



OFFICIAL REPORT

OF THE

STATES OF DELIBERATION

OF THE

ISLAND OF GUERNSEY

HANSARD

Royal Court House, Guernsey, Wednesday, 27th February 2013

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Present:

Richard J. McMahon, Esq., Deputy Bailiff and Deputy Presiding Officer

Law Officers

Miss M. M. E. Pullum, Q.C. (H.M. Comptroller)

People's Deputies

St. Peter Port South

Deputies P. A. Harwood, J. Kuttelwascher, B. L. Brehaut,
R. Domaille, A. H. Langlois, R. A. Jones

St. Peter Port North

Deputies M. K. Le Clerc, J. A. B. Gollop, P. A. Sherbourne,
R. Conder, M. J. Storey, E. G. Bebb, L. C. Queripel

St. Sampson

Deputies G. A. St Pier, K. A. Stewart, P. L. Gillson,
P. R. Le Pelley, S. J. Ogier

The Vale

Deputies M J Fallaize, D. B. Jones, L. B. Queripel, M. M. Lowe,
A. R. Le Lièvre, A. Spruce, G. M. Collins

The Castel

Deputies D. J. Duquemin, C. J. Green, M. H. Dorey,
B. J. E. Paint, J. P. Le Tocq, S. A. James, M.B.E., A. H. Adam

The West

Deputies R. A. Perrot, A. H. Brouard, A. M. Wilkie,
D. de G. De Lisle, Y. Burford, D. A. Inglis

The South-East

Deputies H. J. R. Soulsby, R. W. Sillars, P. A. Luxon,
M. G. O'Hara, F. W. Quin, M. P. J. Hadley

Representatives of the Island of Alderney

Alderney Representatives L. E. Jean, E. P. Arditti

The Clerk to the States of Deliberation

D. J. Robilliard, Esq. (H.M. Deputy Greffier)

Absent at the Evocation

H.E. Roberts Esq., Q.C. (H.M. Procureur)

Deputy L. S. Trott (*absent de l'Île*)

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*The Assembly adjourned at 12.29 p.m.
and resumed its sitting at 2.30 p.m.*

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The Assembly adjourned at 5.25 p.m.

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States of Deliberation

*The States met at 9.34 a.m. in the presence of
His Excellency Air Marshal Peter Walker, C.B., C.B.E.
Lieutenant-Governor and Commander-in-Chief of the Bailiwick of Guernsey*

[THE DEPUTY BAILIFF *in the Chair*]

PRAYERS

The Deputy Greffier

EVOCATION

CONVOCATION

The Deputy Greffier: To the Members of the States of the Island of Guernsey, I hereby give notice that a meeting of the States of Deliberation will be held at the Royal Court House on Wednesday, 27th February, 2013 at 9.30 a.m. to consider the items contained in Billets d'État III and IV, which have been submitted for debate.

5

The Deputy Bailiff: Thank you. Good morning, everyone.

We will start our business this month with a statement from the Minister of the Home Department, Deputy Le Tocq.

10

Negotiated settlement between Police and AFR Advocates Statement by the Minister for the Home Department

15

Deputy Le Tocq: Thank you, Mr Deputy Bailiff.

The Home Department has become increasingly aware of mounting speculation in relation to the negotiated settlement between the Police and AFR Advocates. The nature of reaching such settlement was based upon the conditions of confidentiality and non-disclosure of any agreed settlement.

20

Importantly, the Department recognises that this was a complex case, involving a number of parties. Consideration and subsequent legal advice as to approach was strongly influenced by the outcomes of a Court of Appeal judgment, reached prior to the conclusion of this matter, and which, crucially, impacted upon how all parties were represented and supported. In this point of fact, all involved in the negotiations were party to a confidentiality agreement, not simply AFR and the Chief Officer of Police. Following the closure of the negotiation process, it has become apparent that AFR Advocates hold no objection to the public disclosure of the settlement, if it assists as a matter of public interest.

25

The Department has not taken lightly the consideration of disclosing matters agreed in the terms of a confidential setting and, therefore, has taken the time to carefully assess the outcome and impact of doing so. The ability to negotiate and reach settlement out of court is an approach used extensively in both the private and public sectors. By its very nature, it seeks to minimise the protracted costs to all parties involved.

30

In reaching any such agreement through this approach, there may be a range of acceptance and

35 compromise by parties involved and detailed in reaching settlement. Disclosure of the agreed sum does not, therefore, reflect the detail and compromise of any such negotiation.

Whilst understanding that, wherever possible in the public sector, transparency and openness is the preferred option, this Department also takes seriously its responsibility that, in representing public interest, it is not always in that interest to disclose matters confidentially agreed. As such, the Department, by a majority, concludes that a decision to disclose the settlement could be 40 impaired, irreversible, and may strongly set precedent for *any* States Department or Public Office working to achieve the best value for money in confidential negotiated settlements. The Home Department further notes that it has every confidence that, although not employed by Guernsey at the time of the incident in question, Patrick Rice entered those negotiations independently, as Chief Officer of Police, in the best interests of Guernsey Police and the public and, crucially, with 45 the minimum possible expenditure of public funds.

The Home Department can provide this Assembly, and islanders of Guernsey, the assurance that a minimal settlement was agreed and, as such, is a sum considered to be substantially lower than if it had been necessary to go through the court process. In approaching this negotiation, it was made within the context and bounds of the States Insurer, resulting in a settlement made well 50 within the limits of acceptability and, as previously stated, supported by the Department as being the minimum which could be expected in these circumstances. As such, the Chief Officer of Police has been commended for his efforts in acting in the best interests of the public.

The Home Department concurs with the views of the Policy Council which, in June 2012, discussed the States of Guernsey's Information Strategy, with particular reference to further 55 increasing transparency and openness. It was agreed that an Access to States Information Strategy would be brought before the States, built on Belinda Crowe's Report on Access to Information, and that this Report should set out the principles for greater openness and transparency across the States. The Policy Council agreed core principles as a basis for the proposed States Report, including a culture of openness, a presumption of disclosure, proactive publication – that is, the 60 push, rather than the pull, of information – and that record management will be vital in delivering this, and the need for a States-wide Code of Practice.

We understand that the Policy Council will review a draft States Report and Code of Practice in March 2013, which will then go forward to the States. It is envisaged that such a Code of Practice will provide greater clarity and expectation on where disclosure can be expected but, 65 equally, where not.

Thank you, sir.

The Deputy Bailiff: Thank you, Minister.

70 Members of the States, Rule 8(b) permits a period not exceeding fifteen minutes for questions to be asked within the context of the Statement, so does anyone have any questions?

Deputy St Pier.

Deputy St Pier: Sir, I think, as the Minister is aware, the Treasury and Resources Board were not, of course, involved in this issue or, indeed, in the settlement, but is the Minister able to advise 75 – I think he did refer to the States Insurer – but is he able to advise whether or not the settlement was managed within the States insurance arrangements, sir?

Deputy Le Tocq: Yes, indeed, sir. I am able to confirm that is the case and settlements such as this, and matters which involve risk, involving States employees and public officers, and 80 exceptional circumstances – which this was definitely one – are covered under the arrangements with the States insurance.

The Deputy Bailiff: Deputy Fallaize.

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

In the course of settling this case, we know that Guernsey Police obtained legal advice which was independent of St. James' Chambers. Is the Minister able to advise the States whether that, too, is subject to confidentiality? If not, is he able to advise the States of the cost of that advice 90 and, if it is subject to confidentiality, why?

The Deputy Bailiff: Minister, are you able to answer that question?

Deputy Le Tocq: I am able to answer part of that question.

95 First of all, and in reference to the insurance aspects of this, such legal costs, it is my
understanding, would have been covered by the insurance that the States undertakes, which is why
the States insurer was involved as an adviser in such negotiations. So legal costs that occurred
outside of the normal procedure – in this instance, the normal procedures would have been
represented by St. James' Chambers – were not able to be followed: those would have been
100 covered by the insurance arrangements.

Deputy Fallaize: Sir, is the Minister able to advise the States which party instigated the
insertion of a confidentiality clause into the agreement which the Minister has referred to?

105 **The Deputy Bailiff:** The Minister can speak on behalf of the Home Department.

If the Home Department know that, then he can answer that question. If you do not know the
answer and you are concerned that it might be inaccurate or misleading, you can decline to answer
it, Minister.

110 **Deputy Le Tocq:** I will not answer it directly, I am afraid, for the reasons that you have given,
sir, but what I will say is that when we, as the States, mandate an official or employee to go into
such negotiated situations, whatever they might be, it is my belief that, at some point, in his box of
tools confidentiality needs to be there. When you are in the middle of such negotiations – and I
have certainly been involved in negotiations in a past life with PSRC – you have to make decisions
on the spot. So, in this instance, I cannot speak particularly because, as I said, there were other
115 parties involved, but certainly I believe confidentiality should be one of the tools available in order
to get the best public deal for public funds.

I cannot say much more, sir.

120 **The Deputy Bailiff:** I was going to call Deputy Brehaut, Deputy Fallaize, because he did rise
earlier. If there is time, then I will come back to you.

Deputy Brehaut: Thank you, Mr Deputy Bailiff.

125 I think the Minister said that AFR were not opposed to the sum being known. The political
Board have taken the decision not to disclose that sum: is it the unanimous decision of the Home
Department Board?

Thank you.

The Deputy Bailiff: Minister, can you answer Deputy Brehaut?

130 **Deputy Le Tocq:** I made that clear, actually, in my Statement that it was a majority decision. I
think the Board, as a whole, unanimously support the *action* that was taken, in terms of breaking
that disclosure. It was a majority decision *not* to do so.

135 **The Deputy Bailiff:** Deputy Gollop.

Deputy Gollop: My question would be that, as a supplementary almost to one of Deputy
Fallaize's, do you consider that the possible legal costs of the law firm, AFR, experienced are also
subject to confidentiality?

140 **Deputy Le Tocq:** I cannot answer that question, sir.

The Deputy Bailiff: I will take Deputy Storey but I have noticed that you would like to ask a
question as well, Deputy Laurie Queripel.

145 **Deputy Storey:** Thank you, sir.

The one thing in the Minister's statement which concerned me was the fact that he felt the
reason for withholding the details of the settlement was that it might create a precedent for the
future. That is the bit that concerns me because, in this instance, the settlement was necessary
because there was an illegal act of entering the offices, the premises, of the advocates concerned.

150 What concerns me is that the Minister is thinking in terms of there possibly being *further*
illegal acts and I would like his assurance that is not the reason why he feels that announcing the
settlement publicly might create a precedent.

155 **Deputy Le Tocq:** I am going to ask the Comptroller to make a comment in a moment but the Deputy is jumping to conclusions, sir, in that he has stated something that is only a perception. It is far more complex than that and the reasons that the negotiated settlement was, indeed, such a minimal amount was *because* it was more complicated than that. No-one was accusing the officers concerned of acting except in good faith. The problems with the procedure concerned have been dealt with, and acted upon, swiftly, so I would ask that we do not get into dealing with the case itself because that is highly complex and I do not believe this is the right environment to do so.

The Deputy Bailiff: Deputy Laurie Queripel.

165 **Deputy Laurie Queripel:** Sir, does the Minister genuinely believe that it is in the public interest to keep such settlements confidential, bearing in mind that it is the public purse that bears the brunt? Why would setting a precedent, in regard to actually demonstrating transparency and openness by releasing the settlement figure, be such a problem?

Thank you, sir.

170 **The Deputy Bailiff:** Minister can you answer the question?

175 **Deputy Le Tocq:** I share the frustration of many, perhaps, in this Assembly and outside because, underneath all of this, there is a good news story. However, there are times when things are so complex and involve other parties that it would be imprudent for us, the Board believes, by a majority, to go and break that for the sake of transparency. That would, in the end, actually make matters potentially worse and cost the States, potentially, a lot more – the public purse a lot more.

180 The reason we are elected, sir, I believe, as representatives is in order to win the trust of people. It is very difficult to do so when placed in positions such as this, but we have to do so. I have done my utmost to be as transparent in this Assembly as possible under our current system and I ask for the trust of the Assembly in that.

The Deputy Bailiff: Deputy Le Clerc.

185 **Deputy Le Clerc:** Could the Minister advise as to whether the States Members will be given the opportunity to be briefed in greater detail on the complexities of the issues, at an appropriate time and place, in a similar manner to the briefing that the Home Department have received?

190 **Deputy Le Tocq:** I thank the Deputy for that question and I can confirm that is the intention. It is my intention, certainly, and the intention of the Department and we are currently seeking an appropriate time and place in order for that briefing and the opportunity for, perhaps, some of the questions that could have been asked today to be asked in that appropriate setting.

The Deputy Bailiff: Deputy Perrot, are you seeking to ask a question?

195 **Deputy Perrot:** Thank you.

I recognise that the Minister cannot speak for other Departments but, at the inception of these negotiations, did the Home Department, or somebody to whom the Home Department delegated authority, insist upon a confidentiality agreement?

200 **Deputy Le Tocq:** To my knowledge, it was not insisted upon but it was one of the tools in the box, as I mentioned before, as an opportunity to come to an agreement that would be in the public interest and the interest of all parties concerned. That is my understanding.

205 **The Deputy Bailiff:** Do you wish to ask a further question, Deputy Perrot?

Deputy Perrot: But was that tool in the box used?

Deputy Le Tocq: Yes, it was sir.

210 **The Deputy Bailiff:** If we are going to repeat questioning, then I am going to go back to Deputy Fallaize first.

Is there anyone who has not posed a question who wishes to pose a question to Deputy Le Tocq?

215 Right. We will go back to Deputy Fallaize, then, first and I will come to you afterwards, Deputy Gollop.

Deputy Fallaize: Thank you, sir.

220 This is a two-part question, really. Would the Minister agree with me that, under our arrangements, all Members of the States are Members of Government?

Deputy Le Tocq: Yes, sir, and that is why the Department and myself are keen to provide Members of this Assembly with the opportunity for the sort of briefing that we have received.

225 **Deputy Fallaize:** In which case, is the Minister able to confirm that there are no grounds not to disclose to Members of this Government all of the costs which have been borne by the States, in respect of the legal advice obtained by the Police *and* any settlement with AFR?

230 **Deputy Le Tocq:** All I can confirm is that the Members of this Assembly will be given the same opportunity as the Home Department Members to have all the facts laid in front of them.

The Deputy Bailiff: Deputy Gollop.

235 **Deputy Gollop:** The Minister has now answered twice that the tool in the tool box – one of the tools – is a confidentiality agreement. Will the Minister be considering, with other Members of the Policy Council, a policy guideline as to where that tool of confidentiality is appropriate to be used and where it is not in the public interest?

240 **Deputy Le Tocq:** Sir, I refer again to my Statement and the latter paragraph, which actually stated that.

245 That was our intention. I cannot speak on behalf of the Policy Council, as such, but the Home Department certainly concur with the intention of the Policy Council that was explicit back in June last year that such sorts of protocols should be put in place. This is a case in point, where the States have operated with that tool in the box, but there has not been an explicit protocol States-wide. It is certainly my firm belief, and I understand the belief of the Policy Council, that we should have that sort of Code of Practice.

The Deputy Bailiff: Are there any further questions within the context of this Statement, or shall we move on?

250 **Deputy Fallaize:** If no-one else has any, sir, I have one further one.

The Deputy Bailiff: You do not have to use all the time that is available, Deputy Fallaize. *(Laughter)*

255 **Deputy Fallaize:** But it is worth it, sir! *(Laughter)*

Is the Minister able to advise Members whether the Home Department recently has approached all of the parties upon whom the agreement was binding, to seek their permission for the information to be made available publicly, or has the Home Department not taken that step?

260 **The Deputy Bailiff:** Are you able to answer that question?

265 **Deputy Le Tocq:** I think, because of the nature of the agreement made and legal technicalities involved in that agreement, I am not in a position here to answer that but I believe that is the sort of question that could be taken further at the briefing because of the legal complexities of this case, sir.

The Deputy Bailiff: Madam Comptroller, might it assist Members of the States to hear from you in the context of Deputy Fallaize's question?

270 **The Comptroller:** Sir, thank you. I think, to reiterate what the Minister of the Home Department has said, it just might help to clarify.

There has been a lot of media hype about this case. Members will well understand that the facts that are reported in the media do not always reflect the position both in law and in fact, of the

275 parties involved (*Laughter*). The reason for making that statement clear is simply because it must
be appreciated, in a settlement negotiation which is confidential – this is not an unusual situation,
settlement negotiations are quite common by their very nature – that will mean that *both* parties
agree for settlement. The issue of liability is not always the overriding factor: it may be a factor for
a settlement, but there will be a number of other issues for which a settlement might be wished to
280 keep confidential. That goes back very much to the context of the Statement which the Minister
for the Home Department has made. It is not an attempt to keep things mysterious simply for the
sake of keeping them mysterious but there may well be other complex factors and legal issues at
stake.

In relation to the precedent question, I think that goes wider. It is not so much Deputy Storey's
question about precedent, it is very much a case that this is a public purse. It has been well
285 recognised, there are a number of potential litigants for various reasons that do try to make cases
against the States and the States, for very robust reasons, need to be careful about making the
amounts of settlements openly known to those potential litigants.

Thank you, sir.

290 **The Deputy Bailiff:** Thank you.

Deputy Lowe: Sir, just following what H M Comptroller has just said – and I appreciate about
the confidentiality and sometimes what is reported in the media – if what is reported in the media
is accurate, the current situation with AFR and Home Department is slightly different, inasmuch as
295 AFR are prepared for it to be disclosed. I would like it if it was a confidentiality clause by both
parties.

The Deputy Bailiff: Deputy Lowe, can I point out Deputy Lowe that was not a question and
300 this is an opportunity to pose questions *only* at this stage, but you have used up the –

Deputy Lowe: Well would the Minister confirm that is –

The Deputy Bailiff: You have used up the remainder of the fifteen minutes, anyway.

305

Review of States' financial controls relating to fraud
Statement by the Chairman of the Public Accounts Committee

310 **The Deputy Bailiff:** We now move on to a second Statement, this time from the Chairman of
the Public Accounts Committee, Deputy Soulsby.

Deputy Soulsby: Sir, I am making this statement to update Members about the progress of the
315 Public Accounts Committee's review of the States of Guernsey's financial controls relating to
fraud.

In my last statement, I notified this Assembly that external reviewers had been appointed to
produce a report for the first stage of the Public Accounts Committee's review. Ernst & Young
have carried out a review looking at the appropriateness of the States of Guernsey's anti-fraud
governance framework before and after the specific incident of fraud committed against the States
320 in mid-2012. I am happy to report that Ernst & Young completed their review on schedule.

The Committee is currently in the process of considering the findings of the Ernst & Young
report and, on completion of this process, will produce a preliminary Report to accompany that of
Ernst & Young's. It is the intention of the Committee that both documents will be published in
April 2013. It is also the intention of the Committee to organise briefing sessions for Members of
325 the Assembly in advance of the publication of the document.

Further to publication of the reports, the Committee intends to conduct public hearings and
then publish a final Report. In relation to the review of the specific incident of fraud, as I have
stated previously this will not be able to start until we are advised that it will not prejudice the on-
going criminal investigation. There has been no change from the update provided by the Home
330 Department Minister at the January meeting. The criminal investigation is ongoing and there is no
further information to report at this time.

The Deputy Bailiff: Thank you, Deputy Soulsby.

335 Are there any questions arising in the context of that statement?
Deputy De Lisle.

Deputy De Lisle: Thank you, sir.
I wanted to know, do we have knowledge of any further recovery of monies with respect to this
340 particular case.

The Deputy Bailiff: Deputy Soulsby, are you able to answer that question?

Deputy Soulsby: I am not able to say that, no.

345 **The Deputy Bailiff:** Deputy Gollop was rising.

Deputy Gollop: At what point will the Public Accounts Committee have to make a decision as
to whether to go forward with the public hearings if, for whatever reason, the criminal
350 investigation is delayed beyond a reasonable time, or will a lengthy criminal investigation process,
diligently done, inevitably lead to the delay or even cancellation of these public hearings?

Deputy Soulsby: We are not envisaging a delay in public hearings in relation to this Report.
This Report is looking at the general anti-fraud governance framework within the States of
355 Guernsey. It is not looking at the specific incident of fraud.

The Deputy Bailiff: I do not see anyone else rising at this stage.

360 **Questions for Oral Answer**

PUBLIC SERVICES DEPARTMENT

365 **Airport development contract with Lagan Construction
Guarantee and retention**

The Deputy Bailiff: In that case, we will move on to Question Time and Deputy Lester
Queripel has questions to the Minister of the Public Services Department.

370 Deputy Queripel, can I suggest that you pose both questions at the same time as there is a
composite answer.

Deputy Lester Queripel: Yes, sir.
375 Upon completion of the current airport development, will the States of Guernsey be given a
guarantee from Lagan Construction for the work undertaken? Also, is there a provision in the
contract that permits the States of Guernsey to withhold a percentage of the final payment to
Lagan in case there are any future problems proven to be the result of shoddy workmanship?

380 **The Deputy Bailiff:** Deputy Luxon, the Minister, to reply.

Deputy Luxon: Thank you, Mr Deputy Bailiff.
There is a retention of 5% of the contract sum, half of which is released when all the work is
385 completed to our satisfaction and the remainder held for a further twelve months until expiry of
the defects liability period.

In addition, the contractor has given warranties and collateral warranties have also been taken
from sub-contractors with design responsibility over the quality of the workmanship in the event
of any problems arising within six years from the completion of the works. A formal guarantee is
neither usual nor expected in civil engineering works, as opposed to the case where what is being
390 supplied is a specific item of plant.

The Deputy Bailiff: Thank you, Minister.
Do you have a supplementary question, Deputy Queripel.

395 **Deputy Lester Queripel:** Yes, please, sir.

I need to be absolutely clear on this. Is the Minister saying that if the runway starts to break down after six years, the Guernsey taxpayer will then be expected to pay for the repairs? Also, are the six year warranties in writing?

400 **Deputy Luxon:** Yes, the warranties are in writing and form part of the contract and for the sub-contractors those warranties are contained in relationship to the contractor relationship. In terms of the timeframe, a six year period is the warranty period so any defect that arises during that period clearly would then be remedied by the main contractor. If something happened after six years then no, the warranties do not cover that: the warranties are for a six year period.

405 **The Deputy Bailiff:** You have a further supplementary, Deputy Queripel?

Deputy Lester Queripel: Please, sir.

410 I am shocked and absolutely appalled to hear that we only have a six year warranty on an £80 million contract. It is obviously too late to do anything about that now but I would like to ask the Minister: is the project currently on budget and on schedule?

The Deputy Bailiff: Deputy, it does not arise out of the Questions that were originally posed but can you answer that.

415 **Deputy Luxon:** Mr Deputy Bailiff, I am disappointed that Deputy Queripel is appalled and disappointed (*Laughter*) and I regret that very much but the reality is, this is the biggest single figure contract the States has undertaken and all I can do is remind of the statement that I made at the last States sitting which covered all of these matters in great detail.

420 I am very happy to invite Deputy Queripel to come in and talk to the project team but we are confident that the works are on budget and are to time in spite of the atrocious wet weather that we have experienced over the last year. We still intend to have the project finished by the original schedules.

425 **Deputy David Jones:** Would the Minister agree with me that, of the £80 million contract, the runway is only a very small part and the integrity of that runway is only a very small part of that £80 million contract?

Deputy Luxon: Thank you for Deputy Jones' question.

430 It is a complex project: it is not just about the runway. Islanders will notice that there has been massive work to realign the contour of the runway area and the surrounding pavements. It is a very complex contract, as I said, but the workmanship that we have seen to date by Lagan gives us great confidence that the works are being undertaken professionally and well and, as I said, within a very, very tight contract.

435 **The Deputy Bailiff:** Deputy Kuttelwascher.

Deputy Kuttelwascher: Could the Minister confirm that the actual contract sum for the works being carried out by Lagan is in the order of £56 million and not £80 million?

