated as it can be.

Now, the third theme that I could identify in some of the comments and questions was around the financial benefits. Certainly, Deputies Green, Ferbrache and Smithies referred to this. We are  
2135 modelling through to 2040 and it has been conducted in partnership between HSC and the Treasury.

On that basis, we found that simply seeking to do business as usual and to maintain productivity would not address the significant rise in predicted healthcare costs, which we have been saying for  
2140 some time but obviously are perhaps more paramount than they have been in the past. It would lead us to a position where healthcare costs the Island £41 million more *per annum*.

So this initiative is part of a wider suite of transformation initiatives designed to rein in that cost increase. Now some people have asked, what are the realisation of the costs? It looks like on paper it is going to cost more. But I can say that the reason for that is because it is to save money elsewhere. If this backbone system is not in place then the added extra costs to us as a Government

2145 will be inevitable. But at least this achieves the possibility of finding solutions to those that are not currently at our disposal.

Whilst we are expecting significant efficiencies from the implementation of the new EPR, as I said at the outset, our decision to procure and implement a new system is not based on costs savings. But there will be, nevertheless, efficiency savings, which perhaps are difficult to quantify but Deputy Soulsby alluded to some of them and I will give one particular personal example.

2150 My wife worked in community for several years and currently, under the system, she would have to keep paper records when she was out and about visiting people or caring for people in their homes. And then come back late in the day and spend extra time duplicating that to add it to the system because she could not do it on the job. So, either that extended her working day or it meant that she could not spend so much time effectively helping those that she was actually employed to help. So there will no doubt be efficiencies like that that will be in place, that will enable us to save money and time and better invest in terms of people management.

2155 The fourth area that was questioned was about the length of implementation period. Is it too short and certainly Deputies Roffey and Gollop and others referred to this. Well, we are approaching the market for an off-the-shelf solution that will be configured but not customised. So the prior Electronic Patients Record implementation involves significant development, increasing the required implementation timeline and the change management challenge, which has been alluded to before.

2160 During the early market sounding exercise, we asked all suppliers to provide an informed view of the implementation's timescales, with consistent feedback received indicating 18 to 24 months. The PIR concluded that, in the previous implementation, the States under-estimated the complexity of the requirement and over estimated its ability to manage and implement complex change.

2165 The States approached the implementation as a single large programme, with a lack of the required resources, skills and experience needed to deliver the change effectively. With these lessons learned and understood, our approach now will ensure the implementation is broken down into a series of more manageable projects, with the required provision of technical, project and change management expertise to not only implement the system but deliver sustainable improvements to ways of working.

2170 Under the current contract, with our current suppliers, they are committed, whilst they will not extend that contract beyond March next year, they are committed to work with us in terms of an implementation to a new system. That is part of their current agreement with us.

2175 There were a few individuals who asked particular questions, which I will just rapidly, if I can, seek to address. Deputy Merrett asked how does this fit into the recovery strategy and obviously, in a different context, the recovery strategy has been referred to and is being developed and will be brought to this Assembly. But, whilst that is being developed urgently, it is complex and includes wider capital portfolio and other States' Resolutions.

2180 But there is a timing issue, as has been alluded to already, where any delay that affects that would affect this even more seriously, which is why this is an urgent policy letter and an urgent decision to be making. As Deputy Soulsby said, my Committee also feels it is regrettable that we have to do it this way but that is where we are bearing in mind all the circumstances we have alluded to before.

2185 Deputy de Lisle asked why Agilisys could not adjust or modify the current system. I think I have probably answered that, to a certain degree, in my point of correction to Deputy Oliver, but just to underline that, our agreement with Agilisys, Smart Guernsey is to provide the existing backbone IT the £20 million *per annum* over this is what we were already spending for the last few years and it would have gone up more than that, looking at the expenditure curve, had we sought to continue to have in-house, alone provision of that IT.

2190 But even under that old system, hence TrakCare, in specialist areas, it impossible to develop our own systems, we needed to look outside for that. In this instance, we are partnering with Agilisys, they are helping us to do that, but trying to customise our own system or to continue to patch up

the existing system is not something that we think is a risk worth taking at all, particularly under the current circumstances.

Deputy de Lisle also asks if cancer imaging – if it included that. It is part of the system that is being suggested. Now Deputy Inder, with his considerable experience in IT, as I fully recognise, he called this a small system. I have just got some details on Trak. Trak holds 923,042 patient episode records at the moment, for 151,828 individuals. Now I cannot go into details as to why that is, but I am well informed that some of those individuals, obviously are kept, because their family members, they may not still be living but it is important in terms of keeping records so that they can access information as and where necessary.

But in addition to that, Guernsey also holds, HSC holds, records, in total over 10 million sheets of paper currently. That is escalating. Obviously there as more information and more details on individuals continue to increases and is necessary for medical science, that problem only increases all the time.

Deputy Gollop asked a question about Alderney and Sark. Obviously, Alderney is included. It is included at the moment under Trak and that will be replicated in the new system. Trak is not planned to be used in Sark because they have an independent healthcare system. That is up to them, we cannot force it upon them. Although, it is deemed that if Sark wanted to join it, the numbers involved would be relatively small and so the cost would be fairly insignificant in the overall scheme of things. But we have to cross that bridge in due course.

Deputy Gollop also asked if the MSG were part of the contract. Yes they are. They agreed to it. It has been alluded to already, they had issues with our current system and developed their own. I think Deputy Dorey referred to that. But they have been included in their current contract to make sure that they will be part of this.

There were a couple of additional questions just came at the end, I think, from Deputy Laurie Queripel. Actually, I think I have addressed that already, as I was speaking and, yes, in terms of the issue of why this is urgent and has only come up recently, I think I mentioned again at the beginning that initial solutions that were thought of, and it was a case that for many years I think HSSD, the old department, did not fully understand the contractual issues at stake with Trak, so a software as a service solution, which was originally thought of as a possible solution, but it became very clear last year that we could not do that, once we decided that data security was the most important aspect.

I think I am going to leave it there, because I think all the other comments that have been made have been included already as I have gone through, but I thank the Assembly for their patience.

**The Bailiff:** And Deputy Tooley, the Vice-President of the Committee for Health & Social Care to reply, finally, to the debate. Deputy Tooley.

**Deputy Tooley:** Sorry, I am just getting my microphone turned on. Thank you, sir and thank you everybody for what I think has been a very helpful and useful debate. I am going to try and go through my notes and responds to two things that have been raised but I hope you will forgive me and bear with me if some of these things have also been covered either by Deputy Soulsby, when she spoke, or by Deputy Le Tocq just now, when he spoke.

Going through my notes trying to find the bits that have not already been covered. Deputy Merrett asked how much the GP bolt-on was going to cost. I am not sure whether that has been covered by Deputy Le Tocq or not. I do not remember hearing him cover it. Currently, as private businesses, GPs obviously pay for their own software. But the cost of GP functionality would be highly dependent on what the specific functionality was that the practices would require. But that whole area is under review and any investment from the States of Guernsey would be business case-led, so I think that is important to know.

Deputy de Lisle raised the question of whether this really was necessary at this time and I really cannot state enough just how necessary this is at this time. The system we are using is out of date and cannot be further patched in order to keep it going. The organisation, InterSystems, who

supplied it to us stopped servicing and maintain this system for other healthcare providers elsewhere quite a long time ago and we have extended and extended way beyond what their original wish or willingness to extend was. We are absolutely on the beam end, as it were, of the pushing that we can take on this.

He also said it would be necessary to look at imaging for cancer screening and so on. Well, that is part of the system. I think Deputy Inder's comments have been largely addressed by various people but I am just skimming through my notes to see if there is anything that was not specifically covered. I think Deputy Prow also covered some of those issues, so I will not focus on those now.

I thank Deputy Gollop for his comments that he was likely to vote for this. I acknowledge and I accept the concern that there is out there across the States, generally, that people that they have maybe got a gun to their heads, that they are being presented with a policy letter at a point when it is impossible for them to do anything other than vote for it.

But I would just like to reiterate that what is being agreed today if, as I hope, the States support this policy letter and vote Pour when we move to voting shortly, is agreement to hand over the delegated authority to P&R to make this purchase on the basis of the full business case being presented and this being shown to be good value for money and returning what we need to have as an Island to deliver healthcare safely and well.

Sorry, lots of pages of notes. Again, Deputy Smithies asked if this was as urgent as we were led to believe and the only answer to that is yes. I dread to think what would have happened over the last few months, had we not had this up and running. I think Deputy Oliver's concerns and comments around what happens when things go wrong are hugely valid and relevant here. Can I promise that this system, that any new system we buy will completely rule out the possibility for human error? No. I really wish I could but I do not think it is ever going to be possible to absolutely promise that there will never be further human error and that we can rule that out altogether.

But we can massively cut down on those big gaps that between systems, between data entry points and so on, which allow greater likelihood of human error to occur. That is one of the things that we are seeking to do here and now.

Deputy Oliver also covered issues around patients being able to access their own record in that sense that, maybe, if she and others had had opportunity to access their own patient record they could have self-diagnosed and so on. Well, obviously there is the possibility of this, if someone has got the opportunity to self-diagnose they will do just that and get it right. But there is a huge possibility that if people have that opportunity, there is the likelihood that they might self-misdiagnose.

There is a reason we, as a society, train doctors long and hard and well and there is a reason we look for the best that are out there and Partnership of Purpose policy letter included this information, which I think is really relevant here. We wrote in there:

In addition, people need to be able to see their own confidential data by gaining access to their files, allowing them to make choices and participate actively in their own care. While this is already facilitated through Data Protection legislation, it needs to be supported practically. It needs to be recognised that promoting access, though, is just one element. If access is designed to empower users to take part in decisions about their own care, in a genuine partnership with the professionals, people need help understanding the records. Records are designed to support professional care for the patient and working in partnership with patients to ensure records are understood will be an essential part of redesigning the services. There is a broader consideration, therefore, in respect of improving Islanders' health literacy.

I mention that because I do not want people to think that what we are saying is that this system will lead to absolutely every patient having absolute access immediately, to be able to see exactly what is in their record so that they can, in effect, self-diagnose. Because I do not think that would be helpful, necessary or beneficial, in all cases, for all patients.

So I do not want to give the impression that when we talk about allowing people access to their health data, allowing is perhaps not the best word there, but opening up that access to people's health data, that it would necessarily be beneficial or helpful to allow that to be completely free and open access without information and education around that.

Deputy Dorey asked a question around whether some of the issues that I had highlighted in my opening were hardware issues. Surely just providing more kit would have huge value in cutting down some of this? Yes, clearly there would be some value in doing that, but it would not address all issues, and it would not actually even address the most important ones around system functionality and support.

Ultimately, the question we are here posing today to the States is our healthcare system needs a new Electronic Patient Record. We need that urgently, we have identified that there are providers that could do a much better job and give us much better opportunity for doing that well and for improving services to our population and for improving efficiencies, which will benefit the population, the medical staff and, ultimately, the way in which we deal with the money that we are given to spend on healthcare in the Island.

Is it ideal that this is coming with a ticking timebomb if we do not approve it? No, obviously that is not ideal and I hope that people will not feel that that is a reason to abstain or to vote against this. We need to make these changes and we need to do this now and I urge all Members to vote Pour. Thank you, sir.

**The Bailiff:** Members of the States, there are three Propositions, which you will find. There is a request for a recorded vote but what I do not know is whether any Member wants to take any of the three Propositions separately, otherwise I was proposing to put all three Propositions to you together.

If you cast your eye to the bottom of those three Propositions, bearing in mind that this has been a debate about the procurement process, I am sure you will be delighted to see that the Propositions have been submitted to HM Procureur for advice in this particular case. (*Dog barking heard via audio link.*) I do appreciate a bit of barking from someone, thank you very much!

There is no request to take any of the Propositions separately, so I am going to put all three of them to you together and there will be a recorded vote, please, Greffier.

*There was a recorded vote.*

*Carried – Pour 29, Contre 6, Ne vote pas 4, Absent 0*

**POUR**

Deputy Ferbrache  
Deputy Tindall  
Deputy Brehaut  
Deputy Tooley  
Deputy Gollop  
Deputy Parkinson  
Deputy Le Clerc  
Deputy Leadbeater \*  
Deputy Trott  
Deputy St Pier  
Deputy Stephens  
Deputy Fallaize  
Deputy Lowe  
Deputy Hansmann Rouxel  
Deputy Graham  
Deputy Green  
Deputy Paint  
Deputy Dorey  
Deputy Le Tocq  
Deputy Brouard  
Deputy McSwiggan  
Deputy Langlois  
Deputy Soulsby  
Deputy de Sausmarez  
Deputy Roffey

**CONTRE**

Deputy Mooney  
Deputy Merrett  
Deputy Meerveld  
Deputy Inder  
Deputy Smithies  
Deputy de Lisle

**NE VOTE PAS**

Deputy Lester Queripel  
Deputy Le Pelley  
Deputy Laurie Queripel  
Deputy Dudley-Owen

**ABSENT**

None



Deputy Prow  
Deputy Oliver  
Alderney Rep. Roberts  
Alderney Rep. Snowdon

\* denotes Members who voted by proxy

2320      **The Bailiff:** Members of the States, in respect of the three Propositions, on this matter of the Urgent Capital Bid, the replacement of the Electronic Patient Record System, the voting was as follows: there voted Pour 29, Contre 6, four abstentions and therefore all three Propositions are duly carried.

**Procedural –  
Order of Business**

**The Bailiff:** Deputy Inder, you wish to raise a matter with us, please?

2325 **Deputy Inder:** I do sir, and this is really on behalf of, I believe, Deputy Dorey and Deputy Ferbrache. Normally the SACC votes would not be that time sensitive, but given that there is an amendment, which may affect next week's States' Meeting I am asking, with your permission and possibly with the permission of E&I, if they would consider whether that policy letter could go first?

2330 **The Bailiff:** Deputy Brehaut, Deputy Inder wishes to move a motion that, once again, your matter of the Energy Policy is pushed backwards. Do you wish to comment on that first?

2335 **Deputy Brehaut:** If we were to go with 5.30 p.m. we have got, what, just two hours and if we are having a break and we deal with an amendment, which could take up half an hour, it then leaves not a great deal of time to discuss what is a significant piece of work. But by the same token I have no idea how long the debate on the SACC would take if I gave way to that. Perhaps, if it is possible to get an indication how many people wish to speak on the SACC item then it would leave me in a better position. But this is a significant piece of work, which I think deserves enough amount of time.

2340 **The Bailiff:** Members of the States, I do not want to have a detailed debate on the particular matter that has been raised by Deputy Inder. He says that he is doing it for the benefit, really, of the movers of the amendments, rather than anything else, but I will simply put to you the motion that we re-order the business again, bearing in mind what Deputy Brehaut has just said, to take the States' Assembly & Constitution Committee Article II matter from Billet d'État XII, which is about dates of States' Meetings, in the year from 1st September, 2020, as the next item of business and invite you to vote in the Chat column please.

2345

*Members voted Pour.*

2350 **The Bailiff:** Members of the States, although there were some Members who did not vote at all and some who voted Contre, the majority of those who voted, voted Pour to that motion, in which case we will move to Article II of Billet d'État XII next please, Greffier.

## Billet d'État XII

### STATES' ASSEMBLY & CONSTITUTION COMMITTEE

#### II. Dates of States' Meetings – 1st September 2020 to 31st August 2021 – Debate commenced

*Article II.*

*The States are asked to decide whether, after consideration of the policy letter entitled "Dates of States' Meetings – 1st September 2020 to 31st August 2021" dated 7th May 2020, they are of the opinion:-*

*1. To agree that the dates on which States' Meetings shall be convened in the period from the 1st September 2020 to the 31st August 2021 shall be as set out in the table in section 2.7 of the policy letter.*

*2. To agree that statements under the provisions of Rules 10(4) and (5) shall be made by the Presidents and, in the case of the States of Alderney, the nominated Alderney Representative according to the rota set out in the table in section 3.3 of the policy letter.*

*3. To delete Schedule 1 to the Rules of Procedure of the States of Deliberation and their Committees and replace with Schedule 1 as set out in Appendix 1 to the policy letter.*

*4. To rescind:*

- Resolution 1 of Article XVIII of Billet d'État XVIII of 2019, 'Dates of States' Meetings – 1st September 2020 to 31st August 2021'; and*
- Resolutions 1 to 4 of Article V of Billet d'État VII of 2020, 'Dates of States' Meetings – 1st September 2021 to 31st August 2024'.*

**The Deputy Greffier:** Article II. States' Assembly & Constitution Committee – Dates of States' Meetings, 1st September 2020 to 31st August 2021.

2355 **The Bailiff:** And I invite the President of the Committee, Deputy Inder, to open debate. Deputy Inder.

**Deputy Inder:** Sir and thank you, Deputy Brehaut, for his grace on that one.

2360 This is extremely short. I have got one paragraph. The States directed the Committee to submit a policy letter to this Meeting, setting out the revised dates on which it proposed that States' Meetings should be convened in the period from 1st September 2020, to 31st August 2021 and to include the rota of statements for those Meetings. The Propositions and policy letter in front of you fulfil that Resolution.

Thank you, sir.

2365 **The Bailiff:** Members of the States, there are four amendments that have been circulated. What I am proposing to do is to invite Deputy Soulsby and Deputy Tooley to lay their motion under Article 7 of the Reform (Guernsey) Law, 1948, first in respect of Amendment 3, to see whether or not you will entertain the placing of Amendment 3. If you do, then I will invite Deputy Dorey and then Deputy Soulsby to speak to Amendments 1, 2 and 3 and we will take them in the round and vote on them  
2370 distinctly, at the end, because they already cover the same type of issue.

[Motion under Article 7\(1\) of the Reform \(Guernsey\) Law, 1948](#)

*To suspend Rule 24(1) of the Rules of Procedure of the States of Deliberation and their Committees, as modified by the Rules of Procedure of Remote Meetings of the States of Deliberation, to the extent necessary to permit the amendment set out below to be debated.*

**The Bailiff:** So the first thing Deputy Soulsby is you wish to move a motion under Article 7(1) of the Reform (Guernsey) Law, 1948, to suspend Rule 24 to enable Amendment 3 to be put.

**Deputy Soulsby:** Yes sir, I do.

**The Bailiff:** And you formally second that, Deputy Tooley?

**Deputy Tooley:** Yes sir, I do.

**The Bailiff:** So Members I am going to put that motion to you, that Rule 24(1) is suspended to enable Amendment 3 to be placed. Please vote in the Chat column.

*Members voted Pour.*

2375 **The Bailiff:** Thank you very much, Members of the States, that motion is clearly carried and therefore Amendment 3 can be put. But what I will do, just because it seems to be sequential to do it that way, is to invite Deputy Dorey, if he so wishes, first, to place Amendments 1 and 2 and we will place both at the same time and speak to all of them in the round. So Deputy Dorey.

[Amendment 1](#)

*To insert the following proposition immediately after Proposition 1 –*

*"1A, To agree that a States' Meeting shall be convened on Wednesday 27th May, 2020 for the purpose of considering a Proposition to note the contents of the document entitled "Exit from Lockdown – a framework for lifting the Covid-19 restrictions in the Bailiwick of Guernsey", as published by the Committee for Health & Social Care at the beginning of the month or any subsequently updated version, and to direct the Civil Contingencies Authority to submit such a proposition to the Greffe, together with a Policy Letter designed to enable the States to debate the same at the Meeting".*

[Amendment 2](#)

*To insert the following proposition immediately after Proposition 1 –*

*"1A. To agree that a States Meeting shall be convened on Wednesday 19th August, 2020 for the purpose of considering a Proposition to note the contents of the latest version of the document entitled "Exit from Lockdown – a framework for lifting the Covid-19 restrictions in the Bailiwick of Guernsey", and to direct the Civil Contingencies Authority to submit such a proposition to the Greffe, together with a Policy Letter designed to enable the States to debate the same at the Meeting".*

2380 **Deputy Dorey:** Thank you, Mr Bailiff. These are two very simple amendments. The first one gives the opportunity of the States to debate the *Exit from Lockdown, a framework for lifting the Covid-19 restrictions in the Bailiwick of Guernsey*, to give it its full name, but I will just refer to it as the exit strategy from now on, next week; and the second amendment gives the opportunity for an update debate in August.

On those amendments I included a Rule 3 wording, which was:

2385 This amendment may involve some additional legal and administrative cost for a States Meeting to take place but it is not possible to quantify the amount at the time the amendment is lodged.

Since then, I have found out there will be minimal cost of staff already employed, but if lockdown allows a States' Meeting to take place at Beau Sejour or St James' there will be additional cost, but as long as it is a Teams Meeting there is very little extra cost for us to have a States' Meeting, other than the time of the people, the officials who attend it. But they are already on States' salaries.

2390 The exit strategy was announced at the press briefing on 5th May and has been subject to questions in the media. States' Members were sent, or emailed a copy, in the morning of 5th May, just before it was announced at the press briefing. I, very soon after receiving it, asked for it to be debated by the States. I had to chase it up twice before I finally got an answer on 16th May. The answer was 'no' because it is constantly changing, effectively.

2395 In my view, that is not an acceptable reason. This is a document, which contains details of directions which moves people's freedoms, controls who they can socialise with, closes business, resulting in cuts to people's income, increases unemployment, uses States' General Revenue funds to pay a significant number of people's wages or most of their wages, results in a significant cut to States' Revenue and also pays money to various businesses and results in approval to borrow up to  
2400 £500 million, as well as closing our borders.

It should be unheard of for such a far-reaching document not to be debated by our parliament and subject to scrutiny and challenge by politicians. I think that some Members seem to have lost their political compass. The effects of each one of these items alone justifies a debate in the States. The combination of all of them makes the argument extremely strong. Parliament cannot be  
2405 replaced by press briefings. The media have a chance to ask questions at such briefings but we, as elected Members of parliament, do not have such an opportunity. There has only been one Q&A session for Deputies.

Just because the exit strategy document is a changing document or a living document is not, in my view, a valid reason for it not to be debated. Also, because we are thankfully moving fast  
2410 between the phases and getting closer to the potential end of lockdown is not a reason to not have a debate.

There may be a second wave and we might have to return to an earlier phase of lockdown. It was said yesterday that that is a possible reason not to have an election in September. So it is important that we have the opportunity to scrutinise all phases and provide some political input  
2415 into earlier and later phases, so that they can be amended, discussed or whatever, in case we have to return to them.

It should have actually been debated a lot earlier. The restrictions that are still in place when we enter phase four, for example, will mean that activities at school will still be limited, particularly in relation to practical subjects. Members should be able to give their view on phase five and when  
2420 we move to phase five. And, very importantly, on phase six, opening up our borders, when we open up our borders, do we have to wait until there is a vaccine or will it be done earlier? I think there needs to be a full debate on that issue.

It is very clear from how other countries have proposed lockdown measures and have lifted them that there is a political element in making the decisions and not just medical advice. Look at this week's debate in Jersey on this. Also the change in policy from flattening the curve to squashing  
2425 the curve or to eliminate the virus. Our decisions have been made by politicians and it is very clear from the comments in the debate this week and the media releases, for example, what we received today. It says, 'Please see attached release regarding HSC's in-principle decision to move to phase four from 30th May 2020.'

2430 For the sake of our democracy, I appeal to Members to support this amendment so our parliament can debate, scrutinise and challenge the exit strategy. Thank you, sir.

**The Bailiff:** Deputy Dorey, were you speaking just to Amendment 1?

2435 **Deputy Dorey:** I was speaking to both amendments, although I concentrated on 1.

**The Bailiff:** That is fine. It is just you finished, 'to support this amendment ...' and I was not sure which one you wanted most support for and which one was the second one.

2440 **Deputy Dorey:** I apologise, I do support both amendments, sir.

**The Bailiff:** Thank you very much. Deputy Ferbrache, do you formally second both Amendment 1 and Amendment 2?

2445 **Deputy Ferbrache:** I do sir.

**The Bailiff:** Thank you very much.  
Deputy Soulsby, would you now like to lay Amendment 3 so that we can run these alongside one another?

2450

[Amendment 3](#)

*1. To insert the following proposition immediately after Proposition 1 –*

*"1A, To direct the Policy & Resources Committee to report to the States, during the course of the States' Meeting due to commence on 17th June, 2020, on its progress in developing plans designed to support the Bailiwick's recovery from the current emergency and to agree that appended to that Policy Letter should be the latest version of the document entitled "Exit from Lockdown – a framework for lifting the Covid-19 restrictions in the Bailiwick of Guernsey" as published by the Committee for Health & Social Care" Or, should Proposition 1 be unsuccessful:*

*2. To insert the following proposition immediately after Proposition 1 – "1A, To direct the Policy & Resources Committee to report to the States, during the course of the States' Meeting due to commence on 15th July, 2020, on its progress in developing plans designed to support the Bailiwick's recovery from the current emergency and to agree that appended to that Policy Letter should be the latest version of the document entitled "Exit from Lockdown – a framework for lifting the COVID-19 restrictions in the Bailiwick of Guernsey" as published by the Committee for Health & Social Care".*

2455 **Deputy Soulsby:** Yes sir, thank you. I think it is important for me to start by correcting something that Deputy Dorey said. He would like to call the Exit from Lockdown framework a strategy, but it is not, it is a framework and we have made that very clear from the very beginning. It is something that is subject to change and it is changing and it has changed at least three times since we published it. It is a document that we produced on that very basis, that it is all based around how the evidence will change.

2460 So really, for me, we have never said that we did not want the framework to be debated in the Assembly. The point is the timing and what really concerned me was when Deputy Dorey said it should be laid in the Assembly and it should be able to be amended. Do Members really think that making changes on such an important document should be amended on the floor of Assembly, where we do not have the Director of Public Health in attendance, to make decisions on the fly, especially where people could easily be lobbied by special interests?

2465 That is why this is a document that needs to be undertaken and managed by Health & Social Care, and I think there has been confusion about what that framework is. It is about easing out of lockdown. It is not the recovery plan. That is really important because, as I have said publicly before, what Members need to do is to consider and debate the easing from lockdown framework with a recovery plan, so people can see it in the whole and they can see whether it makes sense in light of what the recovery plan is, or whether the recovery plan is tying in well with that framework.

2470 I have no problem with, I think it was the second one that said debate in August, but I think the pace we are going at the moment, it will seem like a long time away, so that one is probably ... well whatever point it is for that one. For Amendment 1, in terms of having a new Meeting, especially to

debate something, which may well have changed by then, I do not know what we would submit when, to be honest.

2475 It is not clear from that about what it is we will end up submitting because I think the really important point to make here, as we said today, is next week, over this weekend and through next week, we are going to have to be doing a lot of work in terms of updating our directions, putting guidance in place for the public, for the community, for businesses, and that is where our focus needs to be. It needs to be focussed on the community right now.

2480 I am happy, as I say, for there to be a debate but I please would implore Members can it not be next week, because that will seriously impact the time that we have available to make sure that we get the messaging, the communication and most importantly the legal aspect of this absolutely right. What I ask people is support this amendment, because I think it will mean the debate will come faster than Amendment 2 but also we will have a debate in the round.

2485 Because this has had to be submitted so quickly, I do not know what P&R's views on this are but that is why we put June or July Meeting because, as a Committee, from HSC's point of view, we do not know precisely when the recovery plan will be made available for the Assembly. So please, I would ask Members to support this amendment.

2490 **The Bailiff:** And Deputy Tooley, do you formally second Amendment 3?

**Deputy Tooley:** I do, sir.

2495 **The Bailiff:** Members, because it is really a choice of what do you want to do over a number of different days and with different Propositions, I thought it made sense to run them all at the same time. Let me just explain that I propose to take a vote on them in the order in which they are numbered. So Amendment 1 will be voted on first, Amendment 2 second and then Amendment 3, on the basis that Amendment 1 is an early, distinct Meeting, Amendment 2 is a deferred distinct Meeting and Amendment 3 is to bring in further business to the Meetings already scheduled. Deputy Fallaize wishes to speak.

2500 **Deputy Fallaize:** Thank you, sir.

2505 I actually agree strongly with the proposal, the idea that the States should have been more involved than they have been in both the measures that were taken initially and during the early phases of management of the pandemic and in the exit strategy or the phases of exit through which we have, fortunately, been moving more recently.

I do not think the States should be the decision-maker but I think that the input and the involvement of the States or States' Members in some form or another should have been facilitated more than it has been. But I think there are problems with all three of these amendments.

2510 If I take first of all the Deputy Soulsby/Deputy Tooley amendment, I do not really see the point of it and I actually do not think it adds anything. Because, as I understand it, the Policy & Resources Committee is going to lay a policy letter on the Bailiwick's recovery before the States' Meeting in June or July anyway. Essentially, I suspect what is eventually presented to the States would not differ very much whether the Soulsby/Tooley amendment is successful or not. I appreciate that it includes words about appending to the policy letter the latest version of the document entitled Exit from Lockdown, but substantially the debate would be in relation to the recovery plan and that is coming to the States anyway.

2515 In relation to Deputy Dorey's two amendments, I think the problem here is one of timing. Because in the whole sequence of events around management of the pandemic, probably the most pointless time to have a debate is now. Because the quite Draconian control measures, which were necessary initially, are no longer necessary or are not necessary at the present time. The financial costs have been largely built up and now cannot be changed or diminished, and we are about to enter, hopefully, phase four of the exit strategy.

So, although I agree with the principle that there should have been a States' debate on some of these matters. Certainly, there should have been some involvement of States' Members. But I think the timing could not be more pointless. That is the first amendment. I do not see why the States would meet next week. I think it would be a completely empty, pointless debate, given the stage that we are now at. I agree with Deputy Dorey that there should have been at least one States' debate before now but, no matter how disappointed Deputy Dorey or anybody else that there was not, that is not a sufficient reason to have a debate now when it would be completely pointless.

In relation to the second amendment, having a debate in a couple of months' time, I think the problem with that is how can we know at this stage that it would be any more timely to have a debate then than it would be next week? I can accept the principle that at some point the States should have an opportunity to debate these matters. We are going to debate recovery plans.

I think if it becomes necessary to reimpose control measures, I suspect perhaps that the Civil Contingencies Authority and the Committee for Health & Social Care may find that second time around the States are slightly more assertive and wish to be involved. Although I stress again I certainly would not suppose the States becoming the decision-maker or the States' Assembly becoming the decision-maker because I really do not think that these sorts of decisions are best made by a committee of 39.

But I think some element of involvement of States' Members or the States' Assembly is probably going to be more necessary or what will happen if it becomes necessary to reimpose some of the measures which are now being lifted. But we cannot know when that may or may not be and yet Deputy Dorey's second amendment pretends that it is possible now, in the middle of May, to know exactly when would be the right time to have that debate, many weeks into the future, in August. That is three months from now. How can we take a view that we are going to know that it will be timely to have this sort of debate on Wednesday, 19th August?

We might be in a very stable position, perhaps, hopefully in phase five by then and we may have been there for some time. Or we may be in a much more serious position and we may have had to impose lockdown and other control measures or started going back in reverse, through the phases. We just cannot know and I do not think we should just pick a date to have this debate three months in advance, when we do not know what the circumstances of managing the virus would be.

So, although I am in sympathy with the principle that there ought to have been opportunities for the States to have debated some of these matters, unless I can be persuaded by Deputy Dorey or Deputy Soulsby when they reply to this debate, I think probably I am going to vote against these amendments, although, as I say, I think the involvement of more States' Members and the States' Assembly is probably desirable.

Finally, I just want to point out that in saying that I do not in any way imply criticism or concern with the way that Deputy St Pier and Deputy Soulsby have led the Island's response at a political level, which I think – I am not necessarily saying I would have made all of exactly the same judgements, I do not think any of us could say that – but generally speaking I think the way they have approached this on behalf of the Island has been commendable and they deserve our thanks and appreciation. But I think the involvement of the States, as we move through, if we were to have to move back through phases, I think they are going to need to reflect on the involvement of other States' Members and States' Committees and the States' Assembly.