440 **Deputy Luxon:** I think it is £55.6 million. I think I did mention it in my last report but, yes, it is only a part of the £80.4 million total.

445 **The Deputy Bailiff:** Are there any further supplementary questions arising out of the answer that the Minister gave? No? In that case, we will move away from Question Time and move to the business in the Billets.

Billet d'État IV

ENVIRONMENT DEPARTMENT

**The Land Planning and Development (Local Planning Briefs) (Guernsey) Law, 2013
Reinstatement of Outline Planning Briefs for Le Bouet and Gategny MURAs, approved**

Article I:

The States are asked to decide –

Whether, after consideration of the Report dated 29th January, 2013, of the Environment Department, they are of the opinion:-

1. To agree to reinstate Le Bouet and Gategny Esplanade Outline Planning Briefs/deemed Local Planning Briefs for 3 years, with effect from the coming into force date of the proposed projet reinstating the OPBs, subject to the States being able to further extend them by further resolution within this period and the expiry of the Outline Planning Briefs expiring as a result of the current Urban Area Plan review.

2. To agree to clarify that if a Development Plan is revised or amended to remove all references in plan policies to an Outline Planning Brief, which is a deemed Local Planning Brief, that the Brief in question shall expire on the adoption of the revised or amended Development Plan.

3. To approve the Projet de Loi entitled ‘The Land Planning and Development (Local Planning Briefs) (Guernsey) Law, 2013’ and to authorise The Deputy Bailiff to present a most humble petition to Her Majesty in Council praying for Her Royal Sanction thereto.

The Deputy Greffier: Billet d’État IV, Article I, Environment Department, The Land Planning Development (Local Planning Briefs) (Guernsey) Law 2013 – Reinstatement of Outline Planning Briefs for the Le Bouet and Gategny MURAs and the Projet de Loi entitled The Land Planning and Development (Local Planning Briefs) (Guernsey) Law 2013.

The Deputy Bailiff: Thank you.

I invite the Minister for the Environment Department, Deputy Domaille, to open the debate on this Report, which will include a debate on the draft Projet also found in the Billet.

Deputy Domaille: Thank you, sir.

The Environment Department is respectfully recommending the States to revive, for a period of three years, the Outline Planning Briefs for the Bouet and Gategny Esplanade – sorry Gategny Esplanade Mixed Use Re-development – areas. These could be extended by a further resolution of the States.

Sir, in 1935 cane toads were introduced into Australia and South America. They were originally to control cane beetles. Unfortunately, this failed but, worse than that, having no natural enemies, the cane toad population exploded and they are now a major threat to native animals. They are a major pest. This was an unintended consequence of good intentions.

Sir, Members will be asking what is the relevance of cane toads? *(Interjections and laughter)*

Deputy Stewart: Yes, what is the relevance, Roger? What has that got to do with the price of anything?

Deputy Domaille: The answer is, in essence, this Report seeks to rectify an unintended consequence of perfectly rational actions.

It is clear to the Department, as a result of legal advice received from the Law Officer’s Chambers, that the Outline Planning Briefs, which were originally introduced in 1998 and 1999, respectively, have expired. This is an unintended consequence of the delayed implementation of the current planning legislation. That said, the situation needs further explanation.

Firstly, I will explain the problem. Although the Urban Area Plan envisages the Outline Planning Briefs remaining in force for the duration of the Plan, the interplay of provisions contained within the 2005 Land Planning and Development Law and the 2007 Land Planning and Development Plans Ordinance meant that, by the time the 2005 Law came into force in 2009, the Outline Planning Briefs had become Local Planning Briefs under the then new legislation and were, hence, valid for only ten years from their original – that is, *original* – date of approval unless formally extended by the States. Hence, when the new Law came into force in April 2009 these

485 Outline Planning Briefs were already more than ten years old and are, therefore, already expiring. Although they were still in force in 2005 and 2007 when the 2005 Law and 2007 Ordinance were agreed, in fact they have recently expired before there has been any opportunity for the Department to extend them because, at the time they expired, the new legislation was not yet in force. This is what I meant by ‘an unintended consequence’. Some would say oversight: I would say hindsight is always easy.

490 Due to the expiry of these Outline Planning Briefs there is a resulting planning policy vacuum because the Urban Area Plan, which expected the Brief to remain in force, cross refers to detailed policies within the Briefs in relation to development proposals within the Mixed Use Redevelopment Areas and this makes it difficult to apply an Urban Plan in such situations without reference to the policies in the Outline Planning Briefs. This problem is delaying the determination of a current major planning application relating to part of the Bouet Mixed Use Redevelopment Area. This was never the intention of the original approved Outline Planning Briefs or the 2009 Law.

500 So what is the solution? Although the Department initially hoped to be able to deal with the application by referring to the policies and intentions of the Urban Area Plan without reference to the Outline Planning Brief, it became apparent that this would create significant difficulties and, in order to reach the most legally robust decision possible in the quickest possible time, the best way forward would be to seek reinstatement of the Outline Planning Brief. On a personal note, I was surprised that we could achieve such a quick remedy. However, the Department is indebted to the Law Officers’ Chambers for their assistance, both through the provision of their excellent advice and the extremely rapid legal drafting which has enabled this States Report and the attached Projet to be placed before you today.

505 Although I cannot mention specific names – so cannot mention Helen Shorey – I would like to express my very sincere thanks to the Law Officers and their staff. I would also like to particularly thank the Policy Council, the Legislation Select Committee and the UK Ministry of Justice, who have all helped us bring this draft legislation forward for your consideration extremely quickly.

510 For completeness, I now refer to some other matters. I mentioned the Glategny Esplanade Mixed Use Redevelopment Area as well as that of the Bouet. In the case of the Glategny, there is no current planning application pending but it is possible that a similar issue could arise so, for completeness, we have recommended reinstatement of the Glategny Outline Planning Brief as well.

515 The intention behind the 3-year period of validity of the reinstated Briefs is that they will be reviewed and potentially superseded by the new Development Plan, which will replace the current Urban Area Plan. The planned Review is currently in progress and it is intended that the new Plan will be brought forward for States approval well within that time. It is also proposed to take the opportunity to make clear in the Projet that Outline Planning Briefs, or Local Planning Briefs as they are now known, will cease to have effect when the Development Plan is amended or replaced to remove reference to that briefing. This will avoid a future situation arising where, legally, a Brief might be considered to remain in force despite no longer being referred to in the relevant Development Plan.

525 In conclusion, the Department’s intention is, basically, to correct an unintended consequence of the operation of the planning legislation and to put things back as they should have been, indeed as the Urban Area Plan expects them to be. This is primarily in response to the situation which has arisen in relation to the determination of a current major planning application to the Bouet Mixed Use Redevelopment Area. However, the opportunity is being taken to do the same with the Glategny Esplanade Mixed Use Redevelopment Area in case a similar circumstance should arise there and also to clarify, for the avoidance of doubt, that Local Planning Briefs expire when no longer referred to in the Development Plan.

530 I would, therefore, respectfully request the States to approve the three recommendations, as set out in the Department’s States Report, these being, respectively, to agree the proposals to reinstate the Bouet and Glategny Esplanade Outline Planning Briefs for three years, subject to further extension by further resolution of the States; to agree the proposals to clarify that if the Development Plan is revised or amended to remove the reference to an Outline Brief then that Brief shall expire; and, last, but certainly not least, to approve the Projet de Loi entitled the Land Planning and Development (Local Planning Briefs) (Guernsey) Law 2013, which will bring this into effect.

540 Finally, sir, I am pleased to inform Members that the Department has no intention of bringing forward measures for the control of cane toads!

Thank you, sir.

545 **The Deputy Bailiff:** Thank you, Minister.
Who wishes to speak in the debate on this Report?
Deputy Lester Queripel, followed by Deputy Gollop.

Deputy Lester Queripel: Thank you, sir.
550 I would like to spend a moment setting the record straight on this issue, if I may. I have a press cutting dated 22nd December 2012. The heading states:

‘Deputy accuses Environment of moving the goal posts in relation to the Admiral Park development’

555 – and that statement is attributed to me! I did not actually say that, sir (*Laughter*). You cannot believe everything you read in the *Guernsey Press*. What I actually said was – and I have already explained this to the Environment Minister to clear up any misunderstanding – that ‘I was very disappointed Environment had made a mistake because we, as politicians, trust that Departments are aware of rules and regulations and, when mistakes like this are made, it does raise concerns about efficiency within Departments.’

560 I did emphasize, in the article, that I had, and still have, serious concerns about the sheer volume of traffic that *any* development there will generate. There does not seem to have been any real focus on the amount of traffic that will enter and exit what will undoubtedly become the most congested and potentially problematic 330 metre stretch of road in the whole of the Island, with thousands of cars converging on the area every day.

565 I may live to regret saying this, sir, (*Laughter*) but I do not see any problem at all with the Environment Department’s proposals. I say that, on the basis that if Members refer to the second sentence of paragraph 3.6 on page 299, they will see that it reads:

‘...this route has the benefit of legal certainty and, as a result, a lower risk of litigation...’

570

Also, as far as I am aware, no one has *really* come up with the solution to the traffic problem so I guess it is a pretty futile exercise for me to even express my concerns about future traffic problems in the area, regardless of what type of development is built there. I would like to say, sir, I am not against the development *per se* but I do empathise and sincerely sympathise with my fellow parishioners who live in the area because they will be subject to horrendous traffic pollution sixteen hours a day for six days a week. Plus I also sympathise and empathise with motorists who will be caught up in endless traffic jams in the future.

575

On a personal note, I will simply avoid the area or use my pushbike and, to conclude, sir, the Minister spoke of ‘unintended consequences’. Well, maybe the unintended consequence of developing Admiral Park will be that more of us leave our cars at home and use our pushbikes or the bus and that, in itself, will only be a good thing.

580

Thank you, sir.

585 **The Deputy Bailiff:** Deputy Gollop.

Deputy Gollop: Yes, sir. I very much support the Policy Letter and we – Deputy Robert Jones and the Committee at Legislation – reviewed this and have praise for the lawyer who rectified it.

On the traffic issue, I know it goes really to a separate area of Deputy Domaille’s responsibility but I think that there is, perhaps, a problem with the traffic lights and the timing that needs to be re-evaluated by some consultants, preferably on-Island, to have another look at that.

590

I would comment, though, his example about the toads: I have often thought, in the past, anyway, that politicians were more like lemmings than toads (*Laughter*) but, on this particular issue, the *Press* and the media gave coverage to it which, as Deputy Lester Queripel has pointed out, may not be fully accurate to what we are talking about today. But an issue that did emerge when this story broke towards the end of last year was that there was one leading entrepreneur or developer on the Island who said that he hoped this would bring an opportunity for a re-evaluation of the planning context, which might include a cinema or leisure facility which was, one understood, initially promised as part of the component.

595

For my part, I would like to see that and additional housing in the area rather than, perhaps, additional retail capacity. But I will leave it at that.

600

The Deputy Bailiff: Deputy De Lisle.

Deputy De Lisle: Thank you, sir.

605 It seems to me that Members need clarity on what effect reinstating the old OPB will have on resolving some of the planning issues that the public have brought up in order to ensure that this last part of the Area Plan has a strong community element to it.

610 The Plans, if approved, would bring in substantial office space but much office space is becoming vacant in St. Peter Port with the retrenchment of the banking industry. Concerns have been expressed also over the lack of parking and access to the site and the limited scale of the cinema for St. Peter Port. What discussions were had, if I can ask the Minister, with both local residents and the company seeking development, following the withdrawal of the planning application?

615 The Policy Letter, in reality, is somewhat silent in the Billet on the ramifications of bringing back the OPB, an old Planning Brief now. Time has moved on within the UAP on the application for development permission. Can the Minister shed light on this when he sums up, sir?

Thank you.

The Deputy Bailiff: Does anyone else wish to speak in this debate?

620 No? The Minister to reply, then.

Deputy Domaille.

Deputy Domaille: Thank you, sir.

625 I will take Deputy De Lisle's points first. I did not quite understand... I am sorry, that very last question you asked... Could you just repeat it for me please?

The Deputy Bailiff: Was that Deputy De Lisle?

Deputy Domaille: Yes.

630

Deputy De Lisle: Sir, the essential question is with regard to the fact that the Area Plan needs to accommodate a strong community element and my concern was to shed some light on bringing in the OPB, which is now several years old, rather than perhaps looking at the current situation in terms of the economy and what might be more appropriate in terms of development of that area by bringing in some new regulations and a new OPB.

635

The Deputy Bailiff: Deputy Domaille.

Deputy Domaille: Yes, thank you, sir –

640

The Deputy Bailiff: You realise it is the difference between whether the OPB is resurrected or not.

Deputy Domaille: Thank you, sir, and thank you, Deputy De Lisle.

645

I think the point here, if I can just emphasise this very strongly, is that in reinstating the original Outline Planning Brief that does not mean that it is a done deal. What has to happen will happen and whatever application is forthcoming on either area it will go through the proper planning process. It will be evaluated in accordance with the Outline Planning Brief and planning law and it will be subject to an open planning meeting which will give every member of the population of Guernsey the opportunity to make their views known.

650

In terms of the second part of your question, Deputy De Lisle, is it right to put back in place the Outline Planning Brief that was originally agreed in 1998/99 and perhaps we should go back to the drawing board and start again. I have to say that, in the view of the Environment Department, that would not be the best way forward. It would involve a lot of cost, a lot of delay and actually we do not see too much benefit in doing that.

655

Deputy Gollop, thank you for your support. You mention the traffic issues, as did Deputy Queripel. You mention traffic lights and I think the timing: that is a separate issue but I will give an undertaking to raise that with my staff. I think I have dealt with your points there.

660

Deputy Queripel: first of all, I would like to thank him for ringing me. When the article appeared in the *Press* he did ring me and explain exactly what he had said and I am truly grateful. I recognise the points he has raised in regard to the traffic and I can only say that, again, it will be subject to a full and proper evaluation by our planning team and at an open planning meeting. I am

sure Deputy Queripel will make a representation and I encourage other members of the public to do so.

665 I believe I have answered all the questions, sir.

The Deputy Bailiff: Thank you, Minister.

Members of the States, there are three propositions. You will find them on an unnumbered page but we will call it page 306 because it comes between 305 and 307! *(Laughter)*

670 What I propose to do is take the first two propositions together and *au voix*.

So all those in favour; all those against.

Members voted Pour

675 **The Deputy Bailiff:** I declare Propositions 1 and 2 carried.

Proposition 3 asks you to approve the Projet de Loi which is printed at pages 302 – 305 in the Billet itself.

All those in favour; all those against.

680 *Members voted Pour*

The Deputy Bailiff: Once again, I declare that carried unanimously.

685

Billet d'État III

690 **The Smoking (Prohibition in Public Places and Workplaces)
(Exemptions and Notices) (Amendment) (Guernsey) Ordinance, 2013, approved**

Article I:

The States are asked to decide –

695 *Whether they are of the opinion to approve the draft Ordinance entitled 'The Smoking (Prohibition in Public Places and Workplaces) (Exemptions and Notices) (Amendment) (Guernsey) Ordinance, 2013', and to direct that the same shall have effect as an Ordinance of the States.*

700 **The Deputy Greffier:** Billet État III, Article I, The Smoking (Prohibition in Public Places and Workplaces) (Exemptions and Notices) (Amendment) (Guernsey) Ordinance 2013.

The Deputy Bailiff: Members of the States, you will find this short Ordinance on page 1 of the Brochure.

705 Is there any debate or comment on the draft Ordinance? I do not see anyone rising so we will move to the vote.

All those in favour; all those against.

Members voted Pour

710 **The Deputy Bailiff:** I declare the Ordinance duly made.

715 **The Income Tax (Guernsey)
(Approval of Agreement with Chile) Ordinance, 2013, approved**

Article II:

The States are asked to decide –

720 *Whether they are of the opinion to approve the draft Ordinance entitled 'The Income Tax*

(Guernsey) (Approval of Agreement with Chile) Ordinance, 2013', and to direct that the same shall have effect as an Ordinance of the States.

725 **The Deputy Greffier:** Billet d'État III, Article II, The Income Tax (Guernsey) (Approval of Agreements with Chile) Ordinance, 2013.

The Deputy Bailiff: Members of the States, again a short Ordinance of a single page, page 2 in the Brochure.

730 Is there any debate or comment on this draft Ordinance?

No? Well, once again, we will move to the vote.

All those in favour; all those against.

Members voted Pour

735 **The Deputy Bailiff:** Once again, I declare that carried and duly made.

740 **The Control of Borrowing (Repeal)
(Bailiwick of Guernsey) Ordinance, 2013, approved**

Article III:

The States are asked to decide –

745 *Whether they are of the opinion to approve the draft Ordinance entitled 'The Control of Borrowing (Repeal) (Bailiwick of Guernsey) Ordinance, 2013', and to direct that the same shall have effect as an Ordinance of the States.*

750 **The Deputy Greffier:** Billet d'État III, Article III, The Control of Borrowing (Repeal) (Bailiwick of Guernsey) Ordinance 2013.

The Deputy Bailiff: This Ordinance appears at pages 3 to 5, inclusive, in the Brochure.

Members of the States, is there any debate or comment on the draft Ordinance?

No? Then, once again, we will move to the vote.

755 All those in favour; and all those against.

Members voted Pour

The Deputy Bailiff: I declare that Ordinance duly made and the Proposition carried.

760

Ordinance and Statutory Instruments laid before the States

765 **The Deputy Greffier:** The Ordinance entitled The Income Tax (Zero 10) (Company Intermediate Rate) (Amendment) (Guernsey) Ordinance, 2012, is laid before the States.

The Deputy Bailiff: Thank you, Greffier.

We note that is duly laid at this meeting and can we mention the Statutory Instruments being laid as well.

770

775 **The Deputy Greffier:** The Guernsey Finance (LBG) (Levy) (Guernsey) (Amendment) Regulations, 2012; The Income Tax (Deemed Distributions) (Exemptions) (Amendment) Regulations, 2012; The Criminal Justice (Proceeds of Crime) (Legal Professionals, Accountants and Estate Agents) (Bailiwick of Guernsey) (Amendment) Regulations, 2012; The Financial Services Commission (Fees) Regulations, 2012; The Protected Cell Companies and Incorporated Cell Companies (Fees for Insurers) Regulations, 2012; The Registration of Non-Regulated Financial Services Businesses (Bailiwick of Guernsey) (Fees) Regulations, 2012; The Amalgamation and Migration of Companies (Fees payable to the Guernsey Financial Services Commission) Regulations, 2012; The Boarding Permits Fees Order, 2012; The Weights and

780 Measures (Fees) Regulations, 2012; The Waste Disposal Charges Regulations, 2012 – are laid
before the States.

The Deputy Bailiff: Thank you very much.
We note that all of those are duly laid at this meeting.

785

POLICY COUNCIL

790

Planning Panel Mrs S A Evans and Miss J A White re-elected

Article IV:

The States are asked to decide –

795 *Whether, after consideration of the Report dated 17th December, 2012, of the Policy Council,
they are of the opinion:*

*1. To re-elect Mrs. Sheelagh Ann Evans as an ordinary Member of the Planning Panel for a
period of six years, to take effect from 6th April 2013, ending 5th April 2019.*

800

*2. To re-elect Miss Julia Anne White as an ordinary Member of the Planning Panel for a
period of six years, to take effect from 6th April 2013, ending 5th April 2019.*

The Deputy Greffier: Billet d'État III, Article IV, Policy Council, Planning Panel – re-
election of members.

805

The Deputy Bailiff: I invite the Chief Minister, Deputy Harwood, to speak to this Proposition.

The Chief Minister (Deputy Harwood): Thank you, sir, fellow Members, this is a
recommendation to re-elect two existing members of the Planning Panel: Mrs Evans, who was
elected originally as a member in 2009 and was, therefore, one of the founding members of the
Panel and Miss White, who was elected in 2011 to fulfil the unexpired term of a former member.

810

When the Panel was originally set up in 2009, it was recognised that the members of the Panel
would seek re-election over an extended period of time, the intention being that all members will
serve for a term of six years.

In this case, the proposal is to re-elect both Mrs Evans and Miss White as members of the
Planning Panel for a full term of six years. The Report refers to the principles of good governance
and the fact that this has the full endorsement of the Chairman of the Panel, Mr Patrick Russell.
Under the circumstances, I would recommend this Assembly to agree to the re-election of Mrs
Sheelagh Ann Evans and Miss Julia Anne White.

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820

The Deputy Bailiff: Thank you very much, Chief Minister.

Is there anyone wishing to speak in respect of the recommendations of the Policy Council for
the election to the Planning Panel?

Very well, then, we will take them separately.

825

Proposition 1 is to re-elect Mrs Sheelagh Ann Evans as an ordinary member for a term of
office of six years from 6th April this year.

Those in favour; those against.

Members voted Pour

830

The Deputy Bailiff: I declare her duly elected.

Proposition 2 is to re-elect Miss Julia Ann White as an ordinary member for the same period of
six years, to take effect from 6th April 2013.

Those in favour; those against

835

Members voted Pour

The Deputy Bailiff: I declare her duly elected.

840

Billet d'État IV

845

POLICY COUNCIL

Guernsey Legal Aid Service Legal Aid funding of Mental Health Review Tribunals and Public Law Children Cases, approved

850

Article II:

The States are asked to decide:

Whether, after consideration of the Report dated 28th January, 2013, of the Policy Council, they are of the opinion:

855

1. To agree that legal representation at Mental Health Review Tribunal hearings be provided under the Legal Aid Scheme generally on a 'no means, no merits test' basis; whilst reserving the right for the Legal Aid Administrator to exceptionally apply a 'means test' to an application, where reasonable and in conformity with Human Rights obligations.

860

2. To agree that legal representation for appeals from a Mental Health Review Tribunal to the Royal Court or Court of Appeal be provided on a 'means and merit test' basis.

3. To agree that Legal Aid funding of specified public law children cases in the court of first instance continue to be provided on a 'no means, no merit test' basis in line with the Guernsey Legal Aid Service pre-existing interim scheme.

865

4. To agree that legal representation for appeals in respect of public law children cases from the Child Youth and Community Tribunal or relevant Court to the Juvenile Court, Royal Court or Court of Appeal is to continue to be provided on a 'means and merit test' basis.

The Deputy Greffier: Billet d'État IV, Article II, Guernsey Legal Aid Service, Legal Aid Funding Mental Health Review Tribunals and Public Law Children Cases.

870

The Deputy Bailiff: Chief Minister, Deputy Harwood, to open the debate on this Report.

Chief Minister: Mr Deputy Bailiff, fellow States Members, at the outset may I say, for the avoidance of doubt, that I have no personal interest in the outcome of this debate. Although I am still a Member of the Guernsey Bar, I am no longer a practising Member.

875

The Policy Council's Report that you have before you – snappily entitled 'Guernsey Legal Aid Service: Legal Aid Funding of Mental Health Review Tribunals and Public Law Children Cases' – asks you to consider the basis on which Legal Aid will be provided to applicants under both the new Mental Health Law and, in some specific cases, under the Children's Law. In this respect, this Report recognises the inevitable introduction and development of public law within this jurisdiction, a field of law that stands apart from the traditional categories of criminal and civil law, a field of law that was not necessarily fully in contemplation when the States first debated proposals for a States-funded Legal Aid System in July 2001, when it was envisaged that means and merits testing should be applied to all aspects of Legal Aid.

880

Sir, the purpose of this Report is to ensure that, as a modern, civilised and responsible Government, we in Guernsey should protect the rights of the most vulnerable members of our community, especially when it is agencies of the States of Guernsey that initiate action that can lead to the loss of liberty of such members of our community. It is highlighted in HSSD's Report on the Mental Health and Wellbeing Strategy which will be considered by this Assembly later today, the mental health of our Islanders is an important matter, given that one in four people on the Island, it is anticipated, will experience mental health difficulties at some point during their lifetime. Looking round this Assembly, it is at least ten of us sitting in this very Assembly today. Unfortunately, mental health is no longer a subject that just impacts the few. The new Mental Health Review Tribunal, which it is expected will come into being in April, will give people in Guernsey, for the first time, the right to challenge their detention in mental health cases.

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Sir, the Report is very detailed and I do not wish to repeat its contents in this speech. I will, however, confine myself to some brief comments on the contents of the Report. I appreciate that the various eligibility criteria detailed in the Report – which refers to means and merits; no means, no merits; and permutations of these – may cause tongue-twisting confusion with States'

900 Members, as they have with me on occasion. I would, therefore, ask my fellow States Members to think about these eligibility criteria in the following simple terms. If, under either of the Mental Health Law or the Children's Law, the particular circumstances of a case are so serious as to lead to the deprivation of a person's liberty, or the removal of a child from its parents or family, Legal Aid would be granted automatically to the applicant, enabling them to have the services of a lawyer, or suitably qualified person, to represent them before the Mental Health Tribunal.

905 Furthermore if, following the initial decision of that Tribunal in mental health cases, or in the Court in Children's Law cases, that person is not satisfied with the outcome of that first decision, then they will be able to appeal that decision but, for the purposes of such an appeal, Legal Aid would be provided to them on the usual means and merit basis. That is, they would have to prove they cannot afford the services of an advocate to represent them but also prove their case was strong enough, or satisfy the necessary legal test, to proceed to appeal.

910 In summary, therefore, we are proposing for important legal reasons, as advised by the Law Officer's Chambers, to enable people who are detained for mental health reasons to challenge their detention, should they wish to do so, irrespective of their financial circumstances and the strength of their particular case. However, we recognise that in some exceptional circumstances, Legal Aid administrators may apply a means test on the person's application. We also propose that the existing arrangements in some very particular cases involving children continue to be provided automatically to that child and his or her family, again irrespective of their financial circumstances or the strength of their particular case.

920 The above examples are referred to as 'no means and no merits' basis. The Policy Council considers that the protection of vulnerable people in some specific cases *must* override *any* requirement for any means or merit testing, not least as a consequence of the commencement of Human Rights legislation which became part of our domestic law, subsequent to the original debates on the funding of Legal Aid and the new Mental Health Law, which took place in 2001 and 2002, respectively.

925 Sir, as stated in the Report, the States have already approved the funding of £300,000 for the associated costs of providing Legal Aid representation under the new Mental Health legislation. Although this is a demand-led service, the analysis made with the data kindly provided by HSSD demonstrates that it is reasonably likely that the sum will sufficiently cover requirements arising under the new Law.

930 The proposal regarding Children's Law cases should be cost neutral, given that, in practice, such cases have already been covered by Legal Aid on a 'no means and no merit' basis. Leaving aside the moral imperative to support those vulnerable members of our community who may be impacted by the action initiated by agencies of the States of Guernsey under the new Mental Health Law, and those who are already impacted by steps initiated by agencies of the States under the Children's Law, failure to afford people suffering mental illness and children effective access to justice in cases engaging their civil rights obligations, would also risk placing the States of Guernsey in violation of, amongst other things, Articles 5, 6 and 8 of the European Convention on Human Rights. These refer to deprivation of liberty, the right to a fair trial and the right to respect for private and family life. Automatic eligibility for legal advice and representation for children and, in such cases, their parents, and for the mentally ill will usually be required in order for those rights to be effective and to enable the States to demonstrate that it provides appropriate safeguards when seeking to interfere with such fundamental rights. I therefore urge my fellow States Members to support all of the proposals contained in this Report.

945 Finally, sir, I wish, if I may, to make a small correction to the Report by drawing your attention to paragraph 1.3 of the Executive Summary of this Report, which appears on page 307 of Billet No. IV. The penultimate sentence of that paragraph makes reference to the Policy Council staff supporting HSSD by providing administrative support in the hearings before this Tribunal. By way of clarification, the provision of such administrative support is not a matter for the Policy Council and it will be for the HSSD Board to make the necessary arrangements for such support.

950 Finally, if I may make comment, during the December States meeting Deputy Gollop requested that States Members be invited to attend a presentation on Legal Aid, in particular in relation to the proposed Ordinance and arrangements for legal aid to be placed on a statutory basis. The Law Officer's Chambers are currently drafting the relevant Ordinance and the other islands within the Bailiwick also need to be consulted on the provisions of the Ordinance. I can confirm that this presentation to States Members will take place as soon as possible thereafter.

955 Thank you, sir.

The Deputy Bailiff: Deputy Green.

960 **Deputy Green:** Mr Deputy Bailiff, Members, firstly I must declare an interest here. I am an advocate of the Guernsey Bar and I continue to practice: I do Legal Aid work, although mainly of a criminal Legal Aid nature, and I do not intend practising in the area of Mental Health Legal Aid.

965 It is very encouraging that mental health patients will have the right to appeal compulsory detention orders, I welcome that. It is about time, too. I have always felt that the existing system, whereby the only remedy the patient detained under the 1939 Law was by way of judicial review, was wholly inadequate and unfair. Given that the new right to appeal to the Mental Health Tribunal will be in place shortly, I believe it is entirely correct that Legal Aid will be available to those patients on a 'no means, no merit' basis. If you are a vulnerable patient who has just been sectioned, the last thing you would be focused on is providing details of your income for the last
970 thirteen weeks to your advocate and filling out a fairly lengthy application form for Legal Aid which baffles most practitioners, let alone those who are vulnerable patients. So having a no means and no merits scheme for Mental Health Tribunal cases is entirely realistic and sensible.

975 I do worry, however, whether there will be enough members of the Bar prepared to put themselves forward for this kind of work. Dealing with clients who have mental health issues is a very demanding area, it can be very complicated and it is certainly not for the faint-hearted. The fixed fees that will be available for this work are, potentially, not going to be particularly attractive to many local law firms. Some Members may be surprised at that but that is almost certainly the reality.

980 In my view, the fact of the matter is that there are not really enough young lawyers – new lawyers – coming through in Guernsey who are opting for careers in Legal Aid areas. That is the case in general and it is almost certainly going to be the case in relation to this work as well. So I do hope there will not be any practical issues with patients finding it difficult to obtain legal representation on Legal Aid matters: that is certainly a concern of mine.

985 Just one other final matter, in the Billet the comment by Treasury and Resources on page 333 of Billet No. IV: I do not propose to read that out verbatim but the last sentence of that comment by T & R about the cost cutting to the Legal Aid budget does make me slightly unsettled, not because it will impact on lawyers but because, potentially, any cuts to Legal Aid have to be judged very carefully and any cuts could well harm some of the most vulnerable and disadvantaged people in our Island. Legal Aid is, in essence, an arm of the welfare state so it should be
990 considered likewise, as the benefits system, so any cost cutting, cost reductions, have to be handled very sensitively, in my opinion.

I therefore commend this Report. It has my full support.
Thank you.

995 **The Deputy Bailiff:** Thank you.
Deputy David Jones.

Deputy David Jones: Thank you, Mr Deputy Bailiff, Members of the States.

1000 I was saddened, actually, to hear a lawyer say that he thought it might be difficult to find other lawyers to represent some of the most traumatised and vulnerable people in our community because I think he was hinting that other business was more lucrative. That is a sad indictment on the law profession in this Island, in my view, and it is something that I hope the Bâtonnier and the Bar Council would look at.

1005 I support this Report. It is high time that these rights were given to those who are likely to be sectioned and I am happy to see that their rights of appeal are now going to be recognised. I have one area of real concern and it came to me a few weeks ago when I was contacted by a parent of a child and if you go to page 307, which is actually the Executive Summary, and 1.5, you will see at the bottom of 1.5, it says the

1010 '...Department may bring proceedings to protect a child in danger; that child may be permanently removed from its family and may even have to leave the Bailiwick if placed for adoption.'

1015 It was on that last point that I was contacted. Many of you will remember your childhood and what you remember most about it was the place and the environment where you were brought up. Guernsey is a very special place in that regard. It is an idyllic place for a child – any child – to be brought up in and, notwithstanding the problems they may have in their home, the environment that they live in is hugely important. In fact, when people come back to the Island after many years of working away – they may have retired and come back to live in their Island home – one of the

1020 things that they always mention is that ‘This is the place where I was brought up, it is the place
 where I remember my childhood best.’ That is a real, absolutely fundamental point of a young
 person’s life, the environment in which they live. Now they may be removed from their Island
 home to an inner city environment or some other environment which is totally alien to them and it
 will be through no fault of that child at all. It could be they are being removed because of
 1025 problems with the parents in the family, maybe some mental illness or whatever, but that child...
 what happens to *his* Article 8 rights to family life and home. The idea that we could move him
 physically from the country in which he is entitled to live and has been born into, and has a right to
 expect that he stays within that environment, is fundamental to that child’s life. So what I am
 asking the mental health professionals, HSSD and the legal side of it, which this Billet deals with,
 is that they give this a lot further thought and work in that regard.

1030 I do not think that we have the right, as a community, or any social worker, or any lawyer in
 my view, has the right to remove a child from its living environment to another country, simply
 because we are too bone idle or lazy to provide the facilities that the child may need on this Island.
 The cost of removing children is huge and the cost of maintaining these children off-Island is huge
 so I would really like to see that the Article 8 rights of those children are observed, instead of just
 1035 in a throwaway line in a Billet that says

‘...and may even have to leave the Bailiwick if placed for adoption.’

1040 Now if you go to page 327, just to prove that the people who wrote the Billet have not totally
 dismissed this, you will see in 6.2.1 there that they do take up that point.

My point of standing today and addressing you on that particular issue is that I would like to
 see much more work done and children not removed. Adoption is a difficult one because, clearly,
 adoption is a permanent removal of that child from its birth family to somewhere else. But I do
 know there are children who leave the Island on temporary foster placements and all kinds of
 1045 things, which I think is manifestly wrong because you take that child out of its natural
 environment, you ruin that child’s life because they have no knowledge of how long they are
 going to be away. I was talking to an older member of my family about this who said that the five
 years that many people spent, during the Occupation, away from their Island home, changed that
 child’s entire life and I think we should bear that in mind.

1050 Thank you, sir.

The Deputy Bailiff: Deputy Bebb and then Deputy Adam.

1055 **Deputy Bebb:** I also came across the same concerns that Deputy Green raised in relation to
 Legal Aid. It is very unfortunate that we have so many members of our community that are
 pressing on this Government in order to achieve its FTP targets and yet, when it comes to the
 provision of Legal Aid – and it is not just the Bar Association, to be honest, there are other areas
 of professions on this Island who seem to think that contracting services from the States is an
 opportunity for a blank cheque – in this case, it exemplifies a problem that we are suffering, at this
 1060 point in time, that the message of trying to make savings within the Government is not being
 received by professionals on the Island. If they are not willing to accept and *assist* the
 Government, we simply will end up in a position of increasing their taxation. The FTP is an
 endeavour that must extend beyond the walls of this Assembly.

In relation to what Deputy Jones has raised, I would just like to caution – children are not taken
 1065 off-Island lightly. In certain cases, children are taken off-Island for their own protection.
 Whenever decisions are made in relation to the protection of children, the decision is always to
 have the child’s interest at the heart of the matter. It is unfortunate that, in other cases, we
 currently do not supply a sufficient amount of money, for instance, for foster placement. I am
 aware of a current condition where we will have to send a child off-Island because there is no
 1070 suitable foster placement here in Guernsey. If we are only going to pay them £15,000 a year and
 request that they stay at home and do not take up another employment, then we have to start
 asking ourselves is that enough money and whether we would make savings, if we were to
 increase the foster payment. It is something that I intend to take up with the HSSD Board and
 investigate further but, I have to say, who can afford to pay a mortgage on £15,000 a year.

1075 We need to address the issues that are concerning the Island but, in relation to the Report,
 whilst I wholeheartedly support it and I will, of course, vote for it, I think that we should express
 our concern that the message of savings is not being received outside of this Assembly.

Thank you.

1080 **The Deputy Bailiff:** Deputy Adam.

Deputy Adam: Thank you, sir.

1085 Unfortunately I am on a similar track to the last speaker and also to Deputy Green. I think it is very easy to say 'legal representation and the cost' but the problem is both in the legal profession, the medical profession, the nursing profession, you are getting sub-specialisation and we require to ensure that sufficient numbers of advocates in Guernsey are willing to take the extra training necessary in this extremely difficult and stressful field. I would like to ask either the Chief Minister or H.M. Comptroller if this area has been explored because I believe this is one reason why bringing the Mental Health Law was, or has been, delayed over the last six months, to ensure 1090 there is an adequate number of locally trained legal people willing to give legal representation, or is it time, in view of this sub-specialisation, that we are going to have to explore the bringing in of lawyers from the UK, who have already trained in this area, to provide what may only be a small number of cases. I ask the Chief Minister if this has been explored and whether this area is absolutely sound and essential to those who require it and will be available at a reasonable cost, in 1095 relation to Legal Aid, because I also believe there have been discussions in how much per hour.

The other point concerning this: for once the States actually – the States of Deliberation – and HSSD actually thought ahead and considered the potential cost of bringing in these new tribunals and legal representation and an SSP bid was successful in 2010 of up to £300,000 per annum for 2011 and 2012 and onwards. I would like to ask where has the £600,000 from the last two years gone and will it be available if the amount goes over in 2013 and 2014?

1100 Thank you, sir.

The Deputy Bailiff: Thank you.

1105 Deputy Gollop.

Deputy Gollop: Sir, I might have misunderstood something Deputy Harwood may have said to us at the Douzaine but Deputy Adam gives us the opportunity for him to clarify the point, or expand upon it, for the future and that is: will it be the case, not in appeals to the Royal Court, of course, but in the context of the Mental Health Tribunals, that UK – or England and Wales, rather, 1110 barristers will potentially have the right of audience in that context? Although I do believe there are several publicly-minded advocates from the various diverse law firms who are undergoing training in this specialist sub-set and, indeed, we will have to look at the package of Legal Aid between, I suspect, the Guernsey Bar and the Policy Council, as to whether it could be lowered or raised in different types of work, rather than one size fits all, perhaps, and the Royal Court to encourage lawyers in diverse specialisms. 1115

Turning to the specifics of this, I have a concern from a member of the public, that they would wish to see greater rights for the family to put forward their views in these cases but I think the specifics that the Chief Minister has raised, about a 'no merit, no means test', is the right way forward. I think for a decade or so, too many Members of the States have been a little parsimonious towards Legal Aid but this is an acknowledgement that it *is* a human right, that it *is* useful for the public and, indeed, I commend the Chief Minister for stressing our need to be a civilised society, with an emphasis on protecting the most needy and vulnerable in these delicate circumstances, whether it be Mental Health Tribunals or public children cases. 1120

We are seeing a development of public law which is to be welcomed. This area very much needs our support and, indeed, I would hope that, when Legal Aid is looked at more in the round, they may well extend the 'no means, no merit' test because I know it can add a lot of extra burden, time, potential cost and difficulties with organising court cases, that the barriers that are available to Legal Aid – and, indeed, coming back to Advocate Deputy Green's point and other points – if the barriers to acquiring Legal Aid were not so onerous, then one suspects that, commercially, 1130 more lawyers both now and in the future would go in for practices that focus on Legal Aid because it would clearly be a more lucrative and easier path to take action on. So I think this, perhaps, represents a U-turn from the old approach of rationing Legal Aid and, for that reason, has to be commended as well.

1135 **The Deputy Bailiff:** Deputy Dorey.

Deputy Dorey: Thank you, Mr Deputy Bailiff.

I would just like to pick up some of the points that have been made in debate.

1140 We have had twelve serious expressions of interest from advocates' practices in relation to advocates representing people at Mental Health Tribunals so I hope that allays some of the fears that have been expressed in this debate.

1145 Just picking up some other points which have been made, Deputy Jones particularly talked about children. The Department always will try and maintain that children remain on the Island but, in some cases where there are extremely complex needs, they will have to result in off-Island placements. I would encourage Deputy Jones to come and speak to the Department and we can explain, in far more detail, the processes that our children's services work to under the Children's Law.

1150 I would just finally say that my Department fully supports these proposals.
Thank you.

The Deputy Bailiff: Deputy Laurie Queripel.

Deputy Laurie Queripel: Thank you sir.

1155 I simply rise to support the remarks and concerns articulated by Deputy David Jones. I am being contacted on a fairly regular basis by parents and extended family members in regard to the removal and off-Island placement of children. Now I know that this is a complex, very sensitive and very emotional area but it does seem, at times, that the justification for these actions may be questionable. It is a matter that Deputy Lester Queripel and myself will be further pursuing.

1160 Thank you sir.

The Deputy Bailiff: Deputy Perrot.

1165 **Deputy Perrot:** I had not intended speaking in this debate and I rise, I suppose, on the hopeless task of trying to say something on behalf of the legal profession. Deputy Jones made a few disobliging remarks about the Bar and I do not think those should be allowed to pass by without a comment from me.

1170 The Guernsey Bar actually had an honourable history in relation to providing Legal Aid and at one time Members of the Bar were obliged, under a dock brief sort of system, to provide legal services for people entirely free in criminal cases, if they were chosen. That happened to me. I remember one day sitting over there, there was a person in the dock, he chose me and I think he regretted his decision so much that he immediately legged it... (*Laughter*) He was at liberty for quite a few days before he was apprehended but he still went through allowing me to represent him. But there was a history of members of the Bar providing Legal Aid services.

1175 What happened was that the European Convention on Human Rights, so beloved by Deputy Jones, that was the body which imposed upon us a requirement that we have a Legal Aid service. It happened during my watch, when I was Bâtonnier. There were people who were prepared to give Legal Aid services and I do not think it is right to allow opinion to masquerade as fact. I know that Deputy Jones likes doing that but I think, if he is going to make comments about the absence of people prepared to give Legal Aid services, then he ought to have some evidence to support that. I was pleased to hear from Deputy Dorey that there were, in fact, expressions of interest in respect of this particular form of Legal Aid.

1180 One last comment is this: in relation to the Legal Aid system, it is important that Legal Aid should go where it is deserved. At present, I think, there is too much room for abuse.

1185 **The Deputy Bailiff:** Deputy Brehaut.

Deputy Brehaut: Thank you, sir.

1190 I just wanted to make a point. When I was a Member of HSSD some, I think, perhaps eighteen months ago, I used to sit on the Fostering and Adoption Panel and, regrettably, there are not as many people as we all assume there are, or would like to think there are, that put themselves up to foster or adopt children. The point is that a child has a right to a home life.

1195 Guernsey is not the centre of the universe: we all choose to remain here and Guernsey is a wonderful place for a child to grow up. But Guernsey is also the place where the child has experienced great anxiety and origins of what could, potentially, be later life significant problems. So there are times when it is wholly appropriate to take children out of the Island to a better family life because every child that is waiting to be adopted is waiting in care, in a care setting, with a turnover of staff, with different faces, with relationships forged and relationships abruptly ended. So let us focus on the child and getting that child into a safe, secure family life. Island life should

1200 not be the top of that hierarchy, in my view, sir.

The Deputy Bailiff: Deputy St Pier.

1205 **Deputy St Pier:** Sir, I will leave the Chief Minister to respond to Deputy Green's concerns with regard to Policy Council's efforts and initiatives to contain the Legal Aid budget but, as the Chief Minister said, given developments in public law, the Treasury and Resources Board recognises that the provision of Legal Aid, in the cases set out in the States Report, is a prerequisite in a modern society seeking to be compliant with Human Rights standards, so the Board supports this States Report.

1210 The Board accepts, as is included and noted in our comment on page 333 of the Billet, that the provision of Legal Aid on a so-called 'no means and no merit' basis, rather than on a means test which was approved ten years ago, of course before the Human Rights Law became effective in 2006... However, as the Chief Minister has said, there is to be a provision, as you will see in paragraph 1.7 of the Report, on page 308, for the Legal Aid Administrator to 'apply a means test' in *exceptional* circumstances when it would be reasonable to do so. Now it does not, of course,
1215 mean that all patients or public law children cases who are seeking to appeal decisions will access Legal Aid. It is expected that the majority will do so but some may choose not to do so.

1220 We do also recognise, as I suggest the Assembly must, that the nature of the support that is offered here does make the level of expenditure quite lumpy and unpredictable. This is likely to be even more so in the first year when there will be more tribunal reviews, particularly as existing patients under the Mental Health Law access the tribunals for the first time, but the Treasury and Resources Board does support this Report and the propositions.

The Deputy Bailiff: Before I turn to you, Chief Minister, I am just going to invite H M Comptroller to clarify some of the legal points that have been raised and then you can reply to the
1225 debate.

So, Madam Comptroller.

The Comptroller: Thank you, sir.

1230 It is just to clarify, in relation to Deputy Hunter's concerns about legal specialisation and what efforts may have been made to assist the legal profession. I can confirm that training in this area has been initiated by the Law Officer's Chambers, in conjunction with officials from HSSD, so it is an area that we are aware of. I can confirm that numbers did attend: certainly there were in excess of at least 20 when I attended that presentation and it was really to make people aware that it is something that is underway and that we are aware of.

1235 Thank you, sir.

The Deputy Bailiff: The Chief Minister to reply to the debate, then.

The Chief Minister: Thank you, sir.

1240 I am very grateful for the general support for the recommendations that we are putting forward to this Assembly given during the course of the speeches.

1245 Deputy Green: I welcome your support for the application in principle of introducing appeals to the Mental Health Tribunal. You mentioned concern over the number of members of the Bar. I think H M Comptroller and also Deputy Laurie Queripel have addressed that. In connection with that – and perhaps I really ask a question of H M Comptroller because this also relates to a point which Deputy Adam has raised – my understanding – but I would be grateful for the Comptroller, perhaps, to confirm – is that it is not necessary to be an advocate to represent a detained patient at the Tribunal but it would require an advocate to represent on an appeal to the Tribunal. If H M
1250 Comptroller is able to answer that... it is my understanding but I would just like confirmation.

The Deputy Bailiff: Madam Comptroller, are you able to answer that question without looking at the 2010 Law?

1255 **The Comptroller:** I cannot, sir, without looking at the 2010 Law.

The Chief Minister: I was referring to a note that was produced to the Policy Council from the Legal Aid Administrator, where that point had been made. If there is concern about the availability of advocates on-Island to provide this Legal Aid service, it is my understanding – but I

1260 will need to confirm – that it is possible for non-advocates to represent clients before the Tribunal but not on appeal from the Tribunal and, similarly, would not be able to represent clients before the court in the case of the Children’s Law because that is a court application.

I am grateful to Deputy St Pier for dealing with the Treasury and Resources’ comment in relation to the policy document. Clearly, Policy Council also recognises it is going to be very difficult to envisage accurately the likely cost of Legal Aid and, therefore, in this context, the
 1265 Policy Council will, in conjunction with the Legal Aid Administrator, review the cost in the light of demand, certainly in the experience of the first twelve months.

Deputy Jones: again, your comment on the availability of Members of the Bar. I am very pleased that Deputy Perrot has sprung to the defence of the Guernsey Bar but, as I have said, my understanding is that we are not necessarily dependent upon members of the Guernsey Bar to
 1270 represent clients at the Tribunal.

Your comments on the adoption of children, off-Island links etc: clearly, I am sure we all empathise with the concern that, for children born in Guernsey, this is the place of their nurture and the assumption should be they should be found places on-Island but it is a matter for the court. It is a discretion of the court to make those orders and, in doing so, the court will have an
 1275 overriding concern for the protection of the child. The reference in the Report of Policy Council only serves as an example of certain circumstances where Legal Aid does come into play.

Deputy Bebb, again, your concern over fostering and adoption: that really is outside the context of this particular Legal Aid policy but I note your concern. I also note your concern that it is a matter for the professionals also to take account of the Financial Transformation Programme if they are providing services to the States, whether it be Legal Aid or in any other context. Without
 1280 necessarily wishing to spring to the defence of the Bar, my understanding is that the Legal Aid hourly cost for members of the Guernsey Bar has not changed since about 2008, so I think there has been some restraint... (**Deputy Green:** 2003!) Sorry, Deputy Green advises that it is actually from 2003. Genuinely, I think the Guernsey Bar has not been seeking a huge profit from this
 1285 exercise.