Thank you, sir.

**The Bailiff:** Deputy Parkinson, to be followed by Deputy Inder.

**Deputy Parkinson:** Thank you, sir.

As Deputy Dorey said, in so many words, there is a significant democratic deficit at the moment, in that some of the most intrusive and far-reaching measures taken in this Island since the War have been imposed on the population without particular authority from the States, or any kind of debate.

Deputy Fallaize says that he agrees that there should have been States involvement before now but he does not think that it would serve any purpose to have a debate on these matters now and



2575 I have to say I disagree with him. States' overall policy has moved from containment, through flattening the curve, it seems, to eliminating the virus in Guernsey. That shift in policy has not been declared, it has just materialised through a chain of events which has, fortunately, resulted us being today in a position very close to eliminating the virus. I think much to all of our pleasure and surprise.

2580 But Jersey, meanwhile, earlier this week has adopted a different objective, not of eliminating the virus but of minimising the harm to Jersey. Now, Members will have different views whether that is a sensible policy objective or not but it is a reasonable policy objective, adopted by a substantial majority by the States of Jersey, and the policy objective in Guernsey has never been debated.

2585 I am not saying there is anyone in Guernsey who would necessarily advocate minimising the harm to Guernsey as the objective, but I think the opportunity to debate that should properly be given in a democratic system. Deputy Fallaize says that is all very well but we are close to having eliminated the virus, so why would we bother setting a policy? The answer is the virus may come back. We do not know. We may be dealing with more episodes of this virus, perhaps later this year but perhaps in several years to come. We do not know. Until there is a vaccine, which is 100% effective and distributed widely, so that everyone on the Island can be inoculated, there will always be the risk of further outbreaks of this virus.

2590 Against that background, to say it is too late to make a decision on what we are trying to achieve, I think, is a non-argument. Clearly, we do need to have an idea what we are trying to achieve and that is not necessarily making medical judgements, it is saying what is the overall policy, where are we trying to get to.

2595 Now it may well be that, having had a debate, we would end up adopting a policy of eliminating the virus. That might well be the case, but at least, then, the States of Guernsey, would have debated the issue, come to a decision and there would be a democratic mandate for a policy which aims towards that goal. At present this has not been discussed by the Members of the States of Guernsey and I think it should be.

2600 So I am going to support both of the Dorey amendments. I think we need to start putting some democratic accountability behind the policies, which are being challenged, I can tell you, through email correspondence I am receiving, by particularly lawyers in Guernsey. We need to have some accountability and a parliamentary process, which underpins the policies that the States are pursuing. Please support both the Dorey amendments.

2605

**The Bailiff:** I am going to call Deputy Inder next, because he is electing to use his entitlement to speak on these amendments at this point, and then we will have the mid-afternoon break before I call the other speakers who have indicated that they wish to speak. So, Deputy Inder please.

2610 **Deputy Inder:** Thank you, sir.

The normal question would be whether our Committee has sat and discussed these. We have not. Obviously, Deputy Ferbrache is for them and I do not know what other Members of the committee think. But, interestingly, leading 1A again, strangely enough I think we should have a Meeting next week for one other reasons, to have a full debate on the Energy Policy. I think 2615 unfortunately, irrespective of what was going to be a short debate, we have put E&I in a bit of a pickle, we are going to end up having a very, I suppose, concentrated debate and I do not think we are going to thrash that out. So 27th May should be had so we could actually look at the Energy Policy in itself, so for that alone we should be sitting on 27th May.

2620 Anyway, sir, if I wanted to be canny, and I am not very good at being canny, if I am reading 1A it asks HSC to submit the document entitled Exit From Lockdown, and to direct the CCA to:

... to submit such a proposition to the Greffe, together with a Policy Letter designed to enable the States to debate the same at the Meeting ...

There is a potential compromise here. It will not help Deputy Dorey and it will not help Deputy Parkinson. I think, if HSC were inclined to, because there is nothing here that says they could not, they could submit a policy letter under 17(9), which effectively is as good as a noting debate, and

2625 does not allow the exit strategy to be amended in anyway because the Propositions could just say, 'Proposition 1: We do not have any.'

I am wondering, if there is a compromise here, I think we need 27th May for the reasons that we mentioned, even though they are not in here, so that is just a side note. But if Health & Social Care wanted to bring or were directed, rather, to bring a policy letter, it will not help Deputies Dorey, 2630 Ferbrache or possibly Deputy Parkinson, but have what would look like some kind of debate, if they wanted to keep the exit strategy held within their powers, I would try and attempt to do it under 17(9). Apart from that, sir, I have got nothing else to add to the debate, if that was worthy at all.

**The Bailiff:** Members of the States, we will now take a break until 4.25 p.m., so about eight 2635 minutes, when I will be calling Deputy McSwiggan.

*The Assembly adjourned at 4.17 p.m.  
and resumed at 4.25 p.m.*

### **Dates of States' Meetings – Debate continued**

**The Bailiff:** Thank you, Members of the States.

As I indicated, I am going to call Deputy McSwiggan, to be followed by Deputy Trott, and then Deputy Roffey. So Deputy McSwiggan please.

2640 **Deputy McSwiggan:** Thank you, sir.

One of the most painful things that I learned in the early days of this crisis, or tried to make myself learn, it not a lesson that comes easily to me, is that sometimes the best thing you can do in a crisis is to get out of the way. I felt that particularly in the context of those very early days when the CCA were making every decision and decisions were having to be made very rapidly. Every 2645 instinct is to want to be part of the conversation, not necessarily to want to be at the table, but at the very least to bombard the friendly faces that you know around the table with ideas and suggestions and criticism and hope that you will be heard and hope that your feedback will be taken on board.

But knowing that the seriousness of the situation and the speed at which decisions have to be made means that, in an emergency, and we certainly were in an emergency a month ago, it is better to hold your peace and to trust in those who are making the decision. I say that not to say that democracy does not have a role to play, I hope that Members would agree that I would be the last person to suggest that. But I hope Members would also agree that if decisions in respect of the emergency had to pass through this Assembly before being put into practice, it would be far more harmful for people's human rights than the present decision-making situation is. This week is 2650 testimony. We are not exactly a speedy, decision-making machine.

Sir, emergency laws exist to enable the kind of rapid decision-making that a crisis requires. What is more, sir, I am not sure what the case is in respect of emergency laws in other countries but it seem to me that it was a matter of real foresight and real respect for human rights on the parts of the drafters of our own emergency legislation that those powers have to be renewed every 30 days. There is therefore the opportunity for democratic input on at least a monthly basis and for the actions of the CCA to be challenged or the powers to be removed if needs be on that monthly basis. 2660

Deputy Dorey and Deputy Parkinson and others have been saying it is about time we injected some democracy into that. Democracy has been in the debate for months. On three occasions now, 2665 we have renewed the powers of the CCA and every Member of this Assembly has had every opportunity during those renewals to challenge, effectively, the ethical framework that is being applied to how and why limit people's freedoms.

So, sir, the opportunities to scrutinise, to challenge and to change, have been in front of us on numerous occasions. Members have had every occasion to avail themselves of those opportunities and that they have not does not mean that it is wise to bring the exit framework to this States next week for consideration.

While I agree with Deputy Inder that it would be best if this States reconvened sooner than June to consider the energy policy letter and other matters on our agenda, which we are unlikely to get through, the irony is that, if the first amendment is successful, and we meet this Wednesday coming, that will displace a four-hour Health & Social Care Committee meeting at which we hope to be able to again, to be making the practical decisions that will continue to ease the burden on Islanders' lives at this point in time.

Of course, those meetings can be rescheduled but in terms of prioritising –

**The Bailiff:** Deputy McSwiggan, I apologise, Deputy de Sausmarez wishes to raise a point of correction. Deputy de Sausmarez.

**Deputy de Sausmarez:** Thank you, sir, and I hope Deputy McSwiggan will forgive me for a slightly cheeky point of correction because it is slightly tangential but she has referred to the suggestion that Deputy Inder made that we may be able to discuss the Energy Policy at the Meeting but my understanding of Amendment 1 is that we would only be allowed to consider the item that the Meeting had been convened for. I wonder if you, sir, might be able to confirm or clarify that situation, because before the point gets repeated too often, I thought it was better to have some clarity on whether or not it would be possible to debate any other item, should Amendment 1 be carried. Thank you.

**The Bailiff:** I will invite Deputy McSwiggan to finish her speech before I clarify that. Deputy McSwiggan.

**Deputy McSwiggan:** I apologise if I was unintentionally misleading. My understanding is, and you sir will set me straight if I am wrong, but my understanding is that the States, on a motion, could decide to reconvene itself earlier than the next scheduled Meeting but that would not be a consequence of this amendment, I was sort of running the two points together – the points that Deputy Inder made and the question of whether we meet next week or not. So I apologise, that was perhaps misleading. My understanding is the same as Deputy de Sausmarez's.

Casting my mind back to a debate that we had at the start of this Meeting, I could not quite find the words to express it in that debate, but I think it is equally relevant here. I absolutely recognise that if the Committee *for* Health & Social Care or if for argument's sake the CCA or any of the States' Committees, particularly the Committee *for* Home Affairs or the Committee *for* Education, Sport & Culture, which have had to make particular decisions about how particular services or activities are carried out in the context of this emergency, if the decisions that we are making are discordant with the values of the population in general – and of course this Assembly is in essence is a proxy for the population in general – then absolutely we need to step aside and give place to those whose decisions are, if you like, more ethically legitimate, more in tune with the population's values and priorities.

I think that the outcome of the debate at the start of this Meeting was that there was a decision that that was not the case and that in fact the Committees' decisions were sufficiently consistent with the values of the population that we should continue to be the ones making them.

I appreciate that the only way we can test that theory, check whether we are still in tune with what the Island expects from us, is to have this kind of debate. So again, I think the challenge is fair. But what I would say is that it is a question, or a theoretical question of us stepping aside and other decision-makers with the 'right values' stepping up into our shoes, rather than changing the forum in which decision-making happens and, particularly, at this stage in a situation where decisions still need to be made very quickly, so people's liberties are not restricted for any longer than is

2720 necessary, particularly not moving from a Committee forum for decision-making to a States-wide forum for decision-making.

But all of that sounds like I am rejecting scrutiny of or reflection on the kinds of decisions that are being made or the reasons why those are being made and I hope that that is not the case and I think it was really Deputy Fallaize's speech and some of the elements of that that were reflected in Deputy Parkinson's speech, that made me reflect on what would be a helpful way forward if debating the exit framework next week, for reasons that Deputy Soulsby has already set out, is not a particularly wise one.

I think what is needed is a sort of post-event review. Asking ourselves did we make the right decisions and did the frameworks that we had in place, the Emergencies Law, the human rights framework that applies in Guernsey, did all those frameworks make it possible for us to make the right decisions?

Reflecting on the decisions that we made and the reasons why we made them, the things that we prioritised and the things that we thought were important to people and they would sacrifice other things for, reflecting on all that, are there new principles that ought to be built into our decision-making framework, so the next time we find ourselves faced with a situation like this, as Deputy Parkinson said, the next time if there is another wave of this pandemic or if we find ourselves in a similar situation in future, can we make decisions that are more cognisant with the values and priorities of our population?

What are the trade-offs between freedom and safety that are acceptable to the population and for how long and how can we learn from that and built that into our decision-making? I am hoping that Scrutiny will be doing work that is going to help inform that. That is a conversation with Deputy Green that he will attest I have been meaning to have with him for ages and we have never quite got off the ground. But I think there is and I hope that Scrutiny will already be working towards informing that kind of thinking on behalf of the States.

I know that within HSC we are also having a conversation about how we can do that important work of reflection and learning. We are hoping to develop a lockdown exit survey of some kind. This is something that we have discussed at Committee level but have not resourced up to deliver it at this point, so I cannot make promises on behalf of the Committee, but I think it has been acknowledged that it would be really helpful for us to understand the population experience of lockdown, what worked well, what was challenging. If it happened again sooner or later, how could we do it better as a community.

From different angles, sir, I think there is a need for reflection and a recognition that there will be reflection and all that could feed into a debate later this year. Perhaps not solely looking at the exit framework but also looking at the Emergencies Law and the supporting frameworks of that. Any principles that guide Public Health decision-making and so on, in the round.

I would have no problem supporting Deputy Dorey's second amendment and planning for that debate to take place in August, notwithstanding that we do not know where we will be with the current pandemic at that point in time. Because, as Deputy Parkinson says, it is necessary to consider what principles we are going to apply if this continues or if something else like this happens in future.

So I think the first amendment requires a debate too soon and on a subject that is not going to be particularly constructive at this point in time. I think that the timeframe foreseen in the HSC amendment is more realistic in that sense and better, because it places the recovery strategy and the exit framework together. But I would be quite happy for a broader, more reflective debate to take place in August and I will support Deputy Dorey's second amendment in that perspective.

But I would just like to add in closing that if any of the amendments I think are successful, but particularly if the first one is successful, I would hope to bring a motion that at least part of the debate could take place with the States sitting in committee. As I understand it, sir, when the States sits in committee, in effect you set the Rules of Procedure. It is possible for non-States members to address the Assembly, so that would allow for an exchange of questions with and advice to be

received from the Director of Public Health, which I think would be absolutely critical to us having an informed debate.

2775 But in committee does not necessarily mean in camera, so it would be possible for, in the interests of transparency and democracy, for our debate to be heard by broadcast to the public. I think that would be the healthiest way of having a debate if any of these amendments are successful and I just give notice that I will be bringing that motion in due course.

2780 **The Bailiff:** Well, Members of the States, let me see if I can help and I hope I will not confuse. If I get anything wrong, HM Comptroller will correct me, I am sure. When we get to 5.30 p.m. this evening, under the terms of the Rules, I will simply move to the Schedule for Future States' Business, because that will be the end of the three days that have been set aside for this Meeting and all matters that have not been concluded will be deferred to the Meeting commencing on 17th June.

2785 However, if it is the wish of Members to consider adjourning to a different time. At that point, once can do that. So that is just dealing with a point that Deputy Inder raised about what we might use 27th May for. There are two potential choices. One is an overspill day or some overspill day might be identified instead.

2790 But turning to Amendments 1 and 2, at face value they look as though they are requesting the convening of a special States' Meeting. The difficulty is that a special States' Meeting is defined in Rule 30, paragraph one, as being a Meeting of the States convened to consider the annual Budget of the States, the policy letter of the Committee for Employment & Social Security on the Uprating of non-contributory benefits, or the States' Accounts and the Policy & Resource Plan.

2795 Therefore, if Amendment 1 or Amendment 2 or indeed both, although it might seem a little bit odd if they were both to be converted into substantive Propositions and then approved, were to actually carry the day, at the end of this debate, what the States would be directing is the convening of an ordinary Meeting, one of the items of business of which would be the Proposition to note the contents of the Exit from Lockdown document.

2800 As an ordinary Meeting, if the ordinary Meeting were to be put in as an additional ordinary Meeting, it would mean that any deferral of business from the Meeting preceding it would be carried forward into that Meeting. There is a requirement, under the Rules, that if an additional Meeting is to be convened, I am required to notify His Excellency of it before convening that Meeting so, realistically, there would be a convening notice for a new, distinct Meeting, as opposed to being any overspill days at which unfinished business gets added.

2805 The difference with Amendment 3 is that that refers to two ordinary Meetings that have already been put into the Schedule for Future Meetings and it would simply be an additional item to be added to that. So I hope that assists Members of the States, before I call the next speaker, but I will just pause briefly in case HM Comptroller wishes to tell me that I have got anything wrong.

**The Comptroller:** Sir, no, thank you. I have listened to your summary and I concur with that.

2810 **The Bailiff:** Thank you very much, Mr Comptroller. So Deputy Trott, to be followed by Deputy Roffey.