Deputy Adam has also mentioned accreditation, specialisation: H M Comptroller has already advised and it is my understanding that, in order to qualify for Legal Aid, or to provide Legal Aid, that the advocate or other person providing that service will have to be accredited and will have to
 1290 go through an element of training because the Mental Health Tribunal procedures are new to this Island. They are new to the members of the Tribunal, as well as members of the Bar or others who will be providing the service.

As to the question of what has happened to the £300,000 that was originally earmarked for Legal Aid costs during the last two years, I suspect, as ever, it is probably within the ether. It has
 1295 certainly not been expended, as far as I know, so I am sure that Treasury and Resources in due course will, no doubt, be able to find out where it has gone but it certainly has not been... if it has been authorised, it has not been expended so, therefore, it has not been drawn down. I do not think that means we can carry it forward as an undrawn balance, as I am sure Treasury and Resources would have strong views about that.

Deputy Gollop: I think you raised a point about the rights of audience. I think I have addressed that as far as I can. Certainly, on any appeal from a Tribunal I believe that has to go to the court
 1300 and, therefore, it would only be an advocate who had right of audience.

Deputy Dorey, I am very grateful to you for your support. Clearly, this is an issue where Legal Aid and HSSD will be working very closely together.

Deputy Laurie Queripel, you raise the same concern over children being taken off-Island as
 1305 Deputy Jones has. This is not really a matter for this particular debate but, again, I note your concerns.

Deputy Perrot, thank you for your very strong and robust defence of the Guernsey Bar. Neither of us have any financial interest now because both of us are non-practising members and have
 1310 long since gone to be put out to grass (*Laughter*). In the case of Deputy Perrot, he has the benefit of being in the high parishes where the grass is greener! (*Laughter*)

Deputy Brehaut has also referred to the problems associated with children fostering and adoption. Again, it is something outside the ambit of this particular debate.

Members of this Assembly, again I would just repeat what I said earlier that, irrespective of
 1315 any Human Rights issues, I believe it is incumbent upon this Assembly, as a matter of moral imperative, to support this particular proposal and to recognise that Legal Aid should be granted, in order to bring challenges to the Mental Health Tribunal and under the Children’s Law on a ‘no means, no merit’ basis and I therefore recommend, and ask for, your support for the recommendation put forward.

1320 **The Deputy Bailiff:** Thank you, Chief Minister.
Members of the States, there are four propositions to this Report which you will find at page 333 in the Billet.

Given the way that the debate has gone, I was minded to put all four propositions together, rather than take any of them separately. Therefore, I will put the four propositions together.
1325 All those in favour; all those against.

Members voted Pour

1330 **The Deputy Bailiff:** I declare the four propositions carried unanimously.

Billet d'État III

1335

HEALTH AND SOCIAL SERVICES DEPARTMENT

Mental Health and Wellbeing Strategy Establishment of Mental Health and Wellbeing Implementation Board 1340 Debate commenced

Article V.

The States are asked to decide:

1345 *Whether, after consideration of the Report dated 21st December, 2012, of the Health and Social Services Department, they are of the opinion:*

1. To direct the relevant States Departments, including Home, Social Security, Housing, Education and others where appropriate, to establish a steering group, to be led by HSSD (the "Mental Health and Wellbeing Implementation Board"), and any subordinate inter-agency groups, including meaningful partnerships with the voluntary and business sectors and other key stakeholders, in order to deliver the strategic priorities outlined in the Mental Health and Wellbeing Strategy.
1350

2. To direct the Health and Social Services Department to report back to the States on the progress of the Strategy, as part of the next update on the 2020 Vision.

1355 **The Deputy Greffier:** Billet D'État III, Article V, Health and Social Services Department, Mental Health and Wellbeing Strategy.

The Deputy Bailiff: I invite the Minister of the Health and Social Services Department, Deputy Dorey, to open the debate.
1360

We will just take a brief pause, Deputy Dorey, as people stretch their legs.

There was a short pause.

1365 **The Deputy Bailiff:** Deputy Dorey, then.

Deputy Dorey: Thank you, Mr Deputy Bailiff.

Mental wellbeing has been defined as the ability to cope with life's problems and to make the most of life's opportunities. It is about feeling good and functioning well and is independent of mental health status. Positive mental health and wellbeing can influence outcomes across a wide range of domains. These include healthier lifestyles, better physical health, improved recovery, fewer limitations in daily living, higher education attainment, greater productivity in employment and earnings, better relationships, greater social cohesion and engagement and improved quality of life.
1370

1375 There are a number of factors that contribute to someone's state of mental wellbeing. These include having somewhere to live, access to education, a job and income, having a feeling of self worth, having friends and family and access to leisure. It is clear that all States Departments and every part of our community can, by their actions, not only promote and improve wellbeing but

can take action to provide solutions to some of the challenges that affect emotional health and wellbeing. In short, mental health and wellbeing is everyone's business.

1380 The Mental Health and Wellbeing Strategy focuses on the importance of promoting good
mental wellbeing across the whole community. It looks at the contributing factors to diminishing
wellbeing and poor mental health across the lifespan, from childhood to old age, and outlines
effective ways of addressing these issues. The Strategy is based on evidence of mental health and
1385 wellbeing needs in the Island, as well as best practice from the UK and beyond. We know, for
example, that the cost of poor mental wellbeing to our economy is significant in Guernsey, as
much as everywhere. In 2011 the Social Security recorded that 30% of the 900 Invalidation Benefit
claimants had a mental health related illness as the primary cause of disability, with depression as
the single largest cause.

1390 In 2011 and 2012 the Social Services Department worked with Social Security and GPs to
develop a primary care service to address common mental difficulties, such as depression and
anxiety, early on. Indeed, depression has been recognised by the World Health Organisation as the
leading cause of disability, in terms of years lost to disease. This has resulted in individuals being
seen more speedily and benefiting from better mental health and employers having, doubtless,
1395 benefited from reduced absenteeism and higher levels of productivity at work. This clearly
demonstrates the success that timely collaborative approaches, as is called for in this Strategy, can
have in promoting and enhancing mental wellbeing and achieving a positive result for the whole
community.

The Mental Health and Wellbeing Strategy provides a way in which States Departments can
work together towards common objectives, which will begin with the establishment of a Mental
1400 Health and Wellbeing Implementation Board in 2013. This Strategy would lead to better outcomes
for people with mental health needs, taking into consideration a strong evidence base, including
specifically commissioned papers by the UK Mental Health Foundation and the Centre for Mental
Health, and the 2010 Guernsey Emotional Wellbeing Survey. Through the Survey key elements of
1405 mental health provision will be updated and developed, with emphasis upon prevention and timely
intervention. This will be crucial in reducing the incidence of long term mental health problems,
giving people who experience poor mental health a better chance of recovery and rehabilitation. In
addition, and of significance, the Strategy sets out ways in which the stigma of poor mental health
can be tackled more effectively, and demonstrates the importance of emotional wellbeing enabling
people to live healthy, independent lives.

1410 The Mental Health and Wellbeing Strategy is, therefore, one of the first workstreams arising
from the 2020 Vision for the future of health and social care to come to the States. It sits within the
social care pillar of the 2020 Vision and its reach extends across all areas of social care, health
care and health promotion, and it depends on effective, inter-agency working between States
1415 Departments, voluntary organisations, and the business sector in order to truly achieve its goals.

I ask Members to support this Strategy and will answer any questions at the end of the debate.

The Deputy Bailiff: The first person I am going to call is going to be Deputy Langlois, and I
have got several in the line already...

1420 So Deputy Langlois, then Deputy St Pier.

Deputy Langlois: Thank you very much, sir.

1425 Can we leave it in no doubt here that the Social Security Department is in full, broad support of
this Report, and very much welcomes this strategic approach to improve achieving improved
mental wellbeing. It needs to be pointed out that the Strategy covers all age groups, but may be
particularly relevant with the demographic patterns that we are facing and the pattern of mental
health which tends to rise in particular areas, with larger numbers in older age groups. That is of
obvious importance to our Department.

1430 There are clear links between mental wellbeing and stable employment patterns and that is also
of major importance to us. Now can I draw your attention briefly to some key background points,
one or two of which bear repetition, with apologies to points that Deputy Dorey has already made.
In paragraph 34, for example, I repeat the statistic: 900 invalidity benefit claims, 30% of those
with mental health related issues. If I refer you to our Benefits Uprating Report of October 2012 –
1435 I am sure you remember all the details quite clearly because you were so riveted by the whole
thing! Just in case you have forgotten, we were very pleased to report a 7% drop in long term
sickness claims and, as at June 2012, diagnosis of mental disorder or depression and anxiety
accounted for 28% of all those invalidity claims and this formed part of the rationale for the
uprating report. The Social Security Department believes that a combination of various initiatives

and the introduction of the pilot scheme for the Primary Care Mental Health and Wellbeing Service are beginning to have a positive effect on claim numbers.

1440 Now, sir, returning to this Billet, paragraph 43 highlights the pilot scheme that has been operating since September 2011 and we can report that it has received some 1,500 referrals to date. I think this is a number that, certainly, our Board Members have found quite surprising but, nevertheless, that is the level of take-up. It has also received – and it is early days with a longer
1445 term pilot of this sort to make any rapid judgements on statistics – we have received, early indications that there is very positive feedback both from service users and from GPs. Also, as a consequence of that, there are early indications that it is having a positive impact on Social Security’s expenditure on mental health-related support, which results from lack of this sort of service.

1450 If we move to paragraph 93, it says that,

‘The Island is relatively affluent, although there are pockets of deprivation. Unemployment is [very] low at around 1%...’

1455 Just a reminder that the January figures, which came out last year, showed 435, 1.3% – calculated by an international standard – unemployment.

In paragraph 135, the Strategy has prioritised the provision of work-based support to employers and employees and I cannot let the opportunity pass for praising the work of Interwork Services, and other agencies which we partner with, to enhance employment opportunities. My Department will continue to seek to improve employer understanding and knowledge so that there
1460 is a growing provision of opportunities in the workplace for people, particularly recovering from mental illness. We see that this is a very important part of the management of unemployment in these areas.

So, in summary, sir, this is a very good framework for better inter-agency working. It will allow existing resources to be deployed more effectively and, ultimately, it will require the
1465 application of appropriate resources. We must bear in mind the need to build in sustainable funding patterns for the delivery of strategic priorities within an appropriate timeframe. But let that not detract, today, from Social Security’s full support for the recommendations of the Report and very broad and general support for the Strategy.

1470 **The Deputy Bailiff:** Deputy St Pier.

Deputy St Pier: Sir, thank you.

I would like to speak early in this debate in support of this States Report, as I feel sure that there may be some both in and outside the Assembly who may criticise it as yet another Strategy
1475 devoid of hard policies and actions. I speak primarily as an individual Member, rather than as the Treasury and Resources Minister.

Sir, I want to share with you my own family’s experiences and, to do so, I need to take you and Members back 15 years to the early hours of Boxing Day, 1997. If you do not remember what you were doing, then you were probably, like me, asleep. A few hours later, I learnt that it was at that
1480 time that one of my brothers, Justin, had not been asleep but had, instead, decided that this was the right time – his time – to take his own life. *(Pause)* Sorry, forgive me, sir. He leaped, jumped or fell – we will never know which – from an unremarkable multi-storey carpark in East Croydon and so, aged 34, ended 13 years of living with schizophrenia.

Having been diagnosed at 21, Justin had been sectioned, in the terminology of the UK Mental Health law, on a number of occasions over those 13 years and so had been an inpatient of a former Victorian asylum, not unlike our own Castel Hospital which, of course, is in itself a depressing
1485 experience. However, for most of those 13 years he was part of Care in the Community, the irony, of course, being that he was almost totally isolated from the community supposedly caring for him.

Now Members will have come to realise, in the last ten months or so, that I am not given to introducing great emotion or hyperbole into my speeches in this Assembly so why am I sharing my personal anecdote with you? It is, I hope, to illustrate the point that we *all* know to be true: mental health problems have affected, are affecting, or will affect, every family on our Island at
1490 some point. For most, thank goodness, it will not be at the most extreme end of the spectrum, as in my family’s case, and for that reason alone I did wonder whether it would be wise for me to actually recite our story because, for some, it may simply reinforce the stereotype about mental health.
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1500 One of the biggest challenges – and it is recognised in this Strategy – one of the biggest
 challenges with mental health is combating discrimination and stigma. This requires the topic to be
 discussed openly and not to be treated as a taboo, and it is for this reason that I think it *is*
 appropriate – and I hope Members agree – for me to share my family’s story with you. The point
 is – and the Strategy makes this point well – good mental health and wellbeing is a lifelong
 1505 challenge, from birth, through adolescence, into the working environment and old age. So poor
 mental health can impact at any age. As has already been noted today, it is likely to impact 1 in 4
 of us at some point.

There will be Members here today who have, are, or will be, impacted. It may be depression
 through loneliness, or following a bereavement, or a breakdown in a relationship. It might be an
 eating disorder with all the obvious physical risks, it might be a debilitating obsessive compulsive
 1510 disorder, it might be anxiety, it might be work-related stress, it might be dementia in all its forms.
 Because mental health and wellbeing affects us all, it is, self-evidently, all our problem, as Deputy
 Dorey has said. In Government terms, it is not just HSSD’s problem: Home, Education, Housing
 and Social Security will also have significant roles to play, but so, too, will Culture and Leisure in
 helping people to live well, and Commerce and Employment, in promoting knowledge and
 1515 understanding that will break down stigma in the workplace, and so on. For me, this is the power
 of this document, by clearly articulating that fact and, in consequence, directing all States
 Departments to work together and with the private and third sectors. It is reflecting the
 transformation in inter-departmental States working that we are striving for elsewhere.

Sir, when this document came in draft through both the Social Policy Group and the Treasury
 and Resources Board, HSSD were repeatedly questioned to reaffirm the statement that this
 1520 Strategy did not, of itself, require additional resources. The point was repeatedly made, in
 response, that this Strategy is about deploying existing resources more efficiently but, more
 importantly, more effectively, to improve service provision, principally by joining up the existing
 work of different Government and non Government agencies.

It should be noted, as paragraph 171 of the Report on page 266 states, that additional resources
 1525 may be required as implementation plans are developed and these, of course, will need to go
 through the normal processes. However, mental health and wellbeing should not, of course, just be
 seen as a public expenditure cost in treating the crisis and the consequences of ill health. It should
 also be seen as an opportunity for prevention, which is consistent with the objectives of the draft
 States Strategic Plan: good mental health and wellbeing, with an increased economic participation
 1530 with reduced rates of absenteeism and presenteeism – that is where the employee is present at
 work but with reduced productivity and effectiveness – will bring direct and indirect financial
 benefits.

Sir, HSSD should be congratulated on the development of this Strategy and, in my opinion, it
 should be strongly supported by this Assembly.

1535 Thank you, sir. (*Applause*)

The Deputy Bailiff: Deputy Le Lièvre next, followed by Deputy Storey.

1540 **Deputy Le Lièvre:** Mr Bailiff, Members of this Assembly, the Ministers of Health, both past
 and present, the HSSD Board Members, both past and present, and the staff of Health are to be
 applauded for the creation of a landmark document that should be regarded as one of the most
 significant developments in the history of this Island’s approach to mental health and wellbeing.
 (**Members:** Hear, Hear) The quality of this document and its vowed intent in social care terms is
 1545 arguably without equal, certainly, in the last half century and possibly a great deal longer than that.

Not only is this document very readable, if ever so slightly repetitive, but it is written with a
 degree of sensitivity and care, coupled with honesty and openness, though devoid of any sentiment
 that might stigmatise mental illness. In my opinion, the document is simply stunning. Not only has
 Health marked out a route for *itself* but it has done so for other Departments, in that it repeatedly
 1550 states – and repetition is not always a bad thing – that those other social ills which contribute to the
 likelihood of an Islander – any Islander, that is you and me – suffering from some form of mental
 health from the most mild forms of depression, serious enough in themselves, through to
 debilitating forms of mental illness that require in-patient treatment. And these social ills already
 referred to, but which I will refer to again because, as I said, repetition, in this particular instance,
 1555 is so important – and these are in no particular order – can include poor academic achievement,
 poor self esteem, unacceptable standards of accommodation, unaffordable accommodation,
 unemployment, unacceptably low rates of pay and the ability to form resilient relationships based
 on trust, respect and good old-fashioned love.

Of course, being unemployed does not, of itself, result in mental illness but the Report highlights that these issues can increase the chances of depression and, indeed, severe depression and especially, sir, when more than one of the above factors I have already mentioned are experienced by the same individual. The numbers who suffer such illness, from the most mild to the most severe, are huge. In fact, any statistic that you choose to examine involving mental health is huge in Island terms. I will repeat what has already been said: 1 in 4 of us will experience some form of mental illness; 1 in 5 of us adults experience anxiety or depression to a clinical level; 1 in 10 children, between 5 and 16, has a mental health problem – 1 in 10! Around 400 children during 2012 were referred to CAMHS. Half of those who have lifetime mental health problems first experience symptoms by age of 14 and at least half of all adults experience at least one episode of depression in their lifetime. Half of all adults! One in 10 new mothers experience post-natal depression and, finally, it is estimated that, at any one time, 4,000 Islanders have mental health problems that affect their day-to-day living.

Looked at another way, when compared to the current levels of unemployment, you are ten times more likely to be suffering from a mental health problem. Half the people in this Assembly will experience at least one episode of depression during their lifetime: it comes like a thief in the night and it does not leave you that quickly. Possibly there are as many as 700 Guernsey schoolchildren with a mental health problem – that is, in effect, a secondary school full. These figures are shocking and vividly highlight the uphill struggle faced by HSSD. It is no wonder it is seeking a joint buy-in with four or five other major States Departments, so as to ensure that the Strategy stands a reasonable chance of success. I think, if I am honest, it is this latter point where I believe HSSD's strategy is exposed to risk. And that risk could derail wholly, or at the very least slow to a crawl, the progression of this long-awaited and required new approach to dealing with the previously largely shunned issue surrounding mental health.

Now, in simple terms, if there had been a price tag of £5 million at the end of this document, would we all support it? If it had required an extra 30 staff to cope with the improvements that are talked about, the necessary improvements that are talked about, in this Strategy document, would we approve it? One would like to say 'Yes', but the reality is that that might not have been the case. You see, I question the argument that making our existing health professional staff work more efficiently is actually going to produce the improved services that we so need. I really do. Do we honestly believe that our health professional staff wastes so much of their time in dealing with issues, that we can improve it to such an extent that we are going to reduce these *horrendous* figures by any substantial amount? Because I do not: I really do not. I just find it unbelievable. If you spoke to a health professional, I think you would end up with the view that I have got that, yes, efficiencies can be made and new systems, more effective systems, can be employed but are they *really* going to reduce the levels of mental illness to a more desirable level? I do not think they will. One of the reasons I say that is that, at Education earlier this week, we examined a response to this Strategy from a health professional who was totally and utterly supportive of the Strategy, but the last line started with the word, 'However'. She went on to say – I should not have said 'she' – this person went on to say that the professional staff had some doubts as to their ability to deliver some of the required improvements in our system, and that, for me, is a warning shot across the bows. Do not put your faith in the fact that our services can be so improved that they will produce the better services we so desperately need.

I also think that when resources... we should all remember that when HSSD and Social Security and Housing and Education approach this Assembly with requests for additional staff, that we deal with those requests sympathetically because we must never ever forget the content of this document. It is at the very core of the health of this Island. I have a dread fear that these additional resources will not be made available and that the delivery of this Strategy will be over such a long period that many of us will forget the requirement to actually improve the services we have on offer. It is a real fear but, having said that, I totally and utterly support the content of the Strategy. It is, as I said at the beginning, simply stunning.

But I have two slightly tongue-in-cheek remarks to make. The first is that, for five years of my career, I worked for the Public Assistance Authority. Now, that organisation, which comprised over 70 elected members, was originally comprised of a number of boards, the Hospital Board, which was taken over by what was then the Board of Health; the Children's Board, which became the Children's Board in its own right; the Stranger Poor Assistance Committee; the ten Parochial Outdoor Assistance Boards and the Central Outdoor Assistance Board. These were organisations which were well meaning but they embodied the views of the workhouse, they embodied the views of the asylum and parochial charity and the removal of all personal rights and liberties. I would, therefore, ask and it is a big ask – and it is only going to come from one person, I suspect –

1620 that, at its first meeting, the Mental Health and Mental Wellbeing Implementation Board considers changing its name to something less eighteenth century and more twenty-first century. It is a serious request. I want this Strategy to succeed as much as anybody in this Assembly.

1625 The second thing, which is even more tongue-in-cheek, is that, instead of having an Annex 1, as we have now in every Policy Letter, which is to do with governance, which nobody now reads, I suspect, and nobody now believes, because which Department is ever going to say 'No, actually on points 1 – 6, we do not... we are not conforming to any of those.' Who is going to say that? Nobody. I would rather see a commitment by a by a Board such as Education that it will meet the requirements of the Mental Health and Wellbeing Strategy, that it will meet the requirements of the Obesity Strategy and the Drug and Alcohol Strategy and all of those other Strategies which we have known and we have come to love and put our trust in... Because if they do not, this will drift. It will drift, as it has done over the years.

1630 30 years ago the Castel Hospital was earmarked as an organised or, rather, a building unsuited to its intentions. 30 years and we are only just going to consider its replacement today. 30 years and more mental health issues have stayed in the background of our minds. We cannot allow that to happen any more. We cannot allow it to happen because the costs to the community, both in financial terms and in pain and suffering, not just for the person who is mentally ill, the impact of mental illness goes over the whole family, let me assure you of that. So I want to see a commitment by every Department in the future, and you will get it from Education, I can assure you. I want to see a commitment from every Department, that we have signed up to this Strategy, we are not going to let it be forgotten, we are going to follow it to its ultimate conclusion and, once again, I praise the Board and Minister of HSSD.

1640 Thank you, sir.

The Deputy Bailiff: Deputy Storey, to be followed by Deputy Bebb.

1645 **Deputy Storey:** Thank you, sir.

It is always difficult following Deputy Le Lièvre when he has been speaking from the heart on a social matter. But I rise, really, as a member of the HSSD Board, to reinforce the points that have been made by the Minister but also by Deputy St Pier, because I think they are important for us all to appreciate.

1650 Sir, we are currently working to the terms of the Mental Treatment Law (Guernsey) 1939. Really, we could not be much more out of date, could we? Now the new Mental *Health* (Bailiwick of Guernsey) Law 2010 will, hopefully, come into force on 8th April, and I think that is a significant point to make about the names of the Laws that we are working to. The first one was a mental *treatment* law and now, thank God, we are getting to a mental *health* law and I think that is more significant than just a couple of words on a piece of paper.

1655 Sir, a lot has changed since 1939. Not so long ago, people suffering from disabilities, especially mental illness, were destined to be cared for mostly in institutions out of sight from the rest of society. They became institutionalised and, as a result, the majority of them were not able to return to live within society. Out of sight, out of mind. That is what we have had, not just in Guernsey but throughout a lot of western Europe and that is why, to my mind, mental healthcare has lagged behind what is needed... because the problems have been locked away out of sight. So mental health has been neglected for far too long. Now international surveys show that, as has been said before, 1 in 4 of us will experience *some* mental health problem at some time in their lives. More importantly, 1 in 10 of us will experience some medium or serious mental health problem. In fact, across all age groups – that is, from children through to aged people – and all the health services that are being provided on the Island, there are between 2,500 and 3,000 referrals every year for treatment of one form or another. That, to me, when I first heard those figures, was quite concerning. I had not appreciated how big the problem was, but this just goes to show how important mental health treatment within a planned strategy is for our society, and for all of us individually. Mental health problems have, or will, affect us all or someone close to us during our lifetime.