**Deputy Trott:** Thank you, sir.

2815 I am going to start by saying that I think Deputy St Pier's leadership of the CCA has been quite simply superb from start to finish. He is the first to admit, in fact all Members of the CCA have, I believe, stated publicly, that exit was always going to be harder than lockdown and there is a danger, in my view a very real danger, that a credibility deficit might gather momentum.

2820 I think the events of yesterday afternoon in itself justify a debate and I would have a debate next week and I would support the comments of Deputy Yerby, I think it would be nice for Members to be able to ask the advisers to the CCA –

**The Bailiff:** Deputy Trott, I need to be consistent and just remind you it is Deputy McSwiggan now.

2825 **Deputy Trott:** Ah, yes. This is a regular error of mine for which I apologise once more. It is of course Deputy McSwiggan. I would be as delighted to support Deputy McSwiggan's motion as I would have Deputy Yerby's a few years ago, sir.

The events of yesterday afternoon in itself justify debate next on the exit process because I remind Members that the President of the Policy & Resources Committee seconded an amendment  
2830 arguing that a General Election should happen in September and the States agreed with that in the morning. But in my view, when certain health advice was introduced, it had quite a material effect on debate.

In a few days' time, I did not know this yesterday afternoon, but in a few days' time my mother will be able to go and enjoy having her hair done again and the hairdresser will not be wearing PPE.  
2835 My daughter, who is six years old, she will be going back to school full time with effect from Monday week, Monday 1st. Those are quite material events, events that I was not expecting to happen yesterday afternoon but apparently and despite those two rather material events, certainly in their eyes, we cannot for health reasons have an election in 131 days' time. It is a farce, sir, in my view. A farce.

2840 Because it is so ridiculous –

**The Bailiff:** Deputy Trott, can I point out now that Deputy Soulsby wishes to raise a point of correction. So Deputy Soulsby, please.

2845 **Deputy Soulsby:** Thank you, sir. I think Deputy Trott is not saying actually what was actually said. I did not say an election could not take place but that there were concerns about having an election at that particular time. Yes, we can open up all the borders now, we can open everything up in the Islands now but we do not know how that will pan out in July and August, just as we have opened things up. There is always that delay. That was the concern, it was too soon to know what  
2850 was going to happen.

**The Bailiff:** Deputy Trott, Deputy Lowe also wishes to raise a point of correction.

**Deputy Lowe:** Thank you, sir. It was just a comment that Deputy Trott just made and to save any confusion, bearing in mind what was released at lunch time. His daughter may be going back Monday week, but the state schools are not actually going back to 8th June, if I have got that correct, sir. The colleges, which his daughter probably goes to, are different to the state schools.

**The Bailiff:** Deputy Trott to continue, please.

2860 **Deputy Trott:** Yes, I was well aware of that. I am just making the point and I think it is a valid one that, as far as the private schools are concerned, based on the medical advice that they have received and the science advice that they have received, they can accelerate that process even further. Things are moving extremely quickly. We were not expecting this, at least I was not sir, yesterday afternoon. I suspect some in the Assembly were.

2865 But the fundamental point is this: I believe, and I stand to be corrected and no doubt I can ask these questions myself, particularly if we proceed next week as Deputy McSwiggan has suggested, I can ask this question myself because one of my fears now is that we run the risk of some of the advice we are receiving almost becoming weaponised, almost becoming misinterpreted, almost becoming used for a purpose for which it was not intended. I think, bearing in mind where we are,  
2870 sir, that would be an extremely unwelcome development and one that I shall do my best to nip in the bud.

**The Bailiff:** Deputy Roffey, to be follow by Deputy Gollop and then Deputy Prow. Deputy Roffey please.

**Deputy Roffey:** Thank you, sir.

Oh dear, I thought we had not debated the date of the election for so many hours now that we should return to it. As I seem to recall from yesterday, we left it up to SACC to determine when it would be safe and fair to hold an election and Deputy Inder had actually promised that September would be considered by his Committee, so I do not think we did dismiss that but anyway that is not what I am going to dwell on.

I do think that many people in the States have felt a little bit detached from this whole process and I fully understand why and I understand why it had to be that way and why things had to move at pace and I am very appreciative of what was done by the people who had to step up to the plate and did so magnificently.

I can say in respect to Deputy St Pier and Deputy Soulsby, I have no idea if they intend to stand for election in September, November, March, April, May or June, but if they are they can probably rely on one of my 38 votes. That is one each, not one between them! So there is no criticism of them whatsoever.

But I do think that almost just because of events, the way things happened organically, the representatives of the people of Guernsey have felt slightly detached from a process which, as Deputy Dorey and Deputy Parkinson have said, has imposed some huge restrictions, and rightly so, but have imposed huge restrictions on the people that we represent.

Deputy McSwiggan said we have had plenty of chances to challenge that. We have, every time, for instance, the Civil Contingencies Authority have made a ruling and it has been laid before the States, we could have spoken at that point. Deputy Merrett has, actually, on a number of occasions. Most of us have not. But I am not sure that was the best, or most ergonomic process, actually bringing up our concerns for some parts of the orders that have been and our support for others.

So I think at some stage, and fairly soon, probably before now ideally but certainly fairly soon, there ought to be a general debate. As Deputy Fallaize says, not to become the decision-making body. As we found out over the last two days, if we try to become the decision-making body for things at the moment and things that have to be done quickly then we really are asking for trouble.

But I think, in exactly the same way as the Public Health aspects need to be taken into account, there needs to be some political voices in the ears as well of the decision-makers for them to make rounded decisions and I think a set piece debate is really useful.

Now, as it happens, I think some of the immediacy has gone out of that by the announcement that was made yesterday lunchtime about phase four coming in as of next weekend. I have to say to Deputy Trott and to others, through you sir, that actually during the debate on the date of the election, Education, Sport & Culture had absolutely no idea that the schools would be going back full time on 8th June. That decision was made really quite late yesterday evening, on the basis of fresh Public Health advice.

But anyway, the fact that was announced today, at lunchtime, I think has taken a bit of the pressure off for the time being. But there is an elephant in the room and the elephant in the room is phase six and when we move to phase six. It is no good Deputy McSwiggan saying in many months to come, whether that is before the election or afterwards, I do not know, we can look back and have a – post mortem is the wrong word in this context – have a review of everything that happened and how we handled the pandemic and the crisis.

Yes, that should happen. But the big issue, I think, over the coming months, is going to be the question of the borders. It is going to have a huge impact on many people, on businesses on the tourism sector and I know there is no right or wrong answer. Open up too soon and invite the infection back into the Island and not only does it impact the Public Health aspect, but it is an economic catastrophe as well.

But on the other hand, wait until there is a vaccine, if ever there is, which could be six months, one year, 18 months, two years' time, when perhaps an air bridge between Jersey and the UK may

have been opened up in just a few weeks' time and there will be a huge difference in the way the two Islands are doing business and I suspect that, unless things go badly wrong for them, it will give a very big advantage to our sister Island. So there is a political aspect to this and I think it needs to be heard. Whether it needs to be heard in five days' time, after the announcement that was made at lunchtime today, I am doubtful.

As for August, I have to say why pick a date when most of us plan, if we are going to be away, to choose that month because we can be almost absolutely sure that there will not be a States' Meeting. I know we can call a States' Meeting whenever but by convention August is a month when we do not.

I can tell Deputy Dorey, I am planning to be away on the date that he was suggesting for this Meeting. It is a plan that has been in place for a year. It is a plan that is extremely important to me and as we have now just been told that all but essential travel is no longer going to be the ruling from a week's time, unless that is reversed, I will not be here. I think I have a right to plan to be away in August. I think all States' Members do and I do not know if I am the only one that has done that. I imagine quite a few others have as well. So it is a strange month to have chosen.

I think on balance, probably, because I think there needs to be a debate, and I do see an inter-linkage between the exit strategy from lockdown and the economic recovery plan and general social recovery plan that is being formulated at the moment by P&R. So I am attracted in a way to the Deputy Soulsby amendment. I think July is too late, particularly with this issue of phase six of lockdown and how we should approach that. I do not think that is a question just for Dr Brink. I think what Dr Brink has to say will be hugely important. She has been a guiding light through this. I absolutely admire what she has done but I think there are broader issues that need to be considered and I think June, rather than July, are the best times to consider that.

What militates against June is I suspect that P&R will be very sketchy by then about the recovery plan, if we are going to debate the two together, and I do quite like – twice I have almost agreed with Deputy Inder today, I do not know what is coming over me – but I quite like the idea of a green paper approach, because I do dread the idea that we will all be laying amendments that we expect to be amended from the floor of the Assembly without proper information and instructing that certain things take place in our exit plan because it is just too critical for that.

But I think political voices need to be heard. They need to be a part of it. As I say, I think phase six is the elephant in the room that nobody has yet addressed. If there is a vaccine in six months' time that is one thing, but experts keeping warning us do not necessarily accept that any such thing would be the case.

So at some stage we are going to have to talk about, if we have eliminated Covid-19 or the novel coronavirus from Guernsey, at what point do we open ourselves up to the risk of re-infection? Do it too soon and the obvious consequences are very bad. Not do it for months at a time, and then not only will the economic consequences be bad, but with those economic consequences will come health consequences and social consequences and unemployment consequences and mental health consequences.

I think the States of Guernsey is not just a parliament. If it was just a parliament, that would be one thing. But Guernsey is almost unique. The States of Guernsey is the Government of the Island and I think the Government of the Island need to discuss these issues and fairly soon. Which amendment I am going to vote for, I will wait until the end of the debate, but I am leaning towards the Soulsby one with the June debate at the moment. Thank you very much sir,

**The Bailiff:** Deputy Gollop.

**Deputy Gollop:** Thank you very much sir.

I agree and support all of the speeches, even those I do not fully agree with. It seems to me, strangely enough, that the three amendments that have been placed are all compatible with each other and one can indeed vote for the first Deputy Dorey/Deputy Ferbrache amendment, calling for debate next week, which as you sir have advised, would probably be a normal States' Meeting



inasmuch as we could then discuss issues that we have not covered so far, such as the energy report, the ecclesiastical court and so on. It would be an overlap Meeting.

2980 Now, how we cope with the Health & Social Care meeting, I do not know, but there could perhaps be a degree of rescheduling with that or an earlier or a later start to the States of Deliberation Meeting.

2985 Then, one can support the August Meeting. I am not precious about the date. Members may have spied that I and Deputy Merrett have put together an amendment that has not been placed but weirdly enough it is allocated for a West Show that day and, as we now know, there will not be a South Show or a North Show, it could be that reason as well as the very good reason that Deputy Roffey might be able to attend, be changed

2990 The point of the August Meeting to me is not just for the specifics of the Deputy Dorey/Deputy Ferbrache amendment to discuss the next phase of the exit strategy plan but actually as a catch-up whereby people will be able to engage as a parliament, as a Government, in what has been a unique year and which will be a year, not only where the decisions Deputy Roffey has made will have to be considered for stage six, but various economic proactive recovery strategies as well.

2995 Which brings me to Amendment 3, the Deputy Soulsby/Deputy Tooley amendment, which I can also support, because where it is different from the first one is it allows an extra debate in the middle of June, not just on the exit framework but on the wider first beginning to the Policy & Resources work on the recovery plan.

3000 So we are not just talking about getting out of the situation that we are in, we are building back better, we are looking at a more proactive future and I think we need that debate even more than one on the exit strategy. So I see all three as potentially useful and not directly opposed to each other.

3005 I think of all the speeches I have heard, the one I thought was the most impressive was actually Deputy Parkinson's because Deputy Parkinson made clear that there have been significant commercial consequences for the Island. There has been, uniquely really in the last 60 or so years, a transformation in terms of rights and freedoms and privileges, and we do need to find a strategic direction that we, political, are happy with. Any strategic direction that we follow has to be informed not just by the very best – and I accept that it has been outstanding – health, Public Health and administrative advice, but other issues relating to the economy, commerce, transportation and so on.

3010 I feel strongly that the public are now ready, hopefully safe and hygiene conscious, for an easing of lockdown. But the majority of people who I have spoken to or received correspondence with seemed very reluctant to even have a bubble with Jersey, let alone open ourselves up to French or United Kingdom tourism.

3015 So we definitely to consider that, not just on Public Health account, but on community cohesion and economic benefits and I think the implications on our fiscal framework, such as whether Jersey will have a competitive advantage over us, but maybe at the expense of human lives and health, has to also be considered.

So I feel as an Assembly we need to do as much work as possible – (*Interruption*)

3020 **The Bailiff:** Deputy Gollop, do you want to continue your speech please?

**Deputy Gollop:** There was an interruption there, I thought somebody might want a point of order. But I have in fact finished and feel we can move on. Thanking you sir.

3025 **The Bailiff:** Thank you very much. Deputy Prow, to be followed by Deputy Lester Queripel and Deputy Green. Deputy Prow.

**Deputy Prow:** Thank you very much, sir.

I can be brief, really, for two reasons. I really want to return to the substance of the amendment and I think Deputy Fallaize did a very good, forensic analysis reminding States' Members of what the actual meaning of these amendments are and he did say they all have their flaws.

One advantage, I believe, of the Soulsby amendment, Amendment 3, it is quite fundamental, sir, in my view, because it widens the scope of what the debate will be about. Just to quote from it, it asks about:

... developing plans designed to support the Bailiwick's recovery from the current emergency ...

and it suggests that the exit framework, not a strategy, would be published on that. Also sir, I would like to endorse all the points very powerfully made by Deputy McSwiggan.

I accept the democratic deficit but I think, and I said this before, when discussing the amendments to the Reform Law, what we need to be very clear about is that the directions made by Health & Social Care are in a reaction to a Public Health crisis. Very helpfully, Deputy St Pier has made that clear.

That has been led by Public Health. Now directions have been put in place and as Deputy McSwiggan has already pointed out, under section 16 of the Law, this ensures that unless they are approved by the States, they will lapse. Indeed, any Regulations will lapse after seven days unless, in a States' Meeting, they are re-endorsed after 30 days.

So, in effect, this Assembly does own these directions because they have accepted them. What I find a bit curious, particularly in certain speeches, we seem to be facing two ways. In one breath we are saying what a fantastic job the Director of Public Health has done and what a fantastic job the CCA have done, what a good job Health & Social Care have done, how good the communications have been.

So, insofar as the directions are concerned, what is the problem? I am groping to understand. What I do understand is the need, if and when we move forward with a recovery plan, yes the programme of how we release ourselves from the directions we have made, how we stand them down may be relevant.

But if we are going to talk strategy and policy, this really needs to concentrate on policy and strategic thinking. So in that vein, I believe a debate in the States and Deputy McSwiggan made some really good suggestions, is a good thing, and we should have it sooner rather than later. I do not think the amendment, although I accept the flaws that Deputy Fallaize put on it, is by far the most sensible option, so I would ask States' Members not to embark on Amendments 1 and 2, but support Amendment 3.

Thank you, sir.

**The Bailiff:** Deputy Lester Queripel.

**Deputy Lester Queripel:** Sir, thank you.

I realise Deputy Fallaize said these amendments are flawed but I am not at all concerned about that because where there is a will there is a way. What we need now, more than ever, is a can-do approach. How many of us have said that recently?

So I am going to support the Deputies Dorey and Ferbrache amendments on the grounds that I felt completely disenfranchised throughout this whole business of how we deal with Covid-19 in relation to the measures that were introduced and also how we come out of lockdown. I have asked several questions along the way and they have either not been answered at all or not been answered comprehensively.

I have also submitted several ideas of my own about measures that I feel should have either have been introduced or removed and I have no idea if they were discussed or decided upon by the CCA because nobody told me. Recently I sent a whole raft of ideas of what I think we can do to aid our recovery and again I have no idea if they have been discussed, because no one has told me.

And that concerns me greatly because, as an elected representative of the people, I have submitted my ideas regarding the safety of the people and economic recovery to benefit the people. Yet I have no idea of knowing whether or not they have been taken seriously by those who are in receipt.

So with that in mind, it is now time for the whole Assembly to get involved, because the whole Assembly will get to hear one another's views and ideas and debate them and decide upon them, with the public having the opportunity to hear exactly what is being said and what is going on, instead of all these ping-pong emails behind the scenes, which leaves Deputies like me completely in the dark, not knowing whether the ideas we put forward have even been considered or not. That is not the way to do Government, whereas getting us all involved is the way to do Government.

Before I close, sir, I want to clarify, I did receive emails from Deputy St Pier and Deputy Soulsby thanking me for my emails, but they did not answer my questions or give me any indication whether or not my ideas had even been considered. I also received emails from Deputy St Pier and Deputy Parkinson pointing me in the direction of certain Committees, in relation to my ideas, but that was not engaging with me about my ideas, which is why I say I feel completely disenfranchised and that is not acceptable and it is not acceptable because it is not democratic and it is not inclusive.

Thank you, sir.

**The Bailiff:** Deputy Green, to be followed by Deputy Merrett.

**Deputy Green:** Sir, thank you very much.

Seeing as it is the graveyard shift, I will try and be relatively brief, I think I have got a couple of points. Firstly I will probably be supporting the two Deputy Dorey amendments. I think Deputy Dorey has said all of the correct considerations in terms of why there is a very strong case for a parliamentary debate on the exit framework and to have that as soon as possible.

I think the fact that we are travelling through the phases quicker than we perhaps may have thought even very recently does not alter that fact. I think the fact that the document is, by its very nature a changing document, I do not think that changes that either. I associate myself with the comments that have been made by earlier speakers about the need for there to be some proper parliamentary oversight and discussion about the exit framework, I think that is absolutely required.

I do not think it is quite an adequate argument to say that because Members have had an opportunity to review and to scrutinise the individual regulations and directions made by the Civil Contingencies Authority that somehow there is no need to vote the overall picture. There is a difference between discussing individual Regulations and the overall picture and indeed the rules of debate restrain us, constrain us in terms of what we can actually say in respect of specific and individual regulations and directions.

So I am not sure that point is entirely a kind of winning point in terms of why we do not need to have a set piece debate. I agree that any debate on the exit framework should be to note. I do not think we should be supplanting ourselves as the decision-making body. That is absolutely not what this is about. It is about the fact that we are a mature democracy, we have our own Government, our own parliament and it is about putting a proper parliamentary procedure around that exit framework. I think that is the words that an earlier speaker used. So I will be supporting the two Dorey amendments.

Secondly sir, and this is largely in response to the comments that Deputy McSwiggan made in what was a good speech, she is quite right, there clearly is a role for my committee in all of this and I know that we are meeting next week and I know that I have been giving considerable thought to a series of public hearings where we can add value. I certainly think that, because of the implications for the public finances and for our economic circumstances that we are going to take a very close interest in the recovery strategy when that emerges.

I certainly think there is a role for us to be doing some potential scrutiny around the exit framework as well. I think, to be honest, if the Deputy Dorey amendment falls, then I think the case for that scrutiny becomes even stronger and there is certainly a case for us looking more generally

at a review in terms of how this whole crisis has been handled. But there will be a time for that, that is certainly not an imminent thing.

But there is certainly that case but I think, first and foremost, the discussion, the debate, that scrutiny, should be held in our own parliament, in terms of the exit framework and I think that ultimately is why I am going to support the Deputy Dorey amendments.

Thank you very much sir.

**The Bailiff:** Deputy Merrett.

**Deputy Merrett:** Thank you, sir.

I am pleased to speak after Deputy Green. In fact, I was waiting for his request opinion first. There are many lessons that we need to learn and be learned from how this Public Health crisis has been handled. I agree to some degree with Deputy Green regarding the role of Scrutiny. However, as Deputy Green knows, I have been lobbying for a considerable time now regarding the crisis and having some real time scrutiny from snap hearings. Especially because there are, I do have, very serious concerns around, for example, the minimum wage package that was offered.

There are concerns there and there is nothing that would necessarily stop that in the current time because of the ability to meet remotely. But at the same time, sir, it has to be balanced against the need to have absolute direction on dealing with the Public Health crisis at the right time. So it is pretty much a timing issue.

I am really disappointed to hear so many Members say they feel disengaged. I am so disappointed that Members feel that way. Engagement can be clearly a two-way street. We have asked our community to try to retain connectivity, human connections, throughout this period of time, realise how important it is and, as and when within our community, we encourage this all the way through.

I have to place on public record, I have been contacting Deputy St Pier, Deputy Soulsby on regular occasions, making representations in the main to members of our community who are confused, who are concerned, who do not feel they understand what this particular scenario means for their particular personal permutations, which clearly cannot be covered in media briefings. And Deputy St Pier and Deputy Soulsby have well into the evening, early in the mornings, along with myself, replied to me proactively, constructively and absolutely engaged with the concerns that I have either as a Deputy or from members of our community.

I absolutely applaud them and I wish to thank them for that on public record. I cannot thank them enough. Yesterday evening, I had the pleasure of calling a member of our community and they were literally in tears because of the message that I was able to give them yesterday evening and I could only do that because of Deputy Soulsby's responses to me. So I do wish to thank them for that.

The thing that I am trying to struggle with, I actually support, I think, virtually all of these amendments, but the difference I think between 1, 2 and 3 is that the Deputy Soulsby amendment, that amendment says an additional direction, because it is directing Policy & Resources, and I will quote it:

... on its progress in developing plans designed to support the Bailiwick's recovery ...

So it is wider than just the exit strategy. Now I was not able on the lunch recess to listen to the media briefing, I am obviously privy to the media release. It does look to me that it could probably be more constructive to support the Deputy Soulsby amendment because that takes in a wider remit, which includes the plans for the Bailiwick recovery. So I hope that when the Members sum up they can tell me why I should support one over the other.

Two more things, sir. I will be quick. I am sorry I think another member mentioned Deputy St Pier had spoken but if he has I have missed it. I do not know quite why I missed it. But I would like to know P&R's view on these amendments please. Unless my connectivity has dropped, which tends to be a little bit more regular than I am comfortable with.

3180 And my very last point is the point about the Emergency Regulations. I have scrutinised them very carefully indeed. They have kept me awake at night. I have had quite a lot of concerns over them, to put it mildly. I certainly have more white hair since reading them, anyway. Deputy McSwiggan said that we have to review them every 30 days. Now my understanding, and I am absolutely prepared to be corrected on this, but my understanding is, I have checked quite a few times with the Law Officers, is that it is when it is reasonable to do so.

3185 Now if the States are not sitting in August and if there are any Emergency Regulations, if the States are not sitting then my understanding that therefore would not be reasonable to lay them before the States because the States are not actually sitting. So my real concern about not having an August Meeting is we could be in a scenario of six weeks between the June Meeting and September Meeting when I, or the States, if there are any Emergency Regulations by the CCA still  
3190 in play, we would not be able to have the opportunity to affirm them or annul them or debate them and that is a real concern I have.

So that is why the August one gives me some joy but knowing what was in play, that Deputy Gollop has alluded to, there is another amendment in play to have an August debate anyway, but that is one of the reasons why I am very keen on having an August debate. So when the Members  
3195 sum up, Deputy Dorey and Deputy Soulsby, if they can just try to convince us as to why we should prefer 1 over 2, or 2 over 3, because I do think there is a difference there.

Thank you, sir.

**The Bailiff:** Deputy Ferbrache.

3200 **Deputy Ferbrache:** Sir, there is a Dinah Washington song, *What a Difference a Day Makes*. Yesterday, we were being told by representatives of Health & Social Care and the States went for it, when the decision changed between the morning and the afternoon, but we are used to decisions changing very quickly in the States, about the successful amendment initially brought by Deputy  
3205 Trott about having an election 132 days, as it was, away then and as he has reminded us, 131 days. 'Too soon, too many problems, cannot do it, it is too difficult.'

And now today, and thankfully, we have had a large scale winding back of the restrictions from just over a week's time. So I find some surprise in relation to that, albeit a pleasant surprise, and then I we have had the very detailed, analytical as always, analysis by Deputy Fallaize, which  
3210 effectively says, one day is too early, another one is too late, and I add the words in between, which he did not say, which is say, 'Let us do nothing.'

We have also had Deputy Merrett, an impassioned speech saying, 'We are not disenfranchised, because I have been very engaged; I have done this and I have done that.' I am sure she has, I know how conscientious she is.

3215 But the verbs that mean different things, to engage and to be disenfranchised are completely different things and a lot of States' Members, as Deputy Lester Queripel ably said, have felt disenfranchised. We can always find a reason, next week is too soon, look at all the changes that have been made, why do we need to bother? Well the reason we need to bother is because it is a framework. We can have a green paper type debate, as I think Deputy Inder suggested, and we can  
3220 have the Meeting partly in committee, as Deputy McSwiggan said.

So all of those ... (*audio connection lost*) I would be very surprised indeed (a) if anybody thought that that was a criticism of P&R or the Health & Social Care Committee, and (b) if the members of the public did not think that was an appropriate, to hear what their Government as a whole, because as Deputy Roffey says that is what we are, think as to the exit strategy going forward.

3225 Deputy McSwiggan says we could always look backwards in due course. Well, what is the point of that? There may be an issue to deal with that in due course, but we need to be able to sort of give some view as to how we think that the exit framework should operate, not to circumscribe or proscribe anybody.

As I say, if Dinah Washington says *What a Difference a Day Makes*, what a difference the next  
3230 five days could make in relation to these things. I hope not much, but it could be. The word that I

heard so many times, and I commented on it in the previous debate, was 'democracy, democracy, democracy'. We have got to have an early election, said some States' Members, but when they were given the chance for an early election they balked at it, because it was too early for them.

3235 Democracy means that the views of the people are listened to, not necessarily always agreed with, and the way they can be listened to is for their public representatives, i.e. us, the 39 of us that have been elected either in Guernsey or in Alderney, to have our viewpoint and to express that to people who have been making the decisions to date.

3240 Somewhat implicit, I think in Deputy Prow's speech was if we do that we are criticising the people that made that decision. I am certainly not, because I think they have done an excellent job. But I think, going forward, we have to widen it out. We have to decide where we are going to go and with just one proviso, I very much agree with Deputy Lester Queripel, that frankly my view is we should be getting rid of the lockdown and we should be moving back to normal life. The proviso – I am not necessarily saying that Deputy Lester Queripel disagreed with that because he was speaking in shorthand on that point, I think – that we should open the borders, I am not in favour of that at the moment, that dictates a further debate at some length.

3245 The only reason that I was at all considering voting against the two amendments that I have seconded, but I am not going to, is because Deputy Parkinson said he has had correspondence from lawyers. What on earth has it got to do with them and what would those paper tigers do about it? Absolutely nothing.

3250 But on that, sir, I would suggest to the States, let us make a decision, let us have our debate next week on the position and also, people say, just one final point on the Deputy Soulsby amendment where it says let us go to June, that is a bit longer, that gives time to reflect. But, as I understand it, P&R will not be ready, unless again things change, to come forward with a detailed recovery plan until July.

3255 Thank you very much sir.

**The Bailiff:** Deputy Tindall.

3260 **Deputy Tindall:** Thank you, sir. I have a little feedback here, does it sound okay your end, may I ask?

**The Bailiff:** It is fine, thank you.

3265 **Deputy Tindall:** Thank you. The first two amendments to go with debate on the exit framework initially next week and then a later one in August is, in my view, not the right time. Yes, in June, but not at the end of May. We have much to do next week to ensure phase four starts smoothly and even to start considering phase five.

3270 Debate should have been on the directions, as my colleagues have said and as Deputy Soulsby advised Members when we were looking at the Regulations. The CCA felt that this was right, to give HSC the power to follow Dr Brink's advice and that has been reaffirmed by the Assembly several times, without debate, or even objection.

3275 States Members also conflate the exit framework with the recovery strategy – so far the non-existent recovery strategy. We need to concentrate on that and that is sorely needed. Deputy Lester Queripel would have the chance to present his ideas if we had actually debated it, the high-level principles, at this Meeting, as was initially indicated.

3280 We need to involve all of Government in that recovery, ASAP, and not just an advisory group of a section of the Assembly. Deputy Green, I felt, did also conflate the two. The content is based on Public Health advice, not on the wider economic or fiscal policies or environmental concerns. We need to get on with that debate, not on what we have done over the last months, which have been successful.

Deputy Merrett mentioned the payments made to businesses, but that is not part of the exit framework, so I do agree with her conclusion that it is best debated with the recovery strategy, as

per the Soulsby/Tooley amendment. In fact, sir, it is at this point I would appreciate your advice, or that of the Law Officers, of what matters outwith the exit framework could be debated next week as it is clear that matters may arise that States' Members would want to debate, which are clearly not within the exit framework.

One aspect, also, which has been raised a couple of times now in this Meeting, is the supposed Guernsey policy of eradicating the virus. Deputy Jess Perchard asked the Jersey States to adopt a policy objective in Jersey to eradicate the virus rather than contain it. She said this was akin to what was in Guernsey's policy.

But if you want to believe what is written or spoken in the *Press* we have to confirm we have not got such a policy. It has been an indirect opportunity created as a consequence of the excellent performance of the primary approach, which was agreed by Committee, and remains in place.

This approach to eradicate in Guernsey was because we have done so well and not a change in policy, which Deputy Perchard sought in Jersey. Our approach remains as mentioned at the press conference today, when it was acknowledged by Deputy St Pier that we may go to zero cases, but that does not mean we have eradicated the virus, as we may get another case the next day. Eradication may happen although we may not even know it, because the next day, a traveller may arrive who is asymptomatic and not self-isolate even if they had to and the eradication that we may not even have known about would have ended.

Deputy Fallaize also felt that the third amendment had no point. I totally disagree. As Deputy Merrett has indicated, we were told we would be debating a recovery strategy at this Meeting, then possibly June and now it is apparently July. This amendment, which is to me, makes it to be June, which cannot be soon enough in my view.

The point is to get the exit framework at the same Meeting as the recovery strategy so the ability to debate both will not be at issue. We would be able to cover all that was necessary. The sooner the better.

The important point here is HSC are following Public Health advice. The requirement in the Regulations is for us to take Dr Brink's advice and that is what we have done. The exit framework is her work, containing her advice, and we have taken it. If debate is taken next week, the States should make it clear whether they wish to rescind the Emergency Regulations giving HSC the powers to make decisions, which are in accordance with this advice, because that is what we would have to take into account.

A debate may be beneficial but changes would not be made to it without a change of the powers given to HSC. We at HSC would love to have the emergency declared over. Not because of all of the wonderful things that it would mean to our population. Basically because we do not think we should be continuing with our powers for any longer than absolutely necessary.

But I ask the Assembly this: if those powers were removed and a new wave of the virus came back, severe enough for an emergency to be declared again, would the CCA grant the powers to us again, in the same way as they did in March? Would the Assembly want instead for Economic Development or even P&R to have those powers? Or would they want a combination of representatives from the States to decide on how they wish to interpret Dr Brink's advice?

Considering the success so far of setting up a committee to work on a recovery strategy, compared with the success of the CCA and HSC, somehow I think it would be HSC once more. We need to maintain the confidence of the public. We must not throw away the hard work of our magnificent population and we should concentrate on the recovery strategy to be brought to the Assembly.

I would rather wait 21 days, to debate both the recovery strategy and the exit framework together, as in the Deputies Soulsby/Tooley amendment, because that is the right time to do it, than simply debate next week a framework which is based on the best clinical advice and will shortly be out of date. Let us get on with the real work of recovery.

Thank you, sir.

**Motion to sit until 6.30 p.m. to conclude Item II –  
Proposition carried**

**The Bailiff:** Members of the States, it is 5.30 p.m. or just gone 5.30 p.m., I think I know what the answer is going to be but I have got to, under the Rules, put a motion to you that we sit to conclude debate on this item of business, which means getting through all the amendments and getting through the vote on whatever Propositions are in play at the end of that. Frankly, it would be nonsense now not to conclude this debate tonight but in the first instance I am going to suggest that we extend our sitting hours for up to 6.30 p.m. Those in favour?

*Members voted Pour.*

**The Bailiff:** Thank you Members of the States, although there were a handful of people who voted Contre, the Pours clearly had it, so we will continue debate.