1660 Now, sir, this new Health and Wellbeing Strategy aims to change our attitudes and bring a higher profile for mental healthcare in Guernsey and, to my mind, there are three main strands to the Strategy, basically: early intervention; care in the community; and what has already been touched on, a multi-agency approach.

1675 First of all, I would like to deal with early intervention. This depends on people being able to recognise that they or friends or family have a problem and they are able to seek assistance. This, in turn, depends on education and on recognising the need for help and knowing where to turn and

1680 being able and willing to access the help without fear of stigmatisation. Access via the Primary
Care Wellbeing Service has been recently introduced, as has been announced, and is working
extremely well because people are not so concerned about talking about these problems with their
own GP. It is not something special to be worried about, to fear, to be really concerned about. You
go and talk to your GP about it. At the end of the day, early intervention should lead to earlier
treatment and more effective treatment and a higher incidence of successful treatment so that
1685 people can return to normal life in society. That, in effect, is working with greater efficiency, not
only in terms of the costs but the outcomes because efficiency is not just about costs, it is about
outcomes and early intervention is going to, hopefully – and I am pretty sure everyone concerned
believes it so – early intervention *will* improve outcomes.

1690 Secondly, the other point, the second point I raised was care in the community. Sir, care in the
community helps to promote the fact that many mental illnesses have a cure. You do not have to
be locked away because there is no cure. Treatment for a mental illness, in the same way as a
treatment for a physical illness, is effectively acknowledging the fact that, in many instances, there
is a cure. That will take away some of the stigma and will also take away some of the fear of
1695 approaching the right service for assistance. Or at least, if there is not a cure, at least we can learn
to live with most of the mental health problems which beset us. For older people suffering the
early onset of dementia, it is important for them to retain their links with their friends and family
and their day-to-day routines. We do not want any more unnecessary institutionalisation. Care in
the community provides us with a rare win-win situation. People prefer it and, in the long run, it
should prove cheaper to provide the necessary care. It is not often we get a win-win like that, so let
us capitalise on it.

1700 Thirdly, from my point of view, what is really important is the multi-agency approach. This is
vital to the whole Strategy. Without effective co-operation between all Government Departments,
the independent medical sector, the third sector and, importantly, business, the Strategy will not
succeed, as Deputy Le Lièvre has stated. I do not share his fears at this stage, but it is vitally
1705 important that we get this multi-agency approach. We need to get across the message both in the
political sphere, in the social sphere, in the economic sphere, in relation to productivity in the
workplace, that mental health is everybody's business. There are some examples of where we have
actually been making progress in those areas. HSSD, SSD and the primary care practices have
jointly introduced the Primary Care Wellbeing Service, as has been mentioned. That is aimed at
treating depression and anxiety. We have used, amongst other treatments, cognitive behaviour
1710 therapy. There has been an 18-month trial on that. That has been extremely successful and, as has
been said, about 1,200 referrals a year through that process... The feedback shows that it has not
only been successful, but patients do not feel stigmatised as a result of seeking that assistance and
it has helped secondary care to concentrate on more serious cases which only they can deal with.
1715 Secondly HSSD and Housing Department and the Guernsey Housing Association have been co-
operating on providing extra care housing, more care in the community and also leading on
introduction of lifetime housing standards to enable people to stay in their own homes for longer.
Education has a pilot project working with CAMHS to identify children in need of help and
support, and that support is going to be able to be provided early on, to prevent exclusion and to
prevent more difficult problems developing.

1720 The third sector: well, the Guernsey Mind Employment Project, to promote best practice for
employers, including training packages for employers, has been very successful and that needs
more support from us all. We have mentioned the Mental Health and Wellbeing Implementation
Board and I accept Deputy Le Lièvre's comment about its title: it is not terribly catchy, is it? But
1725 that is going to be made the anchor, facilitating better inter-agency working and including
employers who have so much to contribute to this Wellbeing Strategy, in creating a fully inclusive
society and combating stigmatisation.

So, sir, I am not just asking for everyone's support for this Report, I am really asking for
everyone here... for their commitment to making the inter-agency working successful and to
1730 ensure that the Departments you work with go out of their way to support this Mental Health and
Wellbeing Strategy, wherever possible, because this it not just a report that we are debating today,
it is a Strategy which we need to implement and we all need to bear that in mind when we are
discussing matters that are affecting our own Departments or our relationships with third sector
agencies. So, please support this Report but, more importantly, support the inter-agency working
by ensuring your Department gets involved and supports what we are trying to do.

1735 Thank you, sir.

The Deputy Bailiff: Deputy Bebb, to be followed by Deputy Lester Queripel and then Deputy

Paint.

1740 **Deputy Bebb:** Thank you, Mr Deputy Bailiff.

Members will be in no doubt, having read even the short Report included in the Billet, that the subject of mental health is wide ranging. The sheer diversity of subject matter that most people approaching me on this Billet... has astounded me, and the silence of other areas has been deafening. The Strategy shows a comprehensive approach that HSSD can take in relation to this

1745 multi-faceted problem, one that manifests itself in so many members of our society but is still the illness that we dare not speak its name.

I remember a wonderful film as a child, located on Brighton Beach in Brooklyn. The film, based in the 30s, portrayed the life of one Jewish boy struggling to come to terms with life as he grows up in an overly populated house. I will never forget the scene where his mother and aunt are sat by the kitchen table, preparing food and talking about various friends and acquaintances. On each occasion that they talked about someone who had died, or who was severely ill, they would whisper the name of the disease, afraid to say the word out loud in case God would hear them and smite them with the same affliction. Watching the film in the 80s, it was a moment of great hilarity, well made and acted but, of course, this persisted with certain diseases for a number of

1750 years. Many of us will remember similar attitudes towards cancer not so long ago, but mental health continues to carry that stigma. We sometimes joke about people needing 'happy pills' and if they are a little too tidy we might poke fun that they have OCD, but the reality of discussing schizophrenia, bipolar disorder, personality disorder, bulimia and anorexia, self harm or severe depression still enters that category of hushed tones and whispered utterances.

It is depressing to note that the vast majority of cases concerning ill mental health in Guernsey are as a direct result of neglect or abuse as a child. The children, in turn, growing up to be parents and committing the same to their children is a well-known and self-perpetuating cycle of neglect, abuse and mental disorder. If we, as a Government, want to see long term benefits to the Island as a community, we must start by developing services to target those families that need assistance to overcome these circumstances. Early intervention in family life and assistance for those families that need it is evidence to drastically reduce the rate of abuse and neglect that then, in turn, will reduce the number of people being seen for larger mental health issues. This break in the cycle could not only reap great benefits for the individuals but it would also ensure a reduction in demand on the services of HSSD, SSD and Home, in particular. This could reap long-term cost reductions and ensure greater wealth on the Island. To continue on our current trajectory is to state clearly that we can afford to pay for neglect and abuse with expensive mental health services for our community. Surely we are better than that and should encourage early intervention services, such as nursery care and pre-school arrangements, as the cost of developing that type of service is much cheaper than funding the continuation of abuse and neglect.

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Members may not have read the full research Report on Mental Health and Wellbeing in Guernsey and Alderney but I would recommend that they grab a copy and turn to page 61 of that Report. There they will find startling evidence of the efficacy of the Child and Adolescent Mental Health Service and its outreach team that was established in 2011. The numbers clearly show that, in 2008, 2009 and 2010, the average number of off-Island bed days per annum was 1,508, coming in at an average cost of £922,376 per annum. In 2011, the first year of the outreach service, bed days off-Island were reduced to 615, with a price tag of £376,683, an outstanding reduction in cost. Here I cannot help but indulge in my *schadenfreude* again and advise Members that there is currently no primary care mental health service associated with the Child and Adolescent Mental Health Service, such as the service currently funded as a pilot by Social Security. Given the resolutions of the FTP debate, no such service can now be started without making sufficient cuts to HSSD's existing budget, therefore an opportunity to further reduce the cost of expensive off-Island placement is curtailed. No doubt, we will be passing this Strategy today but when will we find Members willing to put their money where their mouth is and end this short term nonsense that is paralysing service development. No new services on this occasion will come with additional costs.

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Whilst on the subject of costs, it is estimated that Guernsey incurs £40 million annually in costs attributable to mental health absenteeism. A call to action from all of us and surely a call to action for all employers. Page 92 of the main Report, discussing workshops held with local employers, states:

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'Employers who attended the workshop indicated that they do not know enough about employment impacts on wellbeing and mental distress.'

1800 Given this statement and the importance of increasing productivity for our Island economy, I will be investigating, with other members of HSSD, the possibility of developing a general management course that could be made available, through the Institute of Health and Social Care Studies, to the business community. We have the knowledge and the skills to assist the private sector and we should recognise the opportunities that are made available to us through this Strategy.

1805 I now turn to the section on mental health and criminal justice. For too long in Guernsey have we been silent on the current practice of sending people with mental health disorders directly to prison. Sentencing mentally ill people to prison does little to improve crime on the Island, little to deter the person from repeat offending and the most likely outcome is simply to cause an increase in the complexity of the mental illness. This, in turn, results in reoffending or, finally, admittance into an expensive HSSD facility, either here in Castel or, at even greater cost, off-Island. Much is to be complimented on the improvement of mental health services offered in the prison, but there is much work still to be done to ensure that we improve peoples' lives sufficiently and reduce recidivism in the criminal justice system.

1815 The Mental Health Law coming into effect on 8th April this year, should Members agree, will allow the judiciary to dispose of people with mental health disorders into appropriate mental health facilities and I sincerely hope that we will see a change in current sentencing practices in line with the recommendations from the multiple agencies that advise the Courts. But the damage that is done by our current short-term prison sentencing can not be overstated and current provisions for community sentences, with a mental health treatment requirement, is little used by the Courts. I urge the Minister of HSSD and the Minister of Home to give careful consideration to page 155 of the main Report so that they understand why there is no procedure in place to support this style of sentencing and then promote its adoption, given that it is viewed as the best course of redress and that it comes with a potential saving of £20,000 *per case*.

1825 The diversity of the subject extends much further. On Monday evening, at the St Peter Port Douzaine meeting, I was asked about services offered to former members of the armed forces suffering from post traumatic stress disorder. It was highlighted to me that some former members, having fought for Queen and country, are now facing great anxiety, as we are unable to deal with their cases on-Island. Recognition of the debt owed to the armed services should extend further than standing in sombre silence for a few minutes on Liberation Day and Remembrance Sunday. Members have the opportunity to commit to that in our next debate on furthering the 6B facility that is now proposed at the PEH site, to replace the Castel Hospital.

1830 We also face a great challenge with an increasing elderly generation. Dementia, in all its multi-faceted and cruel manifestation, robs people of their history, dignity and personality. I have seen, first hand, the cruelty of Alzheimer's, as have many more here. But this is the one area that we remain silent on. We are willing to talk more freely on the illness that affect the young and the working age but when old age arrives, who will speak up and ensure that we do not consign people to the dust heap? Last year, the former Board of HSSD closed two wards at the PEH. One resulted in delay to surgery and the other resulted in dementia patients having their services relocated. The outcry over the delay in surgery was deafening. Believe me, I was on the receiving end of it! But who here asked the question as to the provision and care made for those that had services relocated? I would like to assure all Members that the greatest care was taken and all family members were consulted before moving patients from Divette Ward. But who here asked that question? It is strange how the combination of old age and dementia results in being, as it were, behind a curtain, out of sight and out of mind. I do not wish to dwell too long on this and my intention is not to stand here with an accusatory wagging finger, but I would hope to nudge your collective conscience.

1845 Finally, I would like to return to my initial theme and talk about the stigma associated with mental health. In Wales recently, there has been a broad campaign called 'Time to Change Wales', a non-profit organisation working to break the stigma of mental health issues, posting stories from sufferers on social media sites and encouraging open discussion about mental health. One of their campaigns was to have a debate in the Welsh Assembly, where four members of the Assembly spoke candidly about their individual mental health issues, demonstrating to the community that mental health issues are not a barrier to public life. One in 4 people, as has been said before, in their lifetime will suffer from a mental health issue. That means that in this Assembly 12 of us will suffer from mental health issues in our lifetime. I can confirm that I am 1 of those 12 – which rather improves the chances of the rest of you, as I am sure you will be glad to hear! (*Laughter*) I suffer from depression which intensifies in the winter months, part depression, part Seasonal

Affective Disorder. Depression does not mean that you feel ‘low’: it goes much further. Winston Churchill once said of *his* depression:

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‘I do not like standing near the edge of a platform when an express train is passing through. I like to stand right back and, if possible, get a pillar between me and the train. I do not like to stand by the side of a ship and look down into the water. A second’s action would end everything, a few drops of depression.’

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Personally, I can confirm that walking around St. Saviour’s Reservoir has a similar effect. Thank God, we do not have trains in the Island!

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There is also the consuming anger and occasional bouts of uncontrolled crying for no apparent reason. For many years, I believed that my emotional response was perfectly normal and that I was simply a little angrier than other people. Many a job have I had the joy of being enraged as to my boss’s actions and had great arguments with them. But you try explaining to your boss that you are shouting because it is January and you forgot to take your pills... Somehow, the accusation of having an attitude problem is more comfortable. No surprise that my annual bonus was never that great, given the correlation of winter and our culture of awarding bonuses at that time of year.

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Eventually, I was diagnosed with depression and offered pills. Fortunately, I questioned the wisdom of my GP in reaching so quickly for the prescription pad and went home to do some research. I now manage my depression with a combination of factors. Every now and then I still notice that I get overly angry for no apparent reason. Every now and then I feel the urge to cry, usually on the last Wednesday of the month. (*Laughter*) On those occasions, I know that I need to up the dosage. Then there is the opposite side, where I feel hyperactive and decide to start cooking or baking at some ungodly hour of the morning and realise that it is time to reduce the dosage! But these occurrences are now reduced to half a dozen occasions a year, as opposed to a daily grind of attacking friends and colleagues. I am now in a position to state that I live with depression and manage it very well. I am not sure that being a Deputy would be classed by all as leading a productive life but the cycle of self-destruction that I seemed to be so busy justifying is now over.

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It was years before I received diagnosis despite, in hindsight, the very evident behavioural oddities that I displayed. We need to educate people as to the manifestation of mental illness and anxiety so that a caring piece of advice is given, rather than a round condemnation. It is interesting that so many people that we revere for their lifetime achievements suffered poor mental health. My personal heroes include Beethoven, who had bipolar disorder, as does Buzz Aldrin; Jack Kerouac had schizophrenia; Donald Trump has obsessive compulsive disorder, as did Albert Einstein. Both Theodore Roosevelt and Winston Churchill suffered depression. We should recognise mental illness for what it is. It is a *hurdle*. For some the hurdle is high that it will never be surmounted, for others, with assistance, the hurdle can be reduced and for many the hurdle can be removed. It is not a barrier unless we make it one. A famous American psychologist called Rollo May once said that ‘depression is the inability to construct a future’.

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Today we are asked to start constructing a future not only for the people who currently suffer mental health issues but for the whole community. Therefore, I would urge all Members to embrace this Strategy wholeheartedly and ensure its consideration in all aspects of our future work.

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Thank you. (*Applause*).

The Deputy Bailiff: Deputy Lester Queripel, are you likely to be longer than about 12 minutes. (**Deputy Lester Queripel:** No, sir) Thank you,

1905

Then Deputy Lester Queripel.

Deputy Lester Queripel: Sir, I am sure there are one or two Members of the Assembly who would like to see me committed, but the good news is I intend being around for a few years yet. Because I am in a privileged position of Deputy, I can ask the questions that need to be asked and I can say the things that need to be said.

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There are some wonderful words to be found within this Strategy – words such as ‘promote’, ‘provide’, ‘protect’, ‘improve’, ‘ensure’, ‘support’ and ‘address the needs’. But I sincerely hope that, by signing up to this Strategy, we do not just sign up to the words, we sign up to the *actions* needed to implement the definition of those words.

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I have worked as a part-time carer here in the Island for almost a year, but I eventually resigned in frustration because I saw flaws in the system and areas where improvements most certainly needed to be made. But the predictable response was that we do not have the money. I was not the only member of staff to be frustrated because many of my colleagues at the time were equally

frustrated. I am only too aware that paragraph 171 on page 266 tells us that

1920 'there may be'

– there may be –

1925 'a requirement for additional resources.'

Paragraph 172 tells us that

1930 'One of the criteria by which the successes of the Strategy will be measured will be keeping the level of additional resources required [...] to an absolute minimum.'

In relation to off-Island placements referred to as a priority in paragraph 128 on page 254, we are told that

1935 'Reliance on off-Island placements should be reduced, and long-term outcomes should be improved, by:

- Improving local skills;
- Engaging in strategic partnerships with specialist providers [...] and
- Improving access to rehabilitation and recovery.'

1940 My brother, Deputy Laurie Queripel, and I have asked several questions, enquiring whether or not we can bring some of our fellow Islanders placed off-Island back home and the response has always been the same predictable response. The answer has always been that it would cost too much money to bring off-Island placements back home. So I suspect extra money *will* be needed so I would like the Minister please to give me his thoughts on that issue and how the intentions will be realised without additional funding being needed.

1945 I do have various other questions relating to mental health issues that have been brought to my attention by three fellow Islanders but I will be submitting those to HSSD under Rule 6.

To conclude, sir, I will finish with a plea, that we please do not simply sign up to the words but that we commit ourselves to the actions needed to follow up.

1950 Thank you, sir.

The Deputy Bailiff: Deputy Paint.

1955 **Deputy Paint:** Sir and Members of the Assembly, I do not have too much of a problem with what has been put forward in the Billet on the Mental Health Strategy. I do have a bit of a problem with what I believe has been left out of the proposals.

1960 Under the present Law there is an ability for an independent assessment by Parish Constables of a patient's needs and requirements under the Mental Health Law. Although there is a provision for an independent Tribunal under the new Strategy, I have to ask who will determine if it is necessary for a Tribunal or not? Is it professional staff who are all States employees, or can it be requested by the patient? I do not believe that this particular issue is as open and transparent as it might be. Patients who may be suffering from troubled minds may, by the nature of their condition, not be in a position to understand the ramifications of a Tribunal and, therefore, may need an independent person to represent them and their views and their interests.

1965 It is clear that if it is just mental health officials who are deciding, and not some independent scrutiny regarding the patients facing assessment, then the outcome may not be in the patient's best interests in the long term and could result in problems for them further down the line. As a Constable, and having called been called upon to conduct many assessments on behalf of patients in the past, I am aware, from that experience, of a number of aspects that this Assembly may not immediately recognise, some of which I would like to discuss. If, for instance, a patient has very close family or friends who will be acting on his behalf or her behalf, there is no need for a constable or an independent person. However, some family and friends have been very reluctant to become too closely involved in the past.

1975 One of the reasons for this is they are fearful of possible repercussions if they made a decision which could be considered against the will of the patient. I believe that some of these families and friends were quite relieved that the Constables were on hand and were prepared to make that decision on behalf of the patient. What should be understood is that many families or friends have no experience of mental health and are usually completely shocked at the events that are unfolding before their eyes. Of course, it is often the case with families that they are also very reluctant to

- 1980 make decisions on behalf of their loved ones for fear of getting it wrong.
- 1985 My other concern is that, of those people who have nobody – they have no family, no close friends and could be considered as loners – they will be completely left out if there was not independent advice and help from somebody completely outside the Health Authority. These unfortunate people may not even know they are at any stage of a mental illness but they may be very frightened and feel that they only have HSSD’s staff to speak to, who the patient may consider to be biased by the fact that they are all mental health officials. They may be the guest workers who have poor knowledge of English and themselves be in exactly the same position.
- 1990 If a patient is on their way without any family or friends, as I previously referred to, to look after their interests, they could be in a very distressed experience indeed. You might think I do not have enough trust in this Strategy. Well, that would not be true but there are so many personal tragedies in this kind of illness for families and others connected who have no experience of mental health issues, there must be some provision for some independent scrutiny of the system.
- 1995 In summing up, I will ask the Health Minister to give the Assembly some assurance that there will be a provision of an independent representation for patients in this new system and that the close monitoring of the patients’ interests will be a matter of regular review by people other than mental staff and officials.

Thank you, sir.

The Deputy Bailiff: Thank you, Deputy Paint.

- 2000 Well, it is as close as may be to 12.30, so we will take the luncheon adjournment now and resume at 2.30 p.m.

*The Assembly adjourned at 12.29 p.m.
and resumed its sitting at 2.30 p.m.*

2005

Billet d’État III

2010

HEALTH AND SOCIAL SERVICES DEPARTMENT

Mental Health and Wellbeing Strategy

Establishment of Mental Health and Wellbeing Implementation Board, approved

- 2015 **The Deputy Greffier:** Debate resumes on Billet d’État III, Article V, Health and Social Services Department – Mental Health and Wellbeing Strategy.

2020 **The Deputy Bailiff:** Deputy Adam and then Deputy James are the two that have caught my attention.

Deputy Adam: Thank you, sir.

First, I would like to say what is a Strategy? What is the point of this document?

- 2025 I first saw the document in original format in July 2012 – and it is a huge document, it has got all the information how the Strategy... This is what it has been formed from. This document in itself is not a Strategy and I should apologise to some of the officers who were dealing with it at the time because I did give them a bit of a hassle and a hard time. But I think it was very effective because, as Deputy Le Lièvre said, this is a *stunning* document. What you have here is a lovely point from cradle through grave. Not just mental disease or conditions in what you might consider to be defined mental illness – it underpins the strategy that will underpin these services for those experiencing mental health problems – but it is also about mental wellbeing. Mental wellbeing: much more difficult to define than a mental ‘disease’ where you can put a label such as schizophrenia or depression or other titles to, much more difficult. That is why it is so wide-reaching, describing what might be considered almost aspirational or idealistic support and intervention for the potentially vulnerable.
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It is vital, in my opinion, that this Strategy is brought to this Assembly so that all the Members of this States of the Deliberation understand where the professionals feel the treatment and

management of mental health and wellbeing *should be going* – should be going. It is a long-term document, high quality, but it depends on co-operation between Departments. I do not want lip service. I want people saying: ‘Yes, we have read this document. Yes, we believe it is the correct way forward. Yes, we accept that we may not be able to introduce every aspect of it in the next six months or the next six years but it is where we should be aiming.’

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2045 It is evidenced-based. Yes, it has been criticised because a lot of the evidence is from the UK but, unfortunately, we do not have sufficient population to give us sufficient statistics concerning individual diseases or conditions. Therefore, in my opinion, the work actually starts now, the implementation of this Strategy in its various forms. You have seen some of that already, sir, because there has been interaction between the SSD and HSSD that started approximately two years ago with a pilot study of the psychological service being provided within the general practices, taking the stigma away of having to go through Castel, providing them in an area, in a vicinity that they feel comfortable with, to get help and support.

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2055 Psychological, basically, means ‘talking therapies’, not necessarily drugs, helping people to cope and understand their behaviour patterns, to stop them going down the road of significant stress, to try and stop any progress into depression. So it is not surprising that about 90% of these people actually are in employment, they have not stopped work. We heard from the Minister of SSD, the Minister of HSSD, what a wonderful scheme this was. Deputy Martin Storey, Deputy Minister of HSSD said what an excellent way of providing a service. It was a pilot: what was it to do? It was to show, possibly to T & R, possibly for the Members of this Assembly that, if we spent £250,000, you actually saved money. Yes, you also helped a lot of people at a time when they are down and needed a helping hand up, but nowadays, with money being *so important*, FTP being so important, that seems irrelevant. Sorry, but this is not irrelevant. That is the whole part of treating people, helping them to cope with life and getting better. So when the Deputy who is standing at the back of the Chamber, sir, stated in his speech – an excellent speech, I might add – that they are going to pull the rug from under this treatment, they are going to stop it because, if HSSD take it over, there is going to be a ‘new’ service. How can something be a ‘new’ service which has been in place for two years?