**Dates of States' Meetings –  
Debate concluded –  
Propositions carried as amended**

**The Bailiff:** I will call Deputy Brehaut, to be followed by Deputy Smithies.

**Deputy Brehaut:** Thank you, sir, and with your comments in mind while the vote was taken, I will be extremely brief. As I walk the parish or the district of St Peter Port South with my dog, more recently people have approached me and thanked me for the work that I have undertaken with my position on the CCA. I have to say I do at times feel something of a charlatan. The outward facing side of the CCA has been exceptionally well-managed, incidentally as has the inward facing side, and we have a real debt of gratitude to both Deputy St Pier and Deputy Soulsby for the work that they have done and to instil the community with that confidence.

I am making that point because I think it took a little while, perhaps for me as a Member of the CCA and I am sure for other States' Members who were outside the tent, not inside the tent, to appreciate the overlap of the work of Health & Social Care, the role of the Medical Officer of Health and what the CCA do. As that emerged to me, and this has only begun after weeks, the manner this has emerged and the manner it has been managed has actually, thankfully we are only having this conversation today with the security net beneath us that actually things have been managed extremely well.

All I would like to say is what we have done, and it has worked very well, is pare down a Government of 39 down to two and I think that has gone very well. We may have been able to improve it along the way by having perhaps the President of ESS more visible, at times the President of Education more visible, actually the role of Deputy Trott as a Member of P&R who is doing the number-crunching on this. I think at times it would have been interesting to have had Deputy Trott on the platform discussing the issues he is dealing with.

But, again, I stress we are in a good position and because we are in that position I think we should have the confidence just to be analytical about what has happened and what we intend to do in the weeks ahead. For example, the issue of borders is something I think that could be discussed.

So, I would support the Dorey/Ferbrache amendment and I support it knowing that we are a mature parliament, Assembly, we know what the public expectations are with regard to the crisis. We know we would not want to blot our copy book and I think it would make sense for us to have



a debate. Not a post mortem but a next step type of debate, I think, would be extremely useful. Thank you, sir.

**The Bailiff:** Deputy Smithies.

3375

**Deputy Smithies:** Thank you, sir. Just in response to Deputy Brehaut's comments just then, 'up to a point Lord Copper', to quote Evelyn Waugh. Deputy Ferbrache mentioned Dinah Washington. I was going to offer Bobby Darin's version of *What a Difference a Day Made*, rather than makes. Or perhaps, Kenny Rogers, *If I Knew Then What I Know Now*. But once again the caravan has moved on. I am not, and I am going to be brief here, in my usual way, I am not in spite of Deputy Merrett's comments, in favour of Amendment 2, but I will support Amendment 1 and/or Amendment 3.

3380

**The Bailiff:** Deputy St Pier.

3385

**Deputy St Pier:** Thank you, sir and I shall be relatively brief as well.

My real plea is for us not to return next week for a further meeting and debate on this exit strategy. I think it would be a pointless debate merely to note a document. I note Deputy Ferbrache saying there was no criticism and I absolutely accept his comments at face value on that. But I disagree with him that actually the public have any expectation in relation to this. I think their preference is that we spend our time between now and next Friday doing what we need to be doing, which is working out all the detail of how to implement the move to phase four.

3390

There is a lot of work to be done, which would involve people who would otherwise be required to sit through a further Meeting next week. The Director of Public Health, HM Comptroller and Procureur, the Committee for Health & Social Care and indeed other political Members would be involved as well and for what purpose?

3395

I think we will have lost our collective minds and be self-deluded if we think that the public seriously believe that is what they want us to be doing next week, producing a lot of hot air around this document. So I think, whatever Members choose to do, my one plea would be not to convene a Meeting next week when we are in the middle, frankly, of far more important work.

3400

**The Bailiff:** As no other Member is indicating a wish to speak on these three amendments, as Deputy Inder has already spoken on behalf of the States' Assembly & Constitution Committee, we will go to each of the proposers in turn, in the order that I indicated earlier. So I invite Deputy Dorey to sum-up on Amendment 1. If he wants to sum-up on Amendment 2 as well, he can do, and then we will put Amendment 1 to the vote first. Deputy Dorey.

3405

**Deputy Dorey:** Thank you, sir.

I will sum up on both, to cut the time down. Deputy Soulsby spoke initially and said it was a framework not a strategy. I just think exit strategy is a name but I am quite happy to call it a framework. She spoke about the debate and whether it was to amend the framework. The actual amendment says to 'note' the contents of the document.

3410

If I said amend, I meant it might give an opportunity for them to amend. I did not intend it to amend and I am perfectly happy with Deputy Inder's comment about it being a green paper and others have mentioned as well, Deputy Ferbrache as well, about in a green paper debate, under Rule 17(9). I am also happy that if it was an in-committee debate, as Deputy McSwiggan proposed. I think those are sensible ways forward if that is what they want to propose.

3415

I strongly feel that Amendment 3 is wrong and my amendment is right, in terms of having the recovery plan and the exit framework debated together. The proposals in Amendment 3 talk about it being appended and I think, if the exit framework was just appended to the recovery plan, all the Propositions would be in relation to the recovery plan and therefore the exit framework would not be properly debated. I think we need to have a debate that is dedicated to that so it is not lost as an appendix, as it would be under what the –

3420

**The Bailiff:** Deputy Dorey, Deputy Soulsby wishes to raise a point of correction, so can I call Deputy Soulsby please?

**Deputy Soulsby:** If there is an appendix to any document it would make it less of a report to be debated. Every single policy letter we have has some kind of appendix, which we comment on and debate. Given that he is happy it is only a 'to note', I cannot see any issue with it.

**The Bailiff:** Deputy Dorey, please.

**Deputy Dorey:** Thank you. I am not sure that is a point of correction, I think that is a political point. If it is appended, I think it is something that is additional information rather than being the subject of the debate and that is what I am trying to say. I think we need to have a debate where the subject of the debate is the exit framework.

I think P&R have previously said that the recovery strategy will not be available until July, so I do not see the point, even, in the first part of their amendment, of having it in June, because I do not think they will be ready.

Deputy Fallaize said it was a pointless time to debate. I totally disagree. The key issues, as others have said, are that we forward the phase six, which is included in the exit framework and there is very little detail in there, I think it would be ideal if the Chamber could debate that and give their views on it. Phase five has not happened either. I think that should be debated and as I said in my opening speech, if there is a second wave and the degree of lockdown that needs to go in, I think Members' views on what should be the lockdown should be debated.

In an earlier debate, I quoted Iceland. If people ever study Iceland, it is very interesting because they have a similar *per capita* number of cases to us. They have had a lot less death *per capita*, but the lockdown has been a lot softer and they have come out of a lot softer lockdown a lot earlier. So I think it clearly shows that there are other ways of achieving a similar result to what we have.

I think these other points were covered by what I said in Deputy Soulsby's speech and I completely agree with Deputy Parkinson. There is a democratic deficit. There has been a shift in policy. It has been said that it was originally flatten the curve, then the words changed to squash the curve and then it was to eliminate and not eradicate, as Deputy Tindall mentioned in her speech.

But this policy has never been debated. Our sister Island has debated it. It is accountability. I think it is right that we should be debating this issue. It is one of the most far-reaching policies we have had and I believe it should be debated. There have been comments about the fact that we have the Regulations, which come in front of the Assembly. I think Deputy Prow made those comments, Deputy Green also referred to them as well.

But I agree with Deputy Green, they are not a vehicle that we can properly debate. We have not got a document like the exit framework in front of us and we cannot amend them. Basically you either accept them or you do not accept them and, if you do not accept them, as was said, they lapse after seven days. They have already been signed before the States' debate them. They were not a vehicle to debate.

I did challenge them in terms of what they were achieving in the April debate and the other key factor is that this exit framework was only published on 5th May, so this is the first opportunity we have had since then to actually discuss it and I think it was clearly shown on Wednesday that there was an engagement in the active framework when we had the debate on the Regulations, so they do not achieve what Deputy Prow we could achieve, is debate the exit framework at that point, because it was not achieved. We need a dedicated debate on the exit framework.

Deputy McSwiggan, I think she mentioned get out of the way, the words I think she used. We had a rapid decision about the Emergency Law, I totally agree. But there has been no democratic input and I think that is most important for a parliamentary democracy. Mention about a meeting of HSC needs to be rescheduled, well I think a meeting of our parliament is the most important

thing and I said that to Deputy St Pier. I think we have to put our parliamentary democracy ahead of everything else.

Time is made to have media briefings, answer media questions but what a message we send out on democracy that there is not time for States' Members to debate something when it is presented to the media. I think that sends out such a bad message and I urge Members to support this so that this Chamber can debate it.

Deputy McSwiggan spoke about a post-event review. Yes, I completely agree that is a right way forward after something like this has happened. We should do that, but the key point I am making was still we have not reached the post-event, we are still in it and I think there need to be some democratic accountability. We should remove the democratic deficit that we have had, Deputy Parkinson said, and debate this issue. She said she would support August and I thank her for that.

I agree with Deputy Trott, the events of yesterday show that it is justified to have this debate. I agree with Deputy Roffey that this is not a criticism of them, this is part of our democracy. I think, if we say that, by debating something, we are criticising people, that is wrong. I think Deputy Prow spoke about if any Committee, as long as it is doing well it does not need to debate in parliament, that is just so bad in terms of democracy. Who makes that judgement that a Committee is doing well? That has to be a parliament.

Deputy Roffey spoke about the elephant in the room as being phase six and I fully agree and one of the key questions is when do we open up our borders and I agree with him, one option is wait until we have a vaccine. There are many other options and I think it is important for such a key decision that is going to affect so much of our economy that this Assembly has a chance to discuss the exit strategy and give its view, which hopefully will influence decisions which are subsequently made.

Why August, he said. Well, it was on the basis that there should be a period of time after the May debate, so we have a chance to consider it. If he is not happy with August, at all States' Meeting, they appear as the final item on the Agenda and he can then try and amend it if he is not happy with that date. I do not normally like States' Meetings in the holidays but, because of the quarantine rules, I did not think people would be travelling.

I agree with Deputy Lester Queripel, we need a can-do approach and this is a can-do approach, in terms of can-do the debate. As he said, it is time for the Assembly to be involved. As Deputy Green said, we have been very quick through the phases and if that means coming out, that we need to have debates as soon as possible so that we can have the political oversight, which is necessary. I thank Deputy Ferbrache for seconding the amendment and I thank you for your speech. As he said we are not ready for recovery until July and it is no criticism, it is just political scrutiny.

Deputy Brehaut talked about analytical confidence in the strategy or the framework and I agree with that and that will partly come from this Chamber discussing it. I completely disagree with Deputy St Pier that it is a pointless debate. I think it is very important that we do debate the issue, so that this Assembly is part of the process. This is so far-reaching. What is the point of having a parliament if it does not debate an issue such as this?

So I just ask Members to support both having this debate next week, so that we can give some direction about the way forward, but I do not expect us to be amending it. I believe that Members can express their views and they can take consideration of the way forward and it will give us opportunity again, to discuss it as we develop through the phases and, if there is a second wave or where we are with phase six in August, I think, but if Members do not want a debate in August, of course, they do not have to have that Meeting, they have that option when we discuss the Schedule at the end of each Assembly.

The other point about July, I think with both the June and July debates are quite busy, already, there are quite a lot of items on it and I think, if we are going to debate the lockdown in July, there is enough to debate with the other business, without getting into the exit framework. I think a more dedicated debate is better for people and the people to concentrate on the issue. So I urge Members to support a dedicated debate just on this very important document, which is the exit framework, both now to give direction to the CCA and again in August.

Thank you, sir.

**The Bailiff:** Members of the States, we go first, then, to the vote on Amendment 1, proposed by Deputy Dorey, seconded by Deputy Ferbrache, which, if approved will insert a Proposition into the set of original Propositions, with a view to convening a Meeting on Wednesday of next week, provided that there is something to debate. Deputy Soulsby wishes to raise a question, there is also a request for a recorded vote, but Deputy Soulsby, what do you wish to ask?

**Deputy Soulsby:** Yes sir, I thought that we would both be summing up at the same time in response to the whole debate. I cannot, then, respond to everything that is in debate until after there has been one amendment voted on.

**The Bailiff:** Deputy Soulsby, the usual approach is, where we have multiple amendments being debated at the same time, we just turn to the proposer of each, in turn. It just happened that Deputy Dorey is the proposer of Amendments 1 and 2. You will get a chance to speak to Amendment 3 before we take the vote on Amendment 3.

A recorded vote, please, Greffier, just on Amendment 1 at the moment. We will see what the result is on Amendment 1 before deciding what happens next.

*There was a recorded vote.*

Amendment 1:

*Carried – Pour 23, Contre 16, Ne vote pas 0, Absent 0*

POUR	CONTRE	NE VOTE PAS	ABSENT
Deputy Ferbrache	Deputy Tindall	None	None
Deputy Brehaut	Deputy Tooley		
Deputy Gollop *	Deputy Le Clerc		
Deputy Parkinson	Deputy St Pier		
Deputy Lester Queripel	Deputy Fallaize		
Deputy Leadbeater *	Deputy Lowe		
Deputy Mooney	Deputy Hansmann		
Deputy Trott	Rouxel		
Deputy Le Pelley	Deputy Graham		
Deputy Merrett	Deputy Le Tocq		
Deputy Stephens	Deputy McSwiggan		
Deputy Meerveld	Deputy Langlois		
Deputy Inder	Deputy Soulsby		
Deputy Laurie Queripel	Deputy de Sausmarez		
Deputy Smithies	Deputy Roffey		
Deputy Green	Deputy Prow		
Deputy Paint	Deputy Oliver		
Deputy Dorey			
Deputy Brouard			
Deputy Dudley-Owen			
Deputy de Lisle			
Alderney Rep. Roberts			
Alderney Rep. Snowdon			

\* denotes Members who voted by proxy

**The Bailiff:** Members of the States, the voting on Amendment 1, proposed by Deputy Dorey and seconded by Deputy Ferbrache was that there voted in favour 23, against 16, and therefore I declare the amendment duly carried, which means that Proposition 1A has now been inserted.

Deputy Dorey, is it your wish that we still take a vote on Amendment 2?

**Deputy Dorey:** Yes please, sir.

3550

**The Bailiff:** So, we will now go to Amendment 2. Can we deal with that as a recorded vote? Thank you Deputy Lester Queripel. So we will have a recorded vote on Amendment 2, Members.

*There was a recorded vote.*

*Amendment 2:*

*Carried – Pour 23, Contre 12, Ne vote pas 4, Absent 0*

POUR	CONTRE	NE VOTE PAS	ABSENT
Deputy Ferbrache	Deputy Trott	Deputy Tindall	None
Deputy Brehaut	Deputy St Pier	Deputy Tooley	
Deputy Gollop *	Deputy Fallaize	Deputy McSwiggan	
Deputy Parkinson	Deputy Smithies	Deputy Oliver	
Deputy Lester Queripel	Deputy Graham		
Deputy Le Clerc	Deputy Le Tocq		
Deputy Leadbeater *	Deputy Brouard		
Deputy Mooney *	Deputy Langlois		
Deputy Le Pelley	Deputy Soulsby		
Deputy Merrett	Deputy de Sausmarez		
Deputy Stephens	Deputy Roffey		
Deputy Meerveld	Deputy Prow		
Deputy Inder			
Deputy Lowe			
Deputy Laurie Queripel			
Deputy Hansmann Rouxel			
Deputy Green			
Deputy Paint			
Deputy Dorey			
Deputy Dudley-Owen			
Deputy de Lisle			
Alderney Rep. Roberts			
Alderney Rep. Snowdon			

\* denotes Members who voted by proxy

3555

**The Bailiff:** Members of the States, the voting in respect of Amendment 2 was that there voted Pour 23, Contre 12, four abstentions and therefore I declare Amendment 2 duly carried, as a result of which, can you just amend that to read Proposition 1B now, because we will take them in order in due course. Now, Deputy Soulsby, we will turn to Amendment 3 and I invite you to reply to the debate on Amendment 3.