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2065 Yes, we have got problems with the funding but what does it save? It saves funding from SSD and from their pots. All the money is from the same source, is it not? It is from the taxpayer. So, therefore, should we be saying ‘Well, we can save money there but this Department here is going to have to spend what they are saving in that Department’? Sorry, sir, I think this should be accepted as a *very worthwhile project* and should be allowed to continue once it has been assessed fully. It is only eighteen months down the road and it is meant to go for two years. I will say, if you stop that, I am afraid to say – I may have picked it up wrongly but I am sure Deputy Bebb said quite clearly – that it was at risk.

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2075 The next thing I must mention is Deputy St Pier. He made a very pointed comment in his speech, saying that this is a Strategy without resources, that T & R were persuaded by the then Minister of HSSD that it did not require resources. Why did the then Minister of HSSD say that? Well, because, sir, this is a Strategy about mental ‘wellbeing’ as well as mental ‘health’. It starts at the cradle and goes to the grave. If you ask any headteacher of any primary schools, they will be able to tell you the children who are at risk at the age when they come into that school. At risk and need support. Actually, if you ask any midwife who looks after a mother who has just had a baby for about six weeks, she will have some idea of the potential risk factor. If you ask any district nurse, likewise.

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2085 So the problem is we have got people who have an excellent ability of identifying, potentially, young people at risk at an early stage and what we have to do is make sure we have a golden thread that runs through the different care agencies and information is passed on to ensure the support is still put in when necessary to ensure these children and young people do not go down the road of developing potential problems in relation to mental wellbeing.

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2095 Another aspect which is more recent is neurological development. If you take a baby and you take it swimming at the age of four or five months and it does not float when it puts its head under water, it soon learns not to breathe under water. If you leave it until later, the ability is less well defined. So, basically, what they are suggesting now is that all babies have the similar potential and it is important that the inputs are addressed at each stage of development. So if a child of one or two does not learn what is right and what is wrong, when they get to five or six, they may still not have had it well embedded in them what is right and what is wrong. And this is what I am talking about mental wellbeing, how they are brought up.

Deputy Le Lièvre once said in a talk that you cannot expect these people to behave the same way as you do because they have a different rule book. I always remember him saying that and it

is so true that, if they do not have the input early on, they will have a different rule book and behave in ways which we might say are more proper of, whatever you like to say, 'civilised' people – I do not like that word – might expect of them. So that is why this is so important.

2100 Again, I am sorry to keep quoting Deputy Le Lièvre but he did an excellent speech, as well, remembering the last States meeting, he mentioned the Older People's Strategy and that should have been brought probably before the HSSD and Housing Report on Extra Care Housing because the Strategy had *not* been accepted by this Assembly. That is why a Strategy is so important.

2105 I accept implementation *is* the crux and, yes, Deputy St Pier it may be then that some people will come looking for extra funding or resources but, first of all, there is a lot of work to do and a lot of that work has started. If you speak to... [*Inaudible*] charitable organisation is working with Salvation Army to provide drop-in cafés etc. That has been very successful in getting out of attending the Castel Hospital. If you look at Headstart, another charitable third sector organisation that helps to meet the people in their own homes to give them that 'granny' or 'senior' support, without being attached to something horrible called the States and States funding. So a lot of things are happening in the way that the Mental Health are working at the present time: much more inter-community, much more care in the home. That is being developed and the teams are being developed already, but what is imperative is that this Strategy is accepted by this States of Deliberation and we can then, or should I say, HSSD can then, move forward with it. I know the civil servants who are responsible for Mental Health are keen to progress things in a very constructive manner and I personally, would like to thank them most gratefully for such an excellent, well thought out, easy to read document, which is robust and can stand the test of time over the next ten years.

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2115
2120 Thank you, sir.

The Deputy Bailiff: Deputy James – if you just pause briefly.

Deputy James: Thank you, Mr Deputy Bailiff.

2125 As Members of this Assembly know probably by now, I am the only registered mental health nurse in this Assembly. I spent thirty-six years working for both the Board of Health and Health and Social Services and for that I am extremely proud, in giving my professional knowledge and expertise to that service.

2130 I would like to start by reiterating what a number of people have already said and that is the recognition of those staff. At the risk of embarrassing him, Adrian Datta has worked incredibly hard in putting this Strategy together and I personally thank you very much, you and your staff, (**Several Members:** Hear, hear.) (*Applause*) for having achieved that.

2135 I would also like to take this opportunity to both acknowledge and thank all the staff that I have worked with within the mental health services over the years doing their best in far from ideal circumstances at the Castel Hospital, knowing only too well we were very much, to use an old expression, the 'Cinderella' service. I recall the days when I started out in nursing that learning disability was the service that was badly funded, and you had mental health nursing and then general nursing. So that was the order of priority. Then what was interesting, what we saw in the UK, the various personalities, various celebrities who took on the cause of learning disabilities – and I am thinking, in particular, of a comedian/actor called Brian Rix, who had a daughter with a learning disability and he championed quite heavily on behalf of learning disabilities – and what we saw, interestingly, was that learning disability services actually leap-frogged mental health services in terms of funding.

2140 Interestingly, we also saw that in Guernsey. That is not a criticism, but that is reality. I think that what we learned from that is that if you can get a celebrity, a champion, on board it certainly helps your case. So it is also to recognise all the efforts that staff within the Mental Health Services have done, either on an individual or collective basis. I have every reason to be thankful to the Board of Health and Health and Social Services for the support that they have given me, as an individual, in terms of funding my professional development and further training and for that I am very, very grateful. I would also like to reassure you that, despite working in a bit of a decrepit building at times, I can absolutely assure you that the service delivered did not mirror the old-fashioned building and I will just use one very, very brief example.

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2155 I was very fortunate to have won the Insurance Corporation of the Channel Islands' very first bursary quite a way back now, their very first one, and what I did with that money was – I was currently setting up Guernsey's Alcohol and Drug Advisory Service here – I went to America to look at some treatment centres, to identify so-called centres of excellence and best practice. The one thing that I learnt – and which surprised me while I was in America – was that I was talking to

2160 staff there about the home detoxification programme that had been introduced in Guernsey and I was very, very proud to be leading on that. When I was explaining to them what it involved, they were absolutely fascinated to learn about what Guernsey was doing. They never envisaged that they were able to introduce such things as home detoxification programmes because their insurance in America was based on bed nights, hospitalisation. So let us not think that Guernsey is way behind the rest of the world in its delivery of treatment. We have seen some very impressive initiatives that have gone on within the mental health services and that is down to the individual staff, as opposed to the funding.

2165 I was not alone in knocking at closed doors for many, many years regarding the Mental Health Act and the building of a new facility. I have been involved in many discussions over the years, ploughing over building plans – all of which never came to fruition – lots and lots of discussions about the Mental Health Act and reviewing that. We have heard from a number of speakers that we have been working on the basis of a 1939 Mental Health Act, which is, indeed, scandalous: we
2170 heard Deputy Paint talk about people under section. I, as a ward sister in the Acute Mental Health Unit, had to care for, and support, patients who had been sectioned in hospital with no right of appeal... utterly, utterly, scandalous. Inexcusable, indeed!

2175 So there are just a couple of things that I would specifically like to focus on in the Strategy – Deputy Hunter Adam said it is not a strategy. Do you know, I for one, do not care what you call this document, as long as you all support it! (*Laughter*) Deputy Paint mentioned the issue about advocacy and let us not lose sight of how incredibly important it is for people in duress, adverse conditions, to have independent advocacy... and independent advocacy is so important. Within the new Mental Health Act – and excuse me if you think I am straying – the social worker is the one that makes the application. There is an essential difference between social workers in Guernsey and social workers in the United Kingdom. Social workers – ‘approved social workers’ is what their official title is – approved social workers in the United Kingdom are employed by Social Services. What you have to remember is that social workers in Guernsey are employed by Health and Social Services. So there can be questions asked about the independence and I think – correct me if I am wrong – but I think that was what Deputy Paint was alluding to this morning.

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2185 Most of my career in mental health has actually been involved with adults. I came to Guernsey as a ward sister on an acute unit, I then moved on and was very fortunate to be seconded by Guernsey – the first nurse to be seconded by Guernsey – to Manchester University to do my Community Psychiatric Nursing Certificate. I came back and set up that service a number of years later. I was fortunate enough to be in a position to set up the Drug and Alcohol Service, ably assisted by the Insurance Corporation of the Channel Islands, as I say for which I am extremely grateful.

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2195 Within the Strategy what I would like to do is focus on the section involving children, perhaps *the most vulnerable* in our community. When you look at the *extreme* pressures that our children and young people are subjected to in this day and age... I have never been a parent but every one of you in the room that is a parent, I think you are wonderful because I look at the external pressures that you and your children must be subjected to and I do not know how you do it, so to speak. I look at things like the very early pressures and the sexualisation of young girls, the media pressure on young men and girls, boys and girls, on their self-image, their self-confidence. It is not surprising you can see the greater emergence of eating disorders. So I am very, very conscious of the pressure that very young people are subjected to, not least you look at cyber bullying and things like that. So there are a multitude of problems that young people are faced with coping with in this day and age.

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2205 I was very fortunate to be invited down to the Youth Project Guernsey, run by James St Pier in collaboration with Dr Barnardo’s, last week and I was incredibly impressed with the work they are doing. I was talking through some of the problems that they are faced with and thinking about that as a project, looking at the Association of Guernsey Charities presentation that some of us went to last week which flagged up the potential, and the need, for public and private sector and voluntary sector working together, I think there is a great opportunity. The reason I say that is, by and large adults know how to access services such as Mental Health Services. By and large, it is via a GP. You think, if you are a young person – 13, 14 whatever – having problems, worried about who you can talk to, you cannot access your GP (1) because there is a payment and who would pay it? Your parents – bang goes all your confidentiality. So what I would say is let us give a big, strong focus on young people being able to access services without having to go through the formal machinery of referral. It is really important and I think the two tiers that come... the Child and Adolescent
2210 Mental Health Service highlighted on page 243 as Tier 1 and Tier 2 level. I think that those services could, and should, be provided through services like YPG.

2220 I cannot remember who it was... I think maybe it was Deputy Hunter Adam made reference to
‘robust data’ in Guernsey. It is so important for us to be confident of the data that we receive and
one interesting thing that I have learnt since being on the Board of Social Security is that
somewhere around 450 medical certificates are received each week by staff at Social Security.
What the staff did for the Board was to list all the diagnoses that come in these medical
certificates. Well, I was perplexed – and I am sure the rest of the Board Members were – on the
wide diagnoses that GPs put on medical certificates and the sooner we get to a position of
2225 clinically characterising diagnosis, we will never know the scale of what level mental illness is
within the Service, we can only make second guesses. When you get a diagnosis on a medical
certificate of ‘mental illness’, ‘schizophrenia’, ‘depression’, ‘bipolar’ etc. etc, to me they are all
mental illness, so it is very, very difficult to actually determine what the level of mental illness and
mental health problems are in this Island.

2230 I think I am only left to say that I applaud Deputy St Pier’s story this morning. It is only
through honesty, or disclosing things like this – and I am thinking of Alastair Campbell in the UK,
he has been a really very good and positive champion about mental health and mental health
problems. After he told his story in the House of Commons, there were other backbench MPs who
had the courage to stand up and talk about their mental health problems, so it is important in order
to de-stigmatise mental health and mental health problems.

2235 Finally, what I would like to say is to recognise these charities, these people that work in the
third sector, for the amazing work and support they do. So, in conclusion, I would, if you like in
memory of my career in Guernsey, I would say thank you for all the work that has been done by
the staff in the past, as I said in less than ideal conditions, and I am absolutely convinced that all
the staff, and I would hope all the Members of this Assembly, will support this document one
2240 hundred per cent.

Thank you.

The Deputy Bailiff: Chief Minister, do you want to speak before Deputy Gollop?

2245 **The Chief Minister:** No.

The Deputy Bailiff: Alright, we will take Deputy Gollop first, then.
Deputy Gollop.

2250 **Deputy Gollop:** Thank you, sir.

We have certainly heard some moving and inspiring speeches this morning. The only point that
I would slightly challenge Deputy Bebb on was that he made reference to when we went through
that difficult period, Christmas last year, about HSSD’s emergency programme. He suggested that
2255 most Members were not particularly concerned about the movement of patients with dementia but,
in fact, I recall being concerned about it, raising a point and I definitely remember Deputy James,
whose specialism is in that area and she has a far greater knowledge and understanding of those
issues than I do... Nevertheless, his general point that the context of people with mental conditions
are often less in the public eye than people with physical operations is a valid one and this Mental
Health Strategy will do a lot to overcome this, as will the work that Social Security is funding that
2260 Deputy Adam referred to, of the ‘talking therapies’ which, perhaps, have been underplayed in
Guernsey in recent times.

I, too, over the years have had my ups and downs and have appreciated the help of a variety of
therapists, including people in the Health and Social Services Department. Indeed, there is a grey
2265 area where, for example, depression, bipolar, mood swings end and conditions of the personality –
somebody who is differently wired, somebody who might be considered eccentric – start. And I
think I, as disabled people’s champion, have become more aware than even I was a year or two
ago, of the enormous number of people of all ages, but especially children, of *all* backgrounds, not
just those that would be socially needy, who may have issues like autism, ADHD and other
conditions that are not even, to put it simplistically, ‘mental health conditions’ but nevertheless
2270 require guidance and assistance. That is an overall context.

I will come on to one or two weaknesses of the Report... If there is a grey area at the moment
– and Deputy James actually touched on it with her insightful speech – it revolves around quite
where we are going in co-ordinating the voluntary, the third, sector that Deputy Le Tocq has
flagged up several times in the past week in relation to Health and Social Services Department and
2275 all the issues relating to that, like service level agreements, minimum standards, adequate
resourcing but, specifically, for example, how we are going to improve and enhance the excellent

work already being done by organisations such as Drug Concern, GADAC and, indeed, the work of the Drug Strategy. Although a person having an alcoholic or drug dependency is not, in itself, a mental health condition, there is sometimes a linkage and there is certainly a social outcome there. That is, I think, an area that we need to build on and I will come up with, perhaps, another issue at the very end of what I am going to say.

In broad terms, like Deputy Le Lièvre, Deputy Adam and many others, I thoroughly welcome this Report. All mental health users are anxious to see implemented an improved Mental Health Strategy – especially one that promotes, supports and acts to meet people’s needs – which is proactive, supports independence, Human Rights and employment opportunities, which is an issue that has been raised by MIND in recent times. Users I have met or have spoken to are generally supportive of the aims and content of the Strategy, although some have misgivings about over-dependence on pharmaceutical medical models, which I know is also a concern amongst some of the strategic thinkers here, loss of therapy at the day centre and a reduction in wellness in recovery centre facilities.

There is an uncertainty about change; there is a demand and a need for staff consistency which, of course, has a knock-on effect with pay and perhaps housing; and occasionally some concerns of an over-zealous but very well-intentioned no smoking policy, from some users’ point of view. There are concerns over parts of the Mental Health Law and a legitimate view that patients and service users need advocacy on a personal basis. That is to say, as Deputy James mentioned, you will actually have somebody who is completely independent of the Health and Social Services Department, for this to be facilitated by, but not provided by, HSSD; inter-departmental co-operation may mean active lobbying by Health and Social Services Department to doubters who involve other Departments – which might be Home, Housing, Social Security etc – about the real financial and lifestyle needs of service users.

All of us Members have a duty to ensure that such services and Mental Health Strategy is appropriately resourced and fully funded with a flexible budget, rising as legitimate demand increases. We saw that, last year, the Board were managing an increasing demand situation and ran out of the flexibility to fully resource that. We need to avoid that happening in the future. That said, I do entirely support the Social Security-funded cognitive therapy programme, which has been a huge success.

One positive aspect of this Report is the honesty by the Department, the candidness, shown towards emerging issues and current challenges, such as – and I will list some of them – the perceived lack of collaboration and joint working, on page 244, hinted at with Education; separate professional responses; off-Island returns and how to integrate them back into the community; extra care policies; the CAMHS service in its lack of resource for primary mental health workers; the extra care strategy for older people; employment opportunities for Mental Health Service users; the stigma that, regrettably, some service users feel when they are accessing mainstream health services; and charting facilities. The infrastructure for communitarian care at home independent living is just not fully there yet. In addition, my personnel such as... [*Inaudible*] and the group, have pointed out in the media the lack of support for mental health carers and this can, perhaps, apply in some cases to benefit recipients, too, but that is a workstream that Social Security are looking at.

The need to work together from a person-centred perspective, rather than based on an overly bureaucratic or protective of the taxpayer outlook, is vital for success, as is active partnership with service users and patient partnership. This Strategy is the right way forward. It needs money and flesh on the bone to work but is a key component of a modern, fit for purpose, Disability Strategy portfolio and the analysis in the longer Report, showing we have as many problems as other less privileged societies, is also well worth reading and demands longer study and resultant workstreams. However, one aspect of this Report that has not been discussed much in debate, or in the presentations, is one of the propositions, which is to create the Mental Health Wellbeing Implementation Board that Deputy Adam and Deputy Le Lièvre said was a rather quaint 18th century title. There is a sort of sense that it is about somebody doing something to somebody else there, I would admit, and my colleague to the left of me, Deputy Sherbourne, said why not just call it the ‘Wellbeing Board’. Maybe, that is the way forward – or a catchy name that Deputy Duquemin might come up with, better than that. (*Laughter*)

I very much appreciated not only the openness of Dr Datta and the team in meeting with us, attending public meetings and so on. I have sat on the Disability Sub-group and the Mental Health Service Users Forum that took place in both Deputy Dorey’s and Deputy Adams’ periods and that has been useful, but it is not entirely clear to me how this Board will work. Firstly, it clearly needs representatives of Housing, perhaps Education, Social Security, maybe Home, maybe Treasury

2340 and Commerce – because Commerce have to think about themselves as an ‘employment’ Department – but there is an implication here that there should be leading charities and third sector providers, MIND and various others, but also advocacy groups and persons representing service users. Service user involvement will be crucial here; a sense of ownership, which I believe goes on in some other jurisdictions.

2345 Also, what is the politicians’ role on this body? Would Ministers sit on it, Board members, backbench Deputies, the Disabled People’s Champion? I am not sure. And there is another issue here: a Board is a word that has a lot of meanings in Guernsey. We used to call them all Boards – Board of Health, Board of Administration – will it be a resource allocation Board with powers? This is not just an informal body, because we are voting on it today and, surely, if it has those powers and takes it from the centre, it should ensure that the financial and manpower resources, property resources, are in place to deliver this Strategy. It has to be more than just a dialogue centre or a talking shop. I want to hear more about how the Board will work before I am 100% convinced that is the right model to follow. Nevertheless, I will support this Strategy in full today.

The Deputy Bailiff: Deputy Harwood and then Deputy Le Tocq.

2355 **The Chief Minister:** Thank you, sir.

May I, first of all, join I think with most of the Members of this Assembly in congratulating HSSD on producing a well-researched and far reaching Report and Strategy, particularly by addressing the mental health issues across all age groups and across a number of different social situations, including those who are unfortunate to be imprisoned.

2360 As I said when I opened the speech in relation to Legal Aid, we must recognise – and I think we now all recognise – that mental health is no longer a subject that just impacts a few. The Report emphasises the importance of identifying and treating mental health problems earlier rather than later, nip the problem in the bud before it is allowed to develop. It is particularly disturbing to note from the Report, in my opinion, the numbers of young people, particularly those under the age of 16, who are referred to the Child and Adolescent Mental Health Service, an average of 34 referrals per month – one in ten. That is a statistic that, as an Island, we should be very concerned about.

2370 Sir, the Report correctly identifies a number of initiatives involving cross departmental co-operation that have already produced results. The Primary Care and Mental Health and Wellbeing has already been cited as one example, but for a small community such as ours the Report is also disappointing to note the number of instances where the Report identifies the lack of multi-agency and integrated care planning in the past as an obstacle. The Report is littered with such references. It is, again, very disappointing in a community such as ours that we should be in a situation where the Departments and different agencies have not been working effectively together. Having said that, I recognise the importance now of effecting and producing that degree of co-operation.

2375 I also commend the Report on identifying that this is a case where providing more effective multi-agency or multi-departmental working can make a positive contribution: the Report makes that absolutely clear. It is not always necessary, or necessarily particularly desirable, merely to throw money at a problem when, by more effective co-operation, cross departmental working and multi-agency working, you can achieve the same results, maybe even better results.

2380 Sir, the success of the Strategy and its implementation depends upon the development of further cross-departmental initiatives. The phrase that is often used is an expression, ‘cross-cutting’, where you are creating policies or initiatives that go across more than one Department. And the Report itself includes the recommendation:

2385 ‘To direct the relevant States Departments, including Home, Social Security, Housing, Education and others where appropriate...’

2390 to co-operate in the delivery of the Strategy. Can I say, on behalf of the Policy Council, Policy Council is committed to bringing about cross-departmental co-operation and, indeed, this is demonstrated by the debate last month, with Policy Council recognising the importance of such cross-departmental co-operation which led the Report of the HSSD 2020 vision.

2395 Policy Council, through its Social Policy Group, which is chaired by my colleague and Deputy Chief Minister, will monitor the delivery by each Department of its part in this Strategy. The Strategy requires, and is entitled to require, the commitment by the named Departments in its delivery. The Strategy, like many others that have been, and will be, brought to this Assembly, requires the adoption by Departments of a more corporate approach. And before hackles are raised

in this Assembly by what I mean by ‘corporate approach’, I mean the acceptance of the importance of doing what is best for the Island and not just what is best for each Department.

2400 I urge everybody to support this proposal.

The Deputy Bailiff: Deputy Le Tocq.

Deputy Le Tocq: Thank you, Mr Deputy Bailiff:

2405 We have heard some excellent speeches today in support of this Strategy. Deputy James, Deputy Bebb, Deputy Le Lièvre and Deputy St Pier particularly, I would echo everything that they have made in terms of comments, suggestions and support for this Strategy. I think it is excellent, particularly, to have a Minister for Treasury and Resources who is so clearly behind such a Strategy and I do believe that there is reason for optimism that we are in a different era when it comes to this particular Strategy.

2410 That is why it is important that we take this very, very seriously and even – if Deputy Le Lièvre will forgive me – we repeat some things, as the Report does, because the sad state of affairs is that some things have been forgotten for a long time, so they deserve repeating. It is also about us, corporately, learning to not put this issue on a shelf. When it comes to Reports such as this, it is easy perhaps to criticise them for being a strategy, a vision and what is there to disagree with? But this, I believe, goes way beyond just the ‘easiness’ that we might have from time to time of agreeing to certain proposals which are going to face us in a moment. Practical things are one thing, changing the way in which a whole society deals with an issue is another.

2415 I was heartened by the words that the Minister used in opening, where he talked about effective inter-agency working. But I would like to add to that, it is going to take more than just effective inter-agency, or inter-departmental, working, sir, because I believe this really requires every single individual in our Island community taking the matter of mental health and wellbeing much more seriously and much more personally than we have before. Deputy Le Lièvre ably illustrated the problems, the wider issues, that have been dealt with in the past and the problem of that continuing up until the present day and the ineffectual nature of that old approach to mental illness and the like. But, sir, things have been made worse, perhaps, from even when, in the past, where we have seen, in the last fifty years or so post-War years, a breakdown in our community. Others have hinted at that. They have spoken in that some of the problem with these issues that are dealt with in the Report are because we have an increased individualism in society: that has some benefits in some areas for focusing on the individual but, in other areas, it can mean that people are legally in a community, they say they are in a community, they are in a crowd, if you like, but they feel very much more lonely.

2420 When you are suffering from mental illness, that can be devastating and I have seen, wearing another hat, the results of that increasingly because we do have, sadly, fewer social institutions than we used to have before, that work. I am not just talking about sporting institutions and the like. We have lots of clubs and things like that, but institutions that help people of different types integrate together that were sort of natural. The family has been breaking down, marriages have broken down, churches do not operate in the way they used to, there are not so many in the neighbourhoods. Very often people do not even know who their neighbours are. As a result of that, we have got to face facts that, for people with mental illness, that can add to their already difficult plight. So I believe that it is really important that we all own this. I believe it is, in fact, one of the things that we had considered doing with this policy, that it will be fronted by the Policy Council, rather than by the Health and Social Services Department. We would have got criticised for that but the point of doing that would have been to say this is not something we can say is an HSSD issue and we leave it there... At the very least, speaking as Home Department Minister, we have got a vested interest in working collaboratively with others on this issue. So it is about inter-agency working, it is about the third sector, but it is also about each one of us and I am glad to see that so many in this Assembly are taking that seriously because we are going to have to speak this more regularly. We cannot leave it as a Strategy on a shelf which, sadly, has been done before with other sorts of Strategies.

2440 Sir, I want to speak just very briefly on paragraph 165. Deputy Bebb has mentioned it already and it is the effect of mental health on those who are within the criminal justice system in some way. Really, this deserves far more than just a paragraph and, in the main Report, there are, obviously, more references to this, but I want, first of all, to echo everything that Deputy Bebb said is absolutely right – but we have a problem. We have a problem being an Island community, we have a problem running a prison that would never be run in other places of our size, except other Island communities, where – and I commend all those who work in the prison, where they do

2460 an excellent job in very difficult circumstances, bearing in mind that such jobs would be done by a
 multitude of different agencies and different prison establishments in the UK. So we have to work
 within that. Therefore, we have got to think differently and work differently. I am very glad to see,
 and to report to this Assembly, that there is an increase of interest from, particularly, third sector
 groups, to get engaged in that and to enable those who should not be in our prison because they are
 there because of particular mental illnesses and disabilities that have, sadly, made them get
 involved in criminal activity – and the answer is not to put them behind bars. That is not the
 2465 answer. We do not have the answer yet but, certainly, we need to be far more creative in how we
 help people like that to engage in community. Many of them that I have spoken to personally end
 up going back inside because that is the only community they know that they are accepted in. It
 comes back to that question of community again; we need to engage with these.

2470 And I would also say – in echo, I think, to the points that, again, Deputy Bebb made – I know
 for certain that our community sentencing has the capacity to at least double the number that they
 deal with – with the amounts of volunteers and others involved in it – and so we do need to see
 more use of that particular line and, certainly, myself and my Board are keen to see that happen.

2475 Sir, there has been mention, and I have mentioned it as well, of the increased recognition of
 third sector agencies. Whilst I cannot speak in this Assembly, as Chair of the Social Policy Group,
 particularly the Chief Minister has mentioned that but I will echo that only to say we are
 absolutely committed, and want to recommend to this Assembly that there are third sector
 agencies out there – they will need some funding, no doubt at all – but who could do some of the
 things that we need to be done, in a different and more cost effective, more efficient way, a more
 effective way. We ought to be far more ready than we have in the past of engaging with them. I
 am glad that so many have already said that needs to be the case.

2480 We do need to work together and I will finish, again, unapologetically, repeating myself,
 against what Deputy Le Lièvre wanted, but we do need to talk about this more than when we
 debate these issues here because these people are part of our community, they are in our
 community and they deserve to be accepted, integrated and made to know that we care for them in
 an appropriate way for the 21st century.

2485

The Deputy Bailiff: Deputy Fallaize:

Deputy Fallaize: Thank you, sir.

2490 This debate is a success already, to some extent, because, if the States had been debating these
 sorts of issues even ten years ago, but certainly twenty or thirty years ago, the whole Assembly
 would have entered into a debate about mental health with far more circumspection and cynicism
 than the States has today.

2495 And to hear Members talk about their own experience or their family's experience in terms of
 mental health and wellbeing, I think is a reflection of not just the progress of the States but of the
 progress of society in dealing with these sorts of problems.

2500 I think the States, to some extent shapes, but also reflects, society. I think, if there is progress
 in dealing with mental health problems and progress in mental health policy, it will have as much
 to do with the way that the perspective of our society has changed as it will have to do with any
 political change from within the States, although it is ironic, actually – and I made this comment at
 the Vale Douzaine meeting a couple of nights ago – that the States, a few years ago, had very
 little, if any, strategy, plenty of dosh and did lots of things that were clearly haphazard and perhaps
 did not fit in very well with the corporate whole. Now, of course, the reverse is true: we are
 drowning in strategy, we have almost no additional resources to implement any of the things to
 which we want to commit and we have to find a way of marrying strategy and delivery on the
 2505 ground. I will not say a great deal more about that because I laboured that point last month when
 we discussed the 2020 Vision and I am mindful that I want to say a word or two about that when
 we debate the mother of all sclerotic strategies next month, the States Strategic Plan.

2510 Now, sir, unlike Deputy Gollop, when the Minister sums up, I do not want to hear any more at
 all about the Mental Health and Wellbeing Implementation Board because the more I hear about it,
 the less confident I am about it. I think if I can remain in glorious ignorance about it, then I am
 more likely to support what is before us today, because it does sound to me like a layer of
 Government, a layer of administration, which has the potential to obstruct the progress that could,
 and should, be made in delivering the Mental Health Strategy. The Health and Social Services
 Department's mandate makes it responsible for

2515

‘The mental, physical and social wellbeing of the people of Guernsey and Alderney.’

2520 So if we are debating, if we do not like, the name ‘Mental Health and Wellbeing
Implementation Board’ and we are looking for a new name, I suggest the name we come up with
is the Health and Social Services Department. I think we already have a Department, a division of
the States, whose job it is to *lead* the development of the mental health policy. I am not that
bothered how they go about doing it, how they allocate their resources, or what groups or divisions
or Boards or committees they come up with to oversee it, but it must remain their responsibility.
2525 Of course, it needs inter-departmental working but anything which *spreads* responsibility over so
many Departments always concerns me. I think the model necessary is that one Department is
placed as the clear lead Department and then is able to co-opt assistance from other Departments,
but it is that Department which is always held responsible for delivery.

2530 Deputy Harwood said that the Mental Health Strategy will work if there is inter-departmental
working but I do not think that is quite right because, no matter how much inter-departmental
working there is, actually things will only improve if there is action on the ground. This Strategy is
particularly well crafted. It is very coherent, it is well presented, it reads easily, it is one of the best
– although I do not particularly like Strategies – it is one of the better Strategies presented to the
States and I thought that the presentation that was put on some time ago now about the
2535 development of this area of policy was probably the best presentation I have attended, put on by a
States Department, since becoming a States Member. But it is only a Strategy and platitudes in a
Strategy will mean absolutely nothing without action on the ground. Like Deputy Le Lièvre, I
cannot believe that there will be significant progress in improving mental health policy unless we
are prepared to commit additional resources. I hope that I can be proved wrong but I really do
believe it will require additional resources and possibly the commitment of significant additional
2540 resources.

This is an area that is highly political, where there are likely to be contested ideas and very
diverse differences of opinion about how we could best make progress and yet everybody is likely
to, all States Members are likely to, approve this Report today. Now that, of itself, demonstrates
2545 that there is not a great deal of policy in this document. It is all very high level, it is at the level of
vision really, objectives. With that in mind, is the Minister when he sums up, able to assure me
that, in a reasonably timely manner, Health and Social Services will, at the very least, publish,
even if they do not bring to the States for debate, a concrete plan of action is the best phrase I can
come up with, which sets out exactly what is to be done, when it is to be done, how much it will
2550 cost and which includes some way of measuring the extent to which those actions have been
successful? If that kind of information is not published, then I do not have the confidence that this
Strategy will not join the many other Strategies which have just sat on a shelf, so I would
appreciate that kind of assurance from the Minister when he sums up.

2555 Finally, I just want to focus on one quite particular aspect of this Report which refers to some
of the research that has been done and which underpins what is being proposed today. It is
particularly with respect to parenting and early years. There is a bullet point in this States Report
which reads

‘Investing in a healthy start in life influences development in childhood, adolescence and adulthood.’

2560 and another bullet point which reads:

‘A number of studies from the USA have shown that parenting and early intervention strategies are cost effective and
lead to increases in employment, literacy and social responsibility, as well as decreases in teenage pregnancy, crime
and arrests.’

2565 There is a lot of research around the world carried out in respect of pre-school education and
one particular scheme in the United States – I think it was called the Perry Hope Scheme – which
was started in the 1960s, invested a great deal in pre-school education and has tracked the progress
of those children, who would not otherwise have accessed pre-school education, over many, many
2570 years. I think that study has demonstrated that, for every \$1 that was invested in that scheme, the
States had saved between \$6 and \$8 later on. Now, the States made an in-principle commitment to
universal access to pre-school education many, many years ago.

2575 I do not think that, over the last two elections, I could find a single issue which has been
mentioned more positively in more manifestos than pre-school education. With that in mind, given
the wealth of evidence that there is in support of pre-school education, could I ask, if not the
Minister of Education, a Member of the Education Department to advise the States *when* the
Department will propose to the Assembly the establishment of universal access to pre-school

2580 education because, in terms of delivering better mental health and wellbeing in our society, I suspect that there are very few things that we could do that would be more important than starting a proper universal pre-school education scheme.

Thank you, sir.

The Deputy Bailiff: Deputy Wilkie.

2585 **Deputy Wilkie:** Sir, I rise to address the Assembly on, for me, really a moment of – I do not know – epiphany, clarity, that happened some years ago.

I was working in town and I parked my van on the Crown Pier just for two hours, not re-parking for thirty minutes, and as I went towards the building site that I was working on, backwards and forwards, there were some gentlemen on a bench, strategically placed opposite the recycling bin and with the toilets behind them and they spent most of their time there drinking super strength lager. They were never much trouble. I walked backwards and forwards and, on the building site when we were having our lunch, we talked about them sometimes. A lot of the guys were very annoyed that these guys were sitting there in the sunshine, drinking lager, drinking their money while they were on site covered in dust and working away – and I pretty much concurred with that conclusion.

2595 Then, one day, I was walking back towards my van and two Chelsea Pensioners were walking down towards me and, as they passed the gentlemen on the bench, they all got up, to a man, and started shaking their hands. That took me back a bit and I was looking at them, thinking why are they jumping up, shaking hands with Chelsea Pensioners and being so polite. They were even offering them super strength lager, which they turned down! *(Laughter)*

2600 As I stared at them, one of the guys, through his weather-beaten face, I recognised him. I know this guy. I worked with him three years ago on a site: he is a qualified man. What is he doing here, you know, drinking lager all day? He can get a job. I do not understand it. And then, in the back of my mind, I had this thought: someone had told me that his wife had left him and taken the children and this was my moment of, you know... that is the reason he is there and I started looking at some of the other guys and there was one of the guys talking to the Chelsea Pensioners with a regimental tattoo on his arm and, you start to think... I had a bad feeling in my stomach. I might have got these guys wrong. I might have made the wrong sort of choice. I noticed that they were there all day; they were there from eight in the morning until five o'clock. They were there all day because they were used to working most of their lives. These men were not lazy. I believe these men were broken and I believe this Strategy, if put in place, may get to some of these people before they start self-medicating with alcohol and before they start trying to commit suicide through alcohol, really.

2615 The guy that I recognised did die six months later from sclerosis of the liver, unfortunately. This also brings me onto another thing I just want to touch on, which Elis Bebb has alluded to already, that we have, over the last ten years –

The Deputy Bailiff: Deputy Bebb, please.

2620 **Deputy Wilkie:** Sorry?

The Deputy Bailiff: Deputy Bebb, please.

2625 **Deputy Wilkie:** Sorry, Deputy Bebb. Sorry.

Over the last ten years, we have had men and women who have served in Afghanistan and they will all be affected to a lesser or greater extent with the experiences they have had over there. I think the very least we owe these brave people are modern facilities and modern methods for physical and mental health. I, for one, do not want to see our war heroes on a bench on the Crown Pier drinking super strength lager and I urge Members to support this document.

2630 Thank you.

The Deputy Bailiff: Deputy Brehaut and then Deputy Inglis, I think, is rising up.

2635 **Deputy Brehaut:** Thank you very much, sir.

As a Member of HSSD, obviously my name is at the back of this document and, needless to say, I support it unreservedly. It is a good body of work, it has been too long in the offing and I think, from the moment I was first elected or even my Manifesto when I was not elected, I gave an

undertaking that a new mental health facility would be built in my term – and, many years later, we see that is the next item on the agenda.

2640 What worries me with... this is a good document, it is well intentioned and we all want it to work but, sometimes, you need just a little bit more than platitudes to make policy. I feel a great burden of responsibility and I feel it, too, with the Disability Strategy. We go out into the community, we identify who we believe are disabled and we say: ‘You, you are different, you are not like me: I am abled, you are *disabled*, but I am going to help you by making society more inclusive. *That* is how I am going to help you.’ There are elements of this Report that give me that same unease, that same weight of the burden of responsibility, that we have to deliver on this, so I really hope that we can do it. The best way to do that is for all Departments, I think, to lead by example and I will just give one example. Deputy Fallaize did say in his speech a few moments ago – and others have referred to how important it is for early intervention, those early years get to young children.

2650 I know I am going to break every professional rule or guideline that is out there in making the link by children with special needs and mental health, and I do not want to do that, but I would say that it is because it is one in four children with a learning difficulty who may well go on to have a mental health issue at some stage. So I would like all Departments to behave in a way that erodes stigma and deals with stigma from the very onset, from the very beginning. By way of example, when your child is successful by any measure, whatever that measure is, and they may go on to high school or wherever that is, they will get a bus that takes them to school – a bus that takes them, you expect that – your child is going to high school, your child will be picked up and taken to school. So what if your child has a learning difficulty? There is a bus to take your child to school, is there not? No, there is not. There is not. There is a 14-seater mini bus and you have to write to Education and make the case for your child to be taken to be educated and you are well aware, and this is *my* example – sorry, I have not already declared my interest – that you then have to advocate for your family member to get on that bus, in the knowledge that another child may be displaced from getting on that bus. What sort of signal does that send out?

2665 More to the point, why do children with the most modest of learning difficulties have to take a different bus to school: because they have to be protected from other children who, frankly, can be brutal and cruel! I have to say, as a parent, it is absolutely heart-breaking. If my child was of a different race and was racially abused, every mechanism within that school, every policy, would be made available to deal with, for example, racism. When you hear terms in primary school –and I have not heard this word for thirty years, by the way – when you hear the word ‘spastic’, when you hear the word ‘retard’ within a primary school setting, you realise what a *huge* way we have to go to deal with stigma and prejudice, whether it is in mental health, whether it is in children that are modestly different.

2675 So while I want to endorse this, and I will endorse it, we should never underestimate the scale of the challenge that is left ahead. It was unfortunate, even in one speech, a Member of this Assembly remarked that they may have to be ‘committed’ for remarks they were about to make. We need to move away from all of those things and, if we want to be a genuine, inclusive society, we look at stigma and intolerance and people who want to single out and exploit difference, we nip it in the bud and we deal with it swiftly.

2680 Thank you.

The Deputy Bailiff: Deputy Inglis.

Deputy Inglis: Mr Deputy Bailiff, thank you very much.

2685 I am, straightaway, in full support of this document. I think it is well written. I find a lot of things in there that are very close to what we are all experiencing.

I do have some concerns, and I am hoping that the Minister will be able to reassure me that these are not going to be brushed under the carpet; they are not going to end up on the shelf. We are talking about business loss to the community, on a guesstimate, of about £9 million. I believe it is a lot more and, to ensure that figure is brought down and is dealt with in a manner that we can cope with, I would expect more involvement with, certainly, Commerce and Employment and ensuring that the Department works much more closely in educating people as to how to deal with certain problems. Deputy Bebb alluded to this, where we talked about looking at training initiatives that are going to, dare I say, focus on HR within this Island. HR works reasonably well but not well enough, in terms of there is a fine line between being helpful and being a bully and that is something that I think we can encourage to give more education to.

We do seem to be talking a lot about ‘mental health’. The rest of the title is about ‘wellbeing’

2700 and, on page 235, wellbeing covers nearly all the Departments that we would expect to work together – having somewhere to live, having a job, friends and family, income, self-worth, access to leisure and education. So it is important that everybody works together and, if what I have heard today does actually happen – in other words, we are all working together – then there is a good chance that this will be successful.

2705 Deputy James talks about a people’s champion. I feel we are *all* champions in this. We should all be communicating in whatever way is practical for the jobs that we do. I think that, all in all, the document tells us exactly which direction. I think what Deputy Le Lièvre alluded to is right: this has been worked around the HSSD’s 2020 Vision. I sincerely hope that this is not going to happen in 2020: I would like to see a faster move on this because we are being asked to support a steering group, whereas I would really like to see focus on getting somewhere really starting. What we are going to debate, as the next item, surely must be the first stepping stone to make things happen.

2710 Thank you, sir.

The Deputy Bailiff: Deputy Green.

2715 **Deputy Green:** Deputy Bailiff, Members, I will be relatively brief but I, too, like most other – in fact, *all* other – speakers today, do support this Strategy and I particularly welcome the emphasis on the inter-agency working, which is at its very core.

2720 I will make two points. Firstly, and this is a point that does bear repetition, I think, the Report very wisely raises the issue of fighting stigma and discrimination and we cannot say this enough because this has been a protracted issue for so, so long. We undoubtedly need to start to talk much more openly about mental health and wellbeing issues. In this Bailiwick, as with other jurisdictions, we as elected representatives, as politicians, do not talk often enough, or openly enough, about mental health difficulties and that has to change. And it is beginning to change, as we have seen in this debate today.

2725 Mental health problems should not be seen as a taboo issue; neither should any stigma be attached to any particular mental health affliction. This, in my view, as the Report indicates, is one of the biggest social challenges that we face as a community, whether we like to recognise that fact or not. If a person in Guernsey has the misfortune to suffer a severe physical illness, you can expect the ‘Get Well’ messages to flood in. If that same person, on another occasion, suffers from a relatively serious mental health illness, those messages of goodwill may not be so forthcoming and that is the nub of this issue.

2735 So the Strategy *will* try to tackle the stigma and discrimination towards mental health issues. If it is going to be a success, it has to do that and I hope – and I would like to echo what Deputy Inglis just said – that every Member of this Assembly will be an ambassador for that important message. It is not just the responsibility of HSSD or the implementation board or anybody else, it is for every single one of us, as elected representatives, to be ambassadors for that key message, that there should be no stigma, no discrimination, against people who have mental health and wellbeing issues.

2740 As well as that attitudinal shift that we need to ensure, we also have to ensure other much better joined-up working that people have talked about between Government Departments, the voluntary sector and other agencies. And I do not propose to say much about the implementation board but, hopefully, that will pull things together.

2745 The second point I wanted to make was I fully support that co-ordinated joined up social policy and Members will remember from last month’s Billet, in that, in the 2020 Vision statement there was emphasis on the importance of poor housing, poor educational attainment, poor employment opportunities and disjointed welfare systems, in terms of all having an adverse effect upon health outcomes. That is as true in relation to physical health as it is to mental health outcomes. I made the point last month, and I will say it again this month, we know that there is a wealth of data which shows a fairly clear correlation between societies that are more unequal and worse mental health outcomes: that is as true for mental health as it is for physical health outcomes. So, given that, and building on what Dr Bridgman has been saying recently about the issue of health equity, I would like to ask the Minister for Health and Social Services if this Mental Health Strategy would benefit from the States actually adopting an income inequality measure, such as a KPI, for health equity in the future, because I suggest that would be a very useful KPI to have. A fundamental point that I would like to make is that, at the end of the day, we need to have a joined-up social policy overall that gives individuals and families the support that they actually need to deal with the slings and arrows of modern life, which we know are not getting any easier.

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2760 So, in conclusion, I do support this Strategy today. I do hope that the joined-up working will work and I do think it would be helpful if a KPI on income inequality could be considered because I think that would underpin this Strategy in a rather effective way.

Thank you.

2765 **The Deputy Bailiff:** I do not see anyone else rising so, Minister, are you in a position to reply straightaway to the debate?

Deputy Le Lièvre: Sorry, sir, I have spoken, but Deputy Fallaize ...

2770 **The Deputy Bailiff:** You have spoken, Deputy Le Lièvre. Are you craving my leave to speak again?

Deputy Le Lièvre: I am, indeed, sir.

The Deputy Bailiff: Well, on this occasion –

2775 **Deputy Le Lièvre:** It is only to answer –

The Deputy Bailiff: On this occasion, because Deputy Sillars is not here, I will give it, so yes.

2780 **Deputy Le Lièvre:** Thank you.

Deputy Fallaize asked if a Member of Education... and, in the absence of my Minister, I have opted to speak on behalf of the Board and I trust that if I say something erroneous one of my fellow Members will jump up and correct me, but I think I am able to say for sure that every Member of the Board, including the Minister and including the non-States member, Mr Mulkerrin, the Board is wholly in favour of the introduction of quality pre-school education for all children – they are now called learners, I will call them children (*Laughter*) – from the age of three and four.

2785 Deputy Fallaize also asked if I could give some indication as to when we might approach the States with such a States Report. We have one or two pretty tricky Reports to bring to the States before that but I think I can fairly safely say that the Education Board will bring to this Assembly a Policy Letter on this subject probably within the next twelve months.

2790 Thank you, sir.

The Deputy Bailiff: Thank you. Deputy Le Lièvre.
So, Minister of the Department, Deputy Dorey, to reply to the debate.

2795 **Deputy Dorey:** Thank you, Mr Deputy Bailiff.

I start off by thanking the House for their support – the Assembly, sorry – for their support.

2800 I think it has been an excellent debate. Deputy Fallaize said about society has changed and he spoke about whether we are leading. Well I do think, perhaps, we are not ‘leading’, but we are not far behind and I think we are setting the pace with this Report. I will not reply on every point that everybody has made. We have taken notes on the comments that people have made so, please, if I do not refer to your speech it is not because we have not valued what you have said, it is just that there is a limited amount of time.

2805 I think, early on in the debate, there was some particularly personal experiences and they highlighted the fact that one in four will suffer some sort of mental health illness at some point in their lives. Both Deputy St Pier and Deputy Bebb spoke about personal family experiences. I think that was very important for this debate: the fifth theme of the Report is tackling stigma and discrimination and the very bold words they used highlights that particular theme of the Report and I thank them both for their openness.

2810 Deputy Langlois was one of the early speakers and he spoke about early intervention from the Primary Care Pilot Scheme – various people have referred to that – and he mentioned, I think, up to 1,500 to date have made use of that Scheme. I took the opportunity to having another visit to the Castel Hospital yesterday and I was able to talk to one of the counsellors. What I think – and it goes for all the services that a Department offers in this particular area, we do have limited resources – as important as it is, giving a person some help at the early stages, it is also that they have to be discharged and allowed to take that advice and use it to improve their mental health. Obviously, if it does not work, they can come back but there are limited resources and without being able to discharge patients, we cannot then see new patients. One of the important things of

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2820 the service, all the way through, is that early intervention and if we can have that early intervention, we can help so many more people and help them at the right point. But there are also people who are long-term users of the service and they will have times when they need help as well, greater than other times, and it is important that we will be able to react at those particular points and give them the help when their health deteriorates at a particular point.

2825 Deputy Le Lièvre, Adam Jones and others were very complimentary, among many others, about the Report and I am equally complimentary about the Report. I am here presenting it today but it is not my Report or my particular Board's Report, it was done by the previous Board. We have done very few minor changes it and I also congratulate the previous Board and also the staff who have obviously done an awful lot of work, putting it together: the combination of those means that we have got what we have in front of us today.

2830 Deputies Le Lièvre mentioned also, and Deputy St Pier, about the excellent services and we have [Inaudible] resources and the problems with resourcing them. It is a challenge to deliver better outcomes within the same resources. There are benefits and synergies to be made if we can work across States Departments and we can improve outcomes and maximise effectiveness. But it is, indeed, a challenge and I think it has been referred to by others, including Deputy Lester Queripel, about paragraph 171, where it says:

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‘As the implementation plans are developed, there may be a requirement for additional resources but at this stage it is not possible to quantify any such requirement...’