3560

**Deputy Soulsby:** Thank you, sir. Before I do, I have to say I am completely befuddled and confused now because points that I would have made regarding things that Deputy Inder said and others about how we would be able to take a policy letter, which we have got to write in the next two days, to the States, in what format we take it. I do not know where we stand on that and I am assuming this amendment does not usurp either of the other two amendments, so all this amendment would be, would be additional to the other two.

3565

3570

**The Bailiff:** Deputy Soulsby, the way it will work is that we will take the vote on Amendment 3, Proposition 1 first. If that carries then there is no further vote. If it does not carry, then we have a vote on Proposition 2. If either of those are successful then we have three inserted Propositions. If neither of them is successful, we have two inserted Propositions. Then I will turn to Deputy Gollop about Amendment 4. Once we have dealt with Amendment 4, we will then go into general debate and it is at that point at which you can make the points that you wish to make about the difficulties with the two successful amendments.

**Deputy Soulsby:** Joy! Yes, thank you, sir.

3575

**The Bailiff:** Deputy Soulsby then.

**Deputy Soulsby:** Thank you.

3580 Yes, aside from knowing what it is that we are aiming to do under Amendments 1 and 2, I think yes that might be for a different debate. So, in terms of the current amendment, I think it is absolutely right, again, and there has been little debate, everybody has been focussed on the exit strategy whereas I would have thought – the exit framework, even I am saying it now – our real focus should be on recovery.

3585 We are getting to the end of lockdown now and then to start debating it again, I just think, well, fine. As I said, I am not against scrutiny and a debate on this, far from it. What we are objecting to is having a debate next week, which is why we have laid this amendment because we thought it would be much better to have it in just two-and-a-half weeks' time. Members do need to understand that. We are not kicking it into the long grass.

3590 I would say that we would be happy for it to be done in June. I am just making comments from certain Members, I did think it was rather rich from Deputy Parkinson to say how there is a democratic deficit and we should be debating the framework right now, given that we have been waiting four years for his Committee to bring a retail and tourism strategy to the States. I have not seen that so I do not know what his plans are on that. Perhaps we ought to be pushing that now and laying a requête for that to happen.

3595 Again, I hate to do this, because it seems we are just repeating the same old points, that the virus can come back. This is the worry that we have, as part of the easing the lockdown, that people might become complacent because they think everything is going so well and then we ease out of lockdown and, great, everything is fine and we do not have to worry about it. The possibility of the virus coming back is very much there and modelling has shown it is very possible that could happen.  
3600 So I think Members need to be aware of that before they say that we need to open everything up immediately.

3605 Another reason why, we need to think and debate the exit framework with a recovery plan. It is the recovery plan that is going to determine our future and it fits in with what, really, the Assembly should be considering, not the operational issues that we have had to be dealing with over the last two months.

3610 The debate is fine, I have got absolutely no problem about that. I am happy having a debate, which is fine, but when Deputy Parkinson 'and then we are giving direction to HSC and what they should do', what if something changes the next week? Does that mean we have to hold another urgent States' Meeting to discuss something, because something has changed? So I think we need to be careful about that.

I have made lots of comments based on what was said and it was more in respect of Deputy Dorey's amendment than mine, because I did not really hear very many people say anything against it at all so hopefully people will support it.

3615 I thank Deputy Roffey for his comments as well. To me, and this is what we were thinking about all along, that the June debate would be a perfect opportunity. It would be after we have put in all the phase four changes and we have had the time to do it. This amendment is required because it will be after the dust have settled over dealing with phase four next week, which as Deputy St Pier said, will require a lot of people's time, not just the Committee, so we are not being precious about any of that, but it is about having the staff, the Law Officers and everybody, to consider what needs  
3620 to be done next week.

We thought June was close enough that it did not feel like we were kicking it into the long grass. But also it enabled that recovery and exit framework to be debated at the same time, because where one is started off and will finish, the other one needs to lead onto the future. So that is where I am, sir.

3625

**The Bailiff:** Members of the States, we go to the vote now on Amendment 3, proposed by Deputy Soulsby, seconded by Deputy Tooley and I am asking you to vote, initially, on Proposition 1 in that amendment, which is relating to a Report to the Meeting that is due to commence on 17th June 2020 and Deputy Lester Queripel has requested a recorded vote. So, Greffier, we will have a recorded vote please.

*There was a recorded vote.*

*Amendment 3:*

*Carried – Pour 39, Contre 0, Ne vote pas 0, Absent 0*

<b>POUR</b>	<b>CONTRE</b>	<b>NE VOTE PAS</b>	<b>ABSENT</b>
Deputy Ferbrache	None	None	None
Deputy Tindall			
Deputy Brehaut			
Deputy Tooley			
Deputy Gollop			
Deputy Parkinson			
Deputy Lester Queripel			
Deputy Le Clerc			
Deputy Leadbeater *			
Deputy Mooney *			
Deputy Trott			
Deputy Le Pelley			
Deputy Merrett			
Deputy St Pier			
Deputy Stephens			
Deputy Meerveld			
Deputy Fallaize			
Deputy Inder			
Deputy Lowe			
Deputy Laurie Queripel			
Deputy Smithies			
Deputy Hansmann Rouxel			
Deputy Graham			
Deputy Green			
Deputy Paint			
Deputy Dorey			
Deputy Le Tocq			
Deputy Brouard			
Deputy Dudley-Owen			
Deputy McSwiggan			
Deputy de Lisle			
Deputy Langlois			
Deputy Soulsby			
Deputy de Sausmarez			
Deputy Roffey			
Deputy Prow			
Deputy Oliver			
Alderney Rep. Roberts			
Alderney Rep. Snowdon			

\* denotes Members who voted by proxy

**The Bailiff:** Well, Members of the States, there as unanimity there. There were 39 votes in favour of Proposition 1 of Amendment 3, proposed by Deputy Soulsby, seconded by Deputy Tooley. No votes against, no abstentions and therefore can I suggest that we number that 1C, so that we now have Proposition 1, 1A, 1B, 1C, 2, 3 and 4? Deputy Gollop do you still wish to be able to move Amendment 4?

**Deputy Gollop:** Well, sir, if I have understood your advice and guidance earlier that under the interpretation of the Rules, if and when we have an August States' Meeting, it is not eligible to be regarded as a special States' Meeting under the narrow terms, then my amendment, given that number 2 has passed, is I think otiose and not required any more. But maybe my seconder or other States' Members might have a different view on that but I cannot see any obvious purpose in placing it because the objective has now been satisfied by the victory of the second Deputy Dorey/Deputy Ferbrache amendment.

**The Bailiff:** Deputy Gollop, strictly speaking, all that has happened is that what is now Proposition 1B has been added. Of course the amendment has been carried. Whether or not Proposition 1B will be carried at the end of it is another matter. If Amendment 4 were to be moved, were to be successful, it would add to Proposition 1 and if Proposition 1 then carried I would not put Proposition 1B to the Members. It is dependent, Deputy Gollop, in any event, on the motion under Article 7(1) of the Reform (Guernsey) Law being successful. Because if that does not carry then you cannot even place Amendment 4. That is why I was asking if you wanted to place it.

**Deputy Gollop:** I do not think I want to place it given the lateness of the hour.

**The Bailiff:** Thank you very much. Members, you can disregard Amendment 4 now in its entirety and we move into general debate.  
Who wishes to speak in general debate? Deputy Oliver.

**Deputy Oliver:** Thank you, sir.

I am all for getting a framework and being including in the workings of Covid recovery for the Island. But I do want it to be a useful and meaningful debate and I just do not see how, if the HSC and Policy & Resources were not expecting this debate to come along next week how we can get a policy letter together that is going to be meaningful and actually going to do something for the States.

I have a feeling it is just going to be a talking shop next week about a load of different things but nothing actually concluded or anything and I would much prefer to see a much more of a let us get things done rather than chat about it for two hours. I do find sometimes these debates just go on and on without actually any real outcome. So I would urge Members to vote against Proposition 1A because I just do not think it is going to be meaningful.

Thank you, sir.

**The Bailiff:** Deputy Fallaize, to be followed by Deputy Prow.

**Deputy Fallaize:** Thank you, sir.

I think the way that the Propositions stand at the present time there is now the potential for a States' debate on the same document, albeit that it may be evolving versions, on 27th May and 17th June and 19th August. I doubt whether it is going to be productive and useful and necessary to debate these matters three times in the space of what is really a few weeks.

I know that most States' Members, and I include myself in that, have felt, and I said about this in the debate on one of the amendments, that opportunity should have been taken to bring some of these matters to the States before now, but I do not think we can make up for any frustration about that, not in a sensible way, by voting now to have a series of debates on the same issue in a short space of time.

I think that, probably partly because of the circumstances we are in, this has been referred to by many Members, the way in which decision-making in relation to Covid-19 has necessarily been concentrated in fewer hands than we are used to in the States, I think perhaps the States are falling into the trap of believing that the Island is best served the more days the States meet and we appear, at the moment, to be in a cycle of wanting to meet almost as often as we possibly can.



I really do not think that is productive. I know that the States are the Government as well as the parliament, but if we continue like this we might just as well scrap every States' Committee and sit almost every day as a giant committee of 39, because it feels to me as if that is the way this is going.

Deputy Soulsby and Deputy St Pier have already said, have advised the States that next week is a critical week for putting in place the detailed plans to allow the Island to move into phase four of the exit strategy from this time next week. Now, potentially, we have a Proposition in front of us at least, which would provide for a States' Meeting next week and it would not be just to debate the exit framework it would be to debate the items which would otherwise be carried forward to the mid-June debate.

So it will be a three-day almost certainly and Deputy Yerby has already said, I think with some justification –

**The Bailiff:** Deputy Fallaize, it is Deputy McSwiggan, please.

**Deputy Fallaize:** I am sorry, sir, and I am as bad as Deputy Trott in relation to that. I apologise to Deputy McSwiggan. Deputy McSwiggan has already said and I think with some justification that if there is going to be this kind of debate, she would propose the States going into committee. I can understand that. I think it is probably a good idea.

Potentially, then, the States would be able to hear from officers and statutory officials and others who would be able to aid in an in-committee debate. Are we seriously, when we know the work that is ahead next week to prepare for the detailed announcements in relation to phase four, are we really going to require the people who are most key to that work to be dragged into the States, certainly on Wednesday, I would predict probably on Thursday as well, potentially even into Friday, for a debate where the Proposition would only be to note?

Deputy Oliver mentioned a talking shop. Of course, inevitably, this debate or these debates, whenever they take place, are going to involve States' Members providing their opinions but not making any firm decisions at the end of it, because I think it is widely accepted that the Island's response to Covid-19, at any kind of detailed level, cannot be dealt with by a committee of 39. But this is the process we have now set ourselves into.

So I cannot see the sense of meeting on 27th May, 17th June and 19th August to debate, essentially the same document and, in particular, to do it next week, when the key participants in the debate need to be working on behalf of all of us, putting in place the plans, hopefully, to move to phase four from this time next week.

There is only any point in the States having this debate at all if those who are presenting the report have a bit of time to give it some considered thought and those who are receiving the report, the other States' Members, have some time to give it some considered thought. And that cannot happen, in my view, between 6.30 p.m. on Friday evening and 9.30 a.m. on Wednesday morning.

I think a more considered debate could take place in three weeks' time, or whatever it is, at the Meeting on 17th June. I was sceptical about whether there was a need for a Meeting at all. I accept that the clear majority view of the States is they want to debate the exit framework but, having inserted the potential for all these debates on 27th May, 17th June and 19th August, I encourage the States not to go ahead with the one on 27th May, but to go ahead on 17th June. I am not going to express any views in general debate on the issue of 19th August.

Thank you, sir.

**The Bailiff:** Deputy Prow, to be followed by Deputy Lowe.

**Deputy Prow:** Thank you Mr Bailiff.

I will be very brief, not least because I think Deputy Oliver's children need their tea! Can I just simply say please listen to the words of Deputy Soulsby and Deputy St Pier. The idea to have a debate on 27th May, it is the practicalities of it, the work that is involved on the Committee, both

3740 the Civil Contingencies Authority, P&R and HSC, our real effort is about actually working out in detail the phasing down of the restrictions.

So, I would urge all Deputies to actually vote for Proposition 1C. I was going to raise a point of correction, when Deputy Dorey spoke, because he misquoted me. I did not do it at the time because I wanted the debate to go on. What I emphatically said is I actually support a debate but not in a way outlined in his amendment. I really want to make that clear on *Hansard*. My point about Members facing two ways was in response to comments made in debate not about whether a debate in this Assembly is irrelevant or not.

Thank you, sir.

3750 **The Bailiff:** Deputy Lowe.

**Deputy Lowe:** It is really asking Members to give consideration, again, about 27th May, which has already been said by Deputy Fallaize, because we have heard from Deputy Soulsby, we have also heard from Deputy St Pier and with the way the amendments went, obviously Deputy Soulsby was after the vote on Amendment 1.

The answer to that is, if States' Members reject 27th May and, if they do not want to wait until 17th June, there is not any reason why there could not be a Teams presentation for all States' Members, which would enable Dr Brink to be there and any other expertise that we wanted and that would be far more meaningful than having something next week, which is just not going to be particularly productive whatsoever. As has been explained so much already this afternoon. The amount of work that is required for phase four and this does not happen with just a two-minute meeting. There is an awful lot of work for HSC to be getting on with and I do not think they need that distraction for next week.

So I would suggest to Members that they reconsider their vote and reject 27th May and HSC could set up a Teams presentation with all the expertise there, for all States' Members, at a date after 27th May.

Thank you, sir.

3770 **The Bailiff:** Deputy Tindall and then Deputy Smithies.

**Deputy Tindall:** Thank you, sir.

I am going to be a few words here because I did not know when I said to speak that Deputy Lowe was going to say what she suggested, but I have to say I thought that was an excellent idea because, if I can read out a very brief part of a Tweet that I have just seen:

To be fair to Health & Social Care, they have a ton of stuff to figure out before next Saturday.

3775 I cannot stress how much it has been hard work. For me it has been relatively minor in comparison to the work that is being done by the teams and I really do hope that point that Deputy Lowe has raised will satisfy Members. I think the previous briefing was well-received and I think it would be a really good idea, subject to the fact that after this coming week we have got to have all the stuff on phase four that we want to do. When I mean we, I mean Dr Brink and the team there.

3780 Also, I think I would like to mention the first speech. Deputy Oliver hit the nail on the head. It will be a talking shop. It will all be about the recovery strategy and not about the exit framework and I really do appeal to Members, please let us be able to carry on this fantastic work that we have been able to do so far and give all the attention it deserves to getting the documentation out so we can have a really good discussion. Have a Teams meeting as Deputy Lowe says, have the debate on the 17th, so all of that information can be out in the public domain as well, with the recovery strategy and, please, can we have, I really hope that States' Members agree that Proposition 1C is the one.

Thank you, sir.

3790 **The Bailiff:** Deputy Smithies,

**Deputy Smithies:** Thank you, sir, I shall be very brief in order to get my bit in before 6.30 p.m. I said I would vote against Amendment 2, I did. I said I would vote for, a, Amendment 1 and/or Amendment 3. That was in case Amendment 3 failed. Now that Amendment 3 is on the table and it has become a Proposition, I will now vote for 1C only.

**The Bailiff:** Deputy Le Clerc.

**Deputy Le Clerc:** Thank you, sir.  
3800 I will be voting for 1C. I just think it is really important. We have got a short week next week, there will be not sufficient time for staff to prepare for a debate on 27th May. They need to put all their resources into getting the phase four detail and easing of those restrictions ready. That is what people want.

3805 I support that we should reconvene on 17th June and we should have that debate there about the recovery strategy and we can then talk about where we are at that point and talk about moving onto phase five, potentially. Thank you.

**The Bailiff:** Deputy McSwiggan.

3810 **Deputy McSwiggan:** Thank you, sir.  
I want to say thank you to all those who have indicated their support for 1C. I have been asked to point out, in case anyone is considering what the issues are, that it is only 1A that is problematic for HSC in terms of progressing with the move to phase four of lockdown, preferably not alongside a States' Meeting next week. There is no conflict between 1B and 1C so if Members want to meet mid-June and another later in the year that would be entirely possible and there is no reason why Members should not vote accordingly.

**The Bailiff:** I now turn to the President of the Committee ... no, Deputy Merrett.

3820 **Deputy Merrett:** Sorry sir. Thank you, sir, I should have learned to type when I was younger.  
I just want to reiterate what Deputy McSwiggan just said: 1B does give us an opportunity as a States, as in the original SACC paper, to have an August Meeting. I have got concerns regarding if there is any Emergency Regulations still in play, but further than that, I think that as a States we really should be sitting in August. I think we have got things we need to get through.

3825 We need to have the opportunity to have any other emergency papers brought before us quickly, expediently and not have a six-week gap. I feel quite strongly about it so I have listened to debate, I will not be supporting 1A but I will be supporting 1B and 1C. As Deputy McSwiggan has said, I cannot see any conflict between 1B and 1C.

Thank you, sir.

3830

**The Bailiff:** Deputy Dorey.

**Deputy Dorey:** Thank you, Mr Bailiff.  
3835 I accept the points that have been made in the Assembly about 27th May. I do not wish to hold up phase four. When the amendment was originally put forward we did not know what was happening in relation to phase four and as it is a four-day week next week, I accept that it would delay bringing in the phase four directions and I do not want to do that.

3840 So I will not be voting for 1A, I will vote for 1B and 1C. I do have some serious concerns about 1B because I think, a, I think P&R's recovery strategy will only be available in July and I also have concerns that the lockdown framework will be lost in that debate but I do not wish to affect, most

importantly, phase four, so I will vote against 1A, but I thank everybody who supported the amendment. Thank you.

**The Bailiff:** Deputy Ferbrache.

**Deputy Ferbrache:** Sir, similarly to Deputy Dorey, I also will not be voting for 1A and I am just mentioning that because (a) I did not know Deputy Dorey was going to speak before me, but (b) also because of the way it has fallen this month, I am voting first on the recorded votes and I accept the point about June rather than May.

**The Bailiff:** As no one else is indicating a wish to speak, I simply turn now to the President of the States' Assembly ... oh Deputy Soulsby, I do apologise. Deputy Soulsby,

**Deputy Soulsby:** Sorry sir, it has been a long week and I have not realised I have got still an amendment, I really do apologise. I would really like to thank Deputy Dorey for the spirit in which he has conducted this debate. I do thank him for saying that he will not vote for 1A and in that same spirit I say that I will vote for 1B as well as 1C. That is really, I think, all that should be said right now.

**The Bailiff:** Thank you very much. Hopefully, this time there will not be anyone else and I will be able to turn to the Deputy Inder, as the President of the Committee to reply to the debate. Deputy Inder.

**Deputy Inder:** Thank you, sir.

As brief as it can be. I will not be voting for 1A, it is fairly clear the proposers and seconders do not want it any more. I think we have moved somewhere. For my part, we have got Wednesday, 19th August back in, and some direction on 1C, so if we can move to the vote as quickly as possible sir, I would be grateful and thank everyone for the debate and Deputy Brehaut for allowing us to go forward with this. I think we have got some kind of resolution.

**The Bailiff:** Now, Members of the States, we come to the vote on the Propositions. I am going to put, simply, Proposition 1 to you, which you will find covered in the original policy letter and I am going to put that to you *aux voix*, I hope. Those in favour of Proposition 1, which is to agree the States' Meetings set out in the Report?

*Members voted Pour.*

**The Bailiff:** Members of the States, I am satisfied that everyone that I have seen has voted Pour and therefore I declare Proposition 1 carried. Deputy Merrett, you had asked for a recorded vote on Proposition 1A as it now is, which is the consequence of Amendment 1, is it still your wish to have a recorded vote on Proposition 1A?

**Deputy Merrett:** No, sir.

**The Bailiff:** I put Proposition 1A to you, discretely but *aux voix*, and that was the Proposition that involved a Meeting next Wednesday.

*Members voted Contre.*

**The Bailiff:** Members of the States, on Proposition 1A, which was the result of Amendment 1, although there was a little voice saying Pour, there was a very loud shout for Contre and therefore

I declare Proposition 1A lost. Proposition 1B, which is the result of Amendment 2, there is a request for a recorded vote. Is that still your wish, Deputy Merrett?

**Deputy Merrett:** Yes please, sir.

**The Bailiff:** Therefore, Greffier, we will have a recorded vote on Proposition 1B.

*There was a recorded vote.*

*Proposition 1B:*

*Carried – Pour 28, Contre 10, Ne vote pas 0, Absent 1*

POUR	CONTRE	NE VOTE PAS	ABSENT
Deputy Ferbrache	Deputy St Pier	None	Deputy Dudley-Owen
Deputy Tindall	Deputy Fallaize		
Deputy Brehaut	Deputy Smithies		
Deputy Tooley	Deputy Graham		
Deputy Gollop	Deputy Green		
Deputy Parkinson	Deputy Le Tocq		
Deputy Lester Queripel	Deputy Brouard		
Deputy Le Clerc	Deputy Langlois		
Deputy Leadbeater *	Deputy Roffey		
Deputy Mooney	Deputy Prow		
Deputy Trott			
Deputy Le Pelley			
Deputy Merrett			
Deputy Stephens			
Deputy Meerveld			
Deputy Inder			
Deputy Lowe			
Deputy Laurie Queripel			
Deputy Hansmann Rouxel			
Deputy Paint			
Deputy Dorey			
Deputy McSwiggan			
Deputy de Lisle			
Deputy Soulsby			
Deputy de Sausmarez			
Deputy Oliver			
Alderney Rep. Roberts *			
Alderney Rep. Snowdon			

\* denotes Members who voted by proxy

**The Bailiff:** Members of the States, on Proposition 1B, there voted Pour 28, Contre 10, one absence, and therefore I declare Proposition 1B carried.

Deputy Le Pelley also wants a recorded vote on 1C, so we will have a recorded vote on 1C, please, Greffier.

*There was a recorded vote.*

*Proposition 1C*

*Carried – Pour 37, Contre 0, Ne vote pas 0, Absent 2*

POUR	CONTRE	NE VOTE PAS	ABSENT
Deputy Ferbrache	None	None	Deputy Dudley-Owen
Deputy Tindall			Deputy de Lisle
Deputy Brehaut			
Deputy Tooley			
Deputy Gollop			

Deputy Parkinson  
Deputy Lester Queripel  
Deputy Le Clerc  
Deputy Leadbeater \*  
Deputy Mooney  
Deputy Trott  
Deputy Le Pelley  
Deputy Merrett  
Deputy St Pier  
Deputy Stephens  
Deputy Meerveld  
Deputy Fallaize  
Deputy Inder  
Deputy Lowe  
Deputy Laurie Queripel  
Deputy Smithies  
Deputy Hansmann Rouxel  
Deputy Graham  
Deputy Green  
Deputy Paint  
Deputy Dorey  
Deputy Le Tocq  
Deputy Brouard  
Deputy McSwiggan  
Deputy Langlois  
Deputy Soulsby  
Deputy de Sausmarez  
Deputy Roffey  
Deputy Prow  
Deputy Oliver  
Alderney Rep. Roberts \*  
Alderney Rep. Snowden

\* denotes Members who voted by proxy

**The Bailiff:** Members of the States, the voting on Proposition 1C, was that there voted Pour 37, nobody voted Contre and there were two absences and therefore I declare Proposition 1C also carried.

We now vote on Propositions 2, 3, and 4, together, *aux voix*, in the Chat function.

*Members voted Pour.*

3900 **The Bailiff:** Thank you very much, Members of the States. I am satisfied that the shout for Pour was very loud and I did not hear anyone shouting Contre and accordingly I declare Propositions 2, 3 and 4 duly carried.

**Procedural –  
Motion to reconvene States’ Meeting on 3rd June –  
Proposition carried**

3905 **The Bailiff:** The question now, Members of the States, is what would you like to do next? We could start the Energy Policy debate, we could simply close this Meeting by dealing with the Schedule for Future States’ Business, which means that all of the business that has not been completed including the Energy Policy for the next 30 years, the Ecclesiastical Court, Beneficial Ownership, Document Duty, Mesothelioma and the Preferred Debts Law, there will all be deferred to the Meeting commencing on 17th June and will be the first items of business to be taken then,

3910 But there is another possibility, which Deputy McSwiggan has raised, which was going through my mind, which is there any appetite, rather than closing this Meeting and not meeting again until 17th June, to have some overspill days, which would be not next week, but the week after.

3915 As Deputy McSwiggan is inviting me to put such a motion, at least I think she is, because when one looks at Rule 6, from the third day of a Meeting, which is what this is, then the adjournment is to the next scheduled date of a Meeting, but obviously we would have to interpose the Schedule. It then says, 'if, when an adjournment to a subsequent day is announced, a Member proposes a different date or time for that, then in the discretion of ...' me, we can have a brief debate and then adjourn accordingly.

3920 Deputy McSwiggan, it was your idea. It was possibly going to be my idea, but it seemed to come up as your idea. Would you like me to put such a motion, having seen what is going on at the moment, or are you happy that we simply do the Schedule now?

**Deputy McSwiggan:** Please would you put your idea to the States' Members sir?

3925 **The Bailiff:** I did not hear that, I am afraid.

**Deputy McSwiggan:** Sorry, please do put your idea to States' Members, sir.

3930 **The Bailiff:** Members of the States, because these three days were planned a month ago, with a view to dealing with some of the business that was stacked up before the end of the scheduled Meeting Dates in April and May and, truth be told, you have not really done much other than the legislation of that business, I will put to you the possibility of reconvening on Wednesday, 3rd June, with a view to continuing this Meeting at that point. Does anyone wish to speak on such a Proposition?

3935 **Deputy Tooley:** Sir, may I ask a quick question. I am afraid my Chat function has frozen. It is Deputy Tooley.

3940 **Deputy Tooley:** Sir, I simply wanted to ask whether it might still be possible to determine the Schedule for the next States' Meeting before we finish tonight, so that we are able to plan for what will be in debate at the next scheduled Meeting if that makes sense?

3945 **The Bailiff:** I understand that and I know that is what my predecessor did, but I do not think that is consistent with the Rules, I am afraid. Let us just see what happens first and then take stock on that. So I am putting the motion to you, unless there is anyone who wants to debate it, that we adjourn now and have a fourth day, and if necessary subsequent days, to try and conclude the business of this Meeting, recognising that the Meeting on 17th June already has an extra item into it, over and above what will be decided by the Schedule. Those in favour in the Chat function or those against.

3950 **Deputy Merrett:** Can we have a recorded vote please sir?

**Deputy Lester Queripel:** I did ask for a recorded vote, several of us.

3955 **The Bailiff:** Alright, Members of the States, we will have a recorded vote on that motion, then please. So Greffier.

*There was a recorded vote.*

*Carried – Pour 21, Contre 13, Ne vote pas 1, Absent 4*

**POUR**

Deputy Brehaut  
Deputy Tooley  
Deputy Parkinson  
Deputy Lester Queripel  
Deputy Le Clerc  
Deputy Le Pelley  
Deputy Merrett  
Deputy Meerveld  
Deputy Inder  
Deputy Lowe  
Deputy Laurie Queripel  
Deputy Smithies  
Deputy Hansmann Rouxel  
Deputy Paint  
Deputy Dorey  
Deputy McSwiggan  
Deputy Langlois  
Deputy de Sausmarez  
Deputy Roffey  
Deputy Oliver  
Alderney Rep. Snowdon

**CONTRE**

Deputy Ferbrache  
Deputy Tindall  
Deputy Mooney  
Deputy Trott  
Deputy St Pier  
Deputy Stephens  
Deputy Fallaize  
Deputy Graham  
Deputy Green  
Deputy Le Tocq  
Deputy Brouard  
Deputy Soulsby  
Deputy Prow

**NE VOTE PAS**

Deputy de Lisle

**ABSENT**

Deputy Gollop  
Deputy Leadbeater  
Deputy Dudley-Owen  
Alderney Rep. Roberts

**The Bailiff:** Members of the States, I apologise for the time that it has taken to announce this vote. What we managed to forget is that you cannot have a proxy vote on a procedural motion, like this and therefore we have had to discount who purported to vote as the proxy votes and I am going to record Deputy de Lisle's vote as an abstention, because he did start off with 'je ...' before we got no further.

So the voting on the motion to adjourn this Meeting to 3rd June, now, for an extra day or extra days, was there voted Pour 21, Contre 13, four absences and one abstention and therefore I declare the motion carried.

**Procedural –  
Motion to re-order business to deal with  
Schedule for Future States' Business before adjournment –  
Proposition lost**

**The Bailiff:** Now Members of the States, do bear with me please. I know it is getting late, but the impression I got from Deputy Tooley was that she would like to re-order the business so that we deal with the Schedule for Future States' Business this evening before closing today and then we do not have to do it when we resume in early June. Have I got that right, Deputy Tooley?

**Deputy Tooley:** Yes please, sir.

**The Bailiff:** Then, Members of the States, if we can take this in the Chat function, are you happy to re-order the business and not take the Schedule for Future States' Business in two weeks' time but to deal with it this evening? In the Chat function, those in favour; those against?

*Some Members voted Pour, some voted Contre.*

**The Bailiff:** Members of the States, what we have had is about an equal sounding vote to me, Pour and Contre and in those circumstances we will move to a recorded vote, remembering that on this occasion nobody has any proxies, so if the person cannot answer for themselves, we move on. I do ask you to bear with us while we deal with this. Greffier.



*There was a recorded vote.*

*Carried – Pour 17, Contre 19, Ne vote pas 0, Absent 3*

POUR	CONTRE	NE VOTE PAS	ABSENT
Deputy Ferbrache	Deputy Gollop	None	Deputy Leadbeater
Deputy Tindall	Deputy Trott		Deputy de Lisle
Deputy Brehaut	Deputy Merrett		Alderney Rep. Roberts
Deputy Tooley	Deputy St Pier		
Deputy Parkinson	Deputy Meerveld		
Deputy Lester Queripel	Deputy Fallaize		
Deputy Le Clerc	Deputy Laurie		
Deputy Mooney	Queripel		
Deputy Le Pelley	Deputy Smithies		
Deputy Stephens	Deputy Hansmann		
Deputy Inder	Rouxel		
Deputy Lowe	Deputy Graham		
Deputy Paint	Deputy Green		
Deputy Le Tocq	Deputy Dorey		
Deputy McSwiggan	Deputy Brouard		
Deputy de Sausmarez	Deputy Dudley-Owen		
Deputy Roffey	Deputy Langlois		
	Deputy Soulsby		
	Deputy Prow		
	Deputy Oliver		
	Alderney Rep.		
	Snowdon		

3980 **The Bailiff:** Members of the States, on that motion to re-order the business so that we dealt with the Schedule for Future States' Business this evening, before adjourning to a week on Wednesday, there voted Pour 17, Contre 19, three absences and therefore I declare the motion lost.

### **Assembly's thanks to whole community**

3985 **The Bailiff:** Could I just say thank you very much for the three days, Members of the States? I think it is appropriate to use the opportunity of the end of these three days of sitting just to give the Assembly's recognition to all of those who have worked so hard in the last few weeks to keep us all safe and to keep the wheels of Guernsey going, but also to recognise the community spirit that there has been in complying with the measures that have been put in place and so, as I did back in April, and as was done on the last Meeting, and I know we have not quite concluded this Meeting, what I am going to ask you to do is to un-mute your microphones and in the usual way show the Assembly's appreciation for everyone. *(Applause and cheers)*

3990 Thank you all, Members of the States. Have a very enjoyable long weekend and we will now adjourn the Meeting until 9.30 a.m. on Wednesday, 3rd June, and I invite the Greffier to close the Meeting, with the Grace.

*The Assembly adjourned at 7.04 p.m.*