2840 Obviously, that is the challenge, to be able to work together within the existing resources we have. But as people have mentioned about the Strategy and where do we go from here, we have had a lot of successes already. We have got the next debate, which is a new centre and, as I have mentioned, the pilot project on the talking therapies, which has been a big success. That is some but there are many others. I think, again, having visited the site and talking to some of the staff, a lot of the services have been through a radical change over the last few years, the way we deliver the services. The teams that have been set up have... perhaps, unless you are a user of a service, you would not know, but there has been a great deal of expertise gone into it and the redesign of how we deliver the mental health services and that is through to the acute community. So there has been significant change and this is to continue that change and improve our services further.

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2850 Deputy Le Lièvre also mentioned about changing the name of the Board. Yes, I agree, a more contemporary name, I am sure, will be far better and we will take his words on board.

2855 Deputy Storey, among others, also mentioned about early intervention, care in the community and a multi-agency approach, including Government, business and voluntary sector. That is, I think, how we are going to get more value out of our resources. It is a combination of those three and if you carefully read the next Report that we will debate, it talks about 18 acute beds and, if you read it, there are 21 acute beds in the current Albecq Ward. I think that is an illustration of how we are going to change our services: there is far more care in the community and we are going to deliver them in a different way and, hopefully, in a far better way for our community.

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2860 Deputy Bebb and Deputy Le Tocq mentioned about the prison. Well, I think in paragraphs 109 – 111 it mentions about services, mental health, in the prison, and particularly in paragraph 111 it mentions about:

‘On Guernsey, an in-reach mental health team provide care for prisoners who require a specialist service. Primary care mental health is provided by the generic prison health care team.’

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2865 So we do have mental health services in the prison. I know it was mentioned on the radio earlier on this week about paragraph 109 which talks about:

‘...90% of prisoners have some form of mental health problem...’

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2870 Those figures came from, I think the UK, but I am sure, by the very nature of people being in prison, that many of them do have some sort of mental health problems, but not all, obviously, and we have a specific team there to help, where necessary.

2875 Deputy Lester Queripel mentioned about transferring individuals currently living off-Island, placements, back to Guernsey and that can release additional funding to be spent on Island. In 2012 we have been able to successfully, on one occasion, bring somebody back to the Island and, obviously, the money that we were spending follows with that person but if we are able to deliver the services on-Island, which is obviously better for that person, in a more economical way, it means that we can release some resources to be reinvested locally.

2880 He also mentioned about asking Rule 6 Questions and I would urge him, as I have all other Members of the Assembly, to be speak to me or a fellow Board Member, or a staff member, first, so we can discuss your particular Question and particularly the background to any Question that you want to ask. Perhaps we can answer it without going through Rule 6 but if we, at least, understand the background to it, we can answer it in a better way than, perhaps, we would if we did not understand the background. So I would urge, if you are thinking about asking us a

2885 Question, come to speak to us first, because a lot of what we do involves confidential information and there is some information that we just cannot give out. Often, in a small Island, the numbers we are dealing with are relatively small and people can be identified, so please come and talk to us first.

2890 Deputy Paint mentioned about the new Mental Health Law, about the problems – and also Deputy James touched upon it as well – but this is not to do with the new Mental Health Law. This is a Strategy and I will be pleased to speak to him: come and see us or speak to me personally after the debate, but that is not what this Strategy is about.

2895 Deputy Adam touched upon, among other things, the pilot project and he was aware there was a problem with the funding. Well, I am not aware of the problem with the funding. I have spoken to the Social Security Minister and he is not aware and I think the T & R Minister indicated that he was unaware. So I think the commitment to the pilot project is there from the Ministers who are responsible. I do not think there is any funding and I would like that nobody goes away from this debate with that understanding.

2900 Deputy James mentioned about we need to champion somebody on mental health issues. Yes, and as a Member of the Board, I welcome her to bring that idea to the table. She also mentioned about focusing on children, children are the future, they need to have easy access to help... and to work with the third sector to develop those services... Sorry, that is really the answer to her point on focusing on children. I think her point is very well made, that children do not have access to the services because they do not have the financial ability to go and see a doctor initially. So it is

2905 important and I will welcome a debate round the HSSD table on that particular point.

In the long Report, which has been mentioned, on page 48 it says that ‘half of adults with mental health problems begin in childhood’.

Deputy Harwood also made highlighted the problem with children.

2910 Deputy le Tocq spoke about ‘we must not sit on the shelf’. We will report back on progress: that is what proposition 2 particularly says:

‘To direct the Health and Social Services Department to report back to the States on the progress of the Strategy, as part of the next update on the 2020 Vision.’

2915 So this is a *real* Strategy. We *will* progress it and we *will* report back.

Deputy Fallaize mentioned about who leads it? Well, actually, if you look at the proposition, it is very clear ‘to be led’ – in the middle of the proposition – ‘by HSSD’.

2920 So it is HSSD working with those other Departments but we take the lead. Therefore, we have the responsibility, so I am very pleased to say that and we will lead it because I totally agree, the worst thing that could happen is you have a group of Departments together and nobody actually takes the lead. He also asked about a plan of action: I cannot give an assurance from here because it would be my Board to make that decision but I certainly agree that, as part of our reporting back on progress, unless we also report back on what we are going to do, I think that report would have very limited value. So my personal opinion is that, yes, we should include a plan of action but then

2925 that has to be done with my Board’s agreement.

2930 There is also mention about pre-school. Well, I know Deputy Le Lièvre has spoken about this but there are two pre-schools which are funded by a grant from SSD and, as I understood, there is only about a handful of children who are, I think, over three who are not currently attending pre-school because there are two which are funded from SSD and one which is funded from pre-school. I got that information from one of the pre-school owners who is leading the pre-schools. So we are making use of them, but I think part of the argument is should we be starting at a younger age than we are...

2935 **Deputy Fallaize:** Sir, may I ask the Minister to clarify, when he says that only three children are not accessing pre-school, does he know how many – what percentage – of three and four year olds are accessing the number of hours per week which is recommended globally?

Deputy Dorey: I do not know that. All I was told was that there was attendance at pre-schools.

2940 The number of hours they are attending is something which I have not got the information on.
I think Deputy Brehaut talked about children with learning disabilities and the fact they have to go on a different bus, not because they come from a different area but because of the cruelty of other children. I think that is a key point and, perhaps, I think the words he said about how society has changed in relation to differences of people in certain ways. People with learning difficulties we have not... and it is key that we – society – does change and respects everybody, no matter why they are different to someone else, whether it is colour, whether it is sex, or whether it is ability and I think that is something which we, in Guernsey, cannot change on our own but we can encourage the population. But it really is a national, international, change that needs to happen and I think when you see, in relation to race, what is happening through football and the change in the UK at least, it does show that if people do lead and people champion a particular situation, society can change, but it takes many years.

2950 Deputy Inglis talked about moving faster. We are already making progress, as I have mentioned. I do want to move faster but, as we have said, we have got the resources we have but I think I echo the point again, the key thing is working together with other Departments, working together with the voluntary sector and with industry. I think the combination of that, hopefully can give us the resources and enable us to make progress. I cannot promise it until we set up this Mental Health and Wellbeing Implementation Board, or what it is going to be called in the future, but I am hopeful that we will make progress. My hope is based on the fact, when I have heard the significant progress which has been made to date, but I think we have to accelerate it even further.

2960 Deputy Green mentioned about a KPI of health equity. I take that on board. I cannot give him the assurance now but I think it is a good idea. As I said, I apologise if I have not picked up everybody's point. I have tried to, within an acceptable period of time, pick up the main points in the debate and, again, I thank everybody for their contribution and I hope that the Assembly can support these two propositions unanimously to show its commitment to a Mental Health and Wellbeing Strategy.

2965 Thank you.

The Deputy Bailiff: Deputy Paint, did you want to ask a question?

2970 **Deputy Paint:** Yes, sir.

I am not entirely satisfied with the answer I got from the Minister, so I would like to ask if he is able to answer if the Strategy that they are talking about is fully within the new Law, and that it complies fully with the new Law? Perhaps if he, or H M Comptroller, could confirm that provision for independent scrutiny is allowed for in the new Law.

2975 **The Deputy Bailiff:** As the Minister said, Deputy Paint, questions about the Law are not really related to the Strategy document that is the matter for debate. But, Minister, if you can just confirm that the Strategy does fall within the ambit of the Law, that would be great.

2980 **Deputy Dorey:** Obviously, the Law sits above the Strategy, as it does in society, but we will follow the Strategy. The Law sits on top and the Strategy has to work within the Law, yes.

The Deputy Bailiff: Then, Deputy Paint, if you have specific questions about the Law, perhaps you can take them up outside this debate. (**Deputy Paint:** I will sir, thank you.)

2985 Members of the States, there are two propositions. Unless anyone is encouraging me to take them separately, I was going to put them to you together: they are found on page 270 in the Billet . All those in favour; all those against.

Members voted Pour

2990 **The Deputy Bailiff:** I declare both Propositions carried.

2995 **Development of a Mental Health and Wellbeing Centre (Phase 6B)**
Project approved

Article VI.

The States are asked to decide:

3000 *Whether, after consideration of the Report dated 21st December, 2012, of the Health and Social Services Department, they are of the opinion:*

1. *To approve the construction of the Mental Health and Wellbeing Centre, as set out in that report, at a total cost not exceeding £24,000,000.*
2. *To approve the acceptance of the tender in the sum of £16,577,921 from Harbour View Construction Ltd to undertake the main construction works associated with the project.*
- 3005 *3. To approve a capital vote of £22,655,500 for the construction of the Mental Health and Wellbeing Centre charged to the Capital Reserve.*
- 3010 *4. To authorise the Treasury and Resources Department to approve the acceptance of tenders for the provision of information management and technology, furniture fittings and equipment and the decommissioning costs and approve an increase in the capital vote for the project, charged to the Capital Reserve, to a maximum sum of £24,000,000.*

The Deputy Greffier: Billet d'État III, Article VI, Health and Social Services Department, Development of a Mental Health and Wellbeing Centre (Phase 6B)

3015 **The Deputy Bailiff:** I invite the Minister of the Health and Social Services Department to open the debate on this Article.

Deputy Dorey: Thank you, Mr Deputy Bailiff.

3020 The Mental Health and Wellbeing Strategy we have just debated and the Health and Social Services Department now seeks approval for the development of the new Mental Health and Wellbeing Centre which is, as I mentioned, part of the Strategy. That will be built on the south west of the Princess Elizabeth Hospital site near Oberlands Road.

3025 It has been the intention to relocate from the Castel Hospital for at least the last 20 years – I think some mentioned 30 years in the previous debate – in order to ensure that safe, effective and respectful services can be provided for people with mental health needs in non-stigmatising accommodation. This new development will also improve service user experience. ‘Service user’ is a term that perhaps I do not like but it is, I think, the correct term in today’s world. As I said, it will improve service user experience by promoting closer working relationships with other hospital services and with mental health services for older adults which are already located on site at the Princess Elizabeth Hospital. It will include Child and Adolescent Mental Health Services currently located at Bell House, which will, additionally, improve communications and transition for children moving into adult services. Also in a separate building will be the replacement of the two-bedded secure unit which is at the Carrefour in Rue Perruque, which is not fit for purpose.

3030 Both Bell House and the Castel Hospital will be vacated as a result of this development.

3035 There are a few other services which use Castel Hospital as their base and there are plans to move all those off the Castel Hospital site. So the old hospital site will be handed back to States Property Services for a decision for its future use and we also have to hand back a small amount of budget to maintain the grounds at the site.

3040 The Mental Health and Wellbeing Centre will come with all the benefits of a central, modern and purpose built facility and will include a secure outdoor courtyard area accessible to all service users, and improved parking. Additionally, unlike its predecessor, the new building will have a single entrance for the adult section for both visitors and service users, leading to a central hub linking all services with user-friendly signposting around the building, and a separate entrance for Children and Adolescent Services.

3045 I do not know if any of you have looked on YouTube on the flythrough of the new building but I think it is worth looking at. You get a real feeling for what it will look like and what it will be like from the inside, as well as from the outside. While offering practical benefits, the facility also hopes to eliminate the stigma and discrimination associated with the Castel Hospital, a primary goal for the new Mental Health and Wellbeing Strategy. The new building has been designed to allow considerable flexibility in its use so that we hope it has an element of future-proofing and the design team received significant input from both staff and service users. If approved, work will begin on the site next month. The nomination of the contractor, Harbour View Construction Limited, has been undertaken according to a robust tendering and evaluation exercise, following States procedures. This process included formal assurance from the tenderers that local contractors would be used as much as possible during the project.

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The States of Guernsey, as a responsible client, is aware of the concerns of the construction industry locally, particularly sub-contractors, that there are often payments made to the main contractor which do not find their way down the supply chain to sub-contractors in a timely

3060 manner. To mitigate this problem and encourage a more transparent approach to sub-contractor payments, it is proposed that the main contractor is paid via a dedicated project bank account, with the client authorising payments to the main contractor and sub-contractors for the monies due from the monthly certification of the works. This project bank account is currently in use in an existing States project and, as I understand, it is working very successfully.

3065 The total project budget is £24 million, which includes historical fees spent from 2003 and is £1.4 million less than the estimated 2009 cost in the capital prioritisation debate in 2009. I think the fact that historical fees date back to 2003 illustrates how long this has been under consideration. It has been calculated that the running costs will be between £25 – £30,000 less than the running costs of the Castel Hospital. Also, because of the extra care facilities being built, another £1.6 million of the Capital Reserve will not be needed for homes for adults with learning disability.

3070 The new facility will greatly benefit the community and bring Guernsey up to date with the provision of mental health services, with room to accommodate 28 service users: that would be 18 acute, 8 from the Divette Ward, which is now in the Casquets, and 2 in the Secure Unit. It will include modern facilities for day care and therapy and this represents a step change – I emphasise that word, a ‘step change’ – for mental health and wellbeing on the Island. It will bring together the services and ensure improved transition between the different age groups. This type of positive progress is hugely important. The new build would allow a greater emphasis on joint working, which will facilitate recovery and wellbeing. It will bring both clinical and financial benefits and contribute significantly to ensure that the mental health services for the people of Guernsey are effective, evidence-based and fit for purpose for the coming decades.

3080 I ask Members to support the new Centre and I will answer any questions at the end of the debate.

3085 **The Deputy Bailiff:** The first person I am going to call is Deputy Laurie Queripel, and then Deputy Lowe and then Deputy David Jones.

Deputy Laurie Queripel: Thank you, sir.

3090 Mr Deputy Bailiff, Assembly colleagues, it may seem rather strange that I am already thinking about maintenance and we have not got a structure in place yet... But I made mention of it in my manifesto and I stated examples. I believe that the public are very aware of the fact that the States have a very poor record in regard to maintenance of infrastructure: quite good at creating it, not so good at looking after it.

3095 It really does not matter if we are in times of plenty or lean times, it is vital that we get the best possible return on our capital investment. It is vital that we get the very best value for money and use of our infrastructure. So I am asking HSSD, please make sure, going forward, that you have sufficient resource to properly maintain, in the long term, these facilities. I think we have all seen – it has been mentioned in the media – the questionable condition of some fairly new buildings at the hospital site. This must not be repeated. The build quality must be right in the first place and I hope there will be sufficient supervision and maintenance must be regular and thorough. I think, if we have those things in place, this will be an investment that will benefit the whole community.

3100 The Report makes mention of helping service users to achieve their potential by providing the right services in the right environment. Now, sir, I think most Members have received e-mails from members of the public in regard to this issue and some are quite critical concerning the Castel Hospital site. They are concerned that there may be a disruption in services, that the hospital was allowed to run down: perhaps with some remodelling and timely upgrading its useful life may have been extended. Now I do not necessarily agree with those points, sir, but I do have some sympathy with them, being a true donkey and being a person who likes to pay great attention to prudence and to making the best use of facilities you have to hand. But we must remember, as Deputy Dorey said, this site is not lost to us. It is a large valuable site of great potential and, in one way or another, it will be, and must be, used again in a way that will be of benefit and service to the Guernsey community.

3105 Sir, I am very hopeful that the new facility will reduce the need for off-Island placements. I am sure this will reduce the anxiety and pain caused to family members who dearly want to maintain regular contact and be involved in the care, if possible, of their loved ones. I must just question a claim made in paragraph 89, page 287 – and I will just turn to it – it is the second sentence of the paragraph. It says:

‘Currently, the HSSD is short of suitable accommodation for looked after children.’

3120 Well, it has been reported to me that HSSD have a number of properties around the Island that are either under-used and one, indeed, remains empty... This may be inaccurate information or there may be good reasons for this, and perhaps I can speak to the Departments further on this matter in the coming days.

3125 Paragraph 21, sir, on page 274: this demonstrates the variety of therapies available to service users, I think re-emphasising the point that Deputy Gollop made last month, how essential the arts and crafts and create activities are. I think we underestimate these things at our peril. A splash of colour in a sometimes dark world can make so much difference. And once again, Deputy Dorey has alluded to this already on page 277, in regard to project management. So, I am very pleased, nay overjoyed, at the contents of paragraph 54, that is actually on page 281: steps are being taken to safeguard payments to sub-contractors. This is something I have been only going on about for about 10 years, and I am really pleased to see that they are actually being taken in this regard, because sub-contractors in the past have suffered on a number of occasions because this kind of measure was not in place.

3130 Again, on page 283, paragraph 69:

3135 'In addition, this contract is the first that has been subject to specific evaluation of the tenders in respect of the value of the benefit to the local economy.'

3140 Hallelujah! It is vital that the local workforce and the local economy benefit as much as possible from these projects, sir. Once again somebody is listening and I am grateful for that.

So I say, well done to the project team, well done to HSSD and I would welcome this project sir.

Thank you.

3145 **The Deputy Bailiff:** Deputy Lowe.

Deputy Lowe: Thank you, sir.

I am absolutely delighted we have got this Report, as I am sure have many others in the past that had assurances from what was then the Board of Health back in 1982, that the Castel Hospital would be replaced as their first priority. Here we are, over 30 years later, we are suddenly getting something before us. So, well done, HSSD: sorry it took over 30 years to come to fruition!

3150 But I just pick up here... we have had the debate – the previous debate – and we have got this debate here before us today, the next one about this building and it has been very much about the stigma, the stigma of mental health. We are trying to get rid of that stigma and yet the first thing I see on this Report here is that it is going to be called the 'Mental Health and Wellbeing Centre'. Please, HSSD, drop 'Mental Health', call it a wellbeing centre, call it a name after somebody, call it after Mary Lowe, if you like. I really do not mind. You know I have not –

3155 **Deputy Fallaize:** The Lowe Wellbeing Centre, perhaps? *(Laughter)*

3160 **Deputy Lowe:** I have not signed up to the IP, so my name has not been registered that it cannot be used, so I do not mind. I will not object.

3165 But, in all seriousness, I really really think it should either be named after somebody or it should be the Wellbeing Clinic. We do not have a cancer care centre, we do not have a diabetes centre, we do not have a geriatric centre, we *do not need* a wellbeing centre, or definitely not a mental health centre, so please go back to the drawing board on that one because I really do believe we have to get away from that. I was hoping the building was actually going to be attached to the PEH, so it would be the PEH People would be going to the PEH. They are going to be now in a block on the PEH site, so you are still going to have a certain amount of stigma that they are going to that unit 'over there', that actually is on the PEH site. So, again, it is even more important that it is called something else rather than this.

3170 So that is all I have got to say really, sir, because there is nothing else to say. I am just pleased it is here. I would just like that point taken up with calling it something else – and congratulations and I look forward to the opening.

3175 Thank you.

The Deputy Bailiff: Thank you.

Deputy David Jones, followed by Deputy Luxon and Deputy De Lisle.

3180 **Deputy David Jones:** Thank you, Mr Deputy Bailiff.

I just want to take Deputy Laurie Queripel's points a little further. It is good to see, in this Report, that there is now a system to protect local sub-contractors. The only problem I have is that many of these local sub-contractors, because they have been poorly dealt with in the past by a particular company, will no longer work for that company and that is the excuse that we have had at Housing, asking for licences to bring people in because they cannot get local sub-contractors to do the job. And that is not true. They can get local subbies to do the job but those sub-contractors will not go back because they have not been paid from times before. This is a real issue, so... this is really a message for SPP, I suppose, to look at this again. I did meet with staff at SPP – States Property Services, rather – and put forward my points on this, only to be told that the safeguards were in place. But those safeguards will not encourage sub-contractors to go back and work for a company that still owes them money from other previous contracts. That worries me greatly, so it will be interesting to see.

The other thing I would like to say, following on from Deputy Queripel, is the maintenance issue. We have had problems with the flat roofs at the Princess Elizabeth Hospital, a building that is not built all that long ago. The condition of some of the hospital outbuildings is pretty dire, mostly due to a lack of cleaning. Now, we could ask that we do not want money that is given to Health to be spent on clinical needs, to be spent on steam cleaning buildings. I would be the first to say that but, surely, in the States, through States Works or through some other Department, somebody should be looking at what we do to keep these buildings in good order.

I disagree over the Castel Hospital. I think you could never do anything, really, to that place to make it fit for modern purpose and, you know, I think that the other thing is about the name of the new centre: could be called the Lowe Point, (*Laughter*) if Deputy Lowe wanted to be associated with it? But I do agree I do not think that necessarily calling it the Mental Health and Wellbeing Centre is really a name for a building. It is what goes on inside it. We know that, but we ought to find something much more creative than that, and more uplifting than that, in my view, but I do want... I suppose it is for the Treasury Minister, really, to revisit this contract and to make sure that the contractor who is being appointed to do it is well aware of the concerns of many Members of this Assembly.

3210 **The Deputy Bailiff:** Deputy Luxon.

Deputy Luxon: Thank you, sir.

I just wanted to make some brief comments on two different elements. One was the need for this investment and the other one was the contract itself.

3215 Thirty-three years ago the National Health Advisory Service said Castel Hospital was not fit for purpose and something should be done about it immediately. My family home used to be at L'Aumone and my brothers and sisters used to avoid Castel Hospital because it scared the bejeebies out of us back then. It is not fit for purpose and I think today's debate, in terms of the Strategy we have just approved, if we needed any more evidence of why this facility and this investment should be made, I think we need to look no further. So I think the need is very obvious.

3220 In terms of the expense, £24 million does sound an awful lot and of course it is, although if you look at it, it is less than £400 per head of population. It is just over £1,500, on the basis that 1 in 4 of Guernsey's population of 63,000 will need to use a facility of this sort over their lifetime at some point. So when you start breaking down the number, and bearing in mind how long overdue it is then, in actual fact, it should not be a number that should frighten us.

3225 One benefit of the investment is, of course, that the Castel Hospital site will be freed up. There is no immediate need for it so it is a payback if you like for this investment. The States of Guernsey will be able to reutilise that resource for an alternative purpose.

3230 In terms of the contract, sir, I think the States of Guernsey received a lot of criticism over the years in terms of many of these major capital projects, in terms of their overruns both in terms of cost and budget. In recent times, it does seem as though our internal professionals and systems are controlling these contracts much better, and I think, as Deputy Queripel said, indeed, in this contract we are protecting States of Guernsey's funds, we are protecting the sub-contractors but it is also reflecting local economic issues in terms of local labour being used. I think we should equally say that the weighting, in terms of 60% on price and 40% on quality, I think demonstrates a very mature professional and appropriate outlook.

3235 So, sir, I have no problems in supporting this and, indeed, all I need to do is to think back to

the many excellent speeches this morning to remind me why this is a tangible commitment to starting that Strategy and commend it.

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Thank you.

The Bailiff: Deputy De Lisle, to be followed by Deputy Soulsby.

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Deputy De Lisle: Yes, sir, I am encouraged by the comments indicating that the budget has been reduced since last reviewed in this Assembly by £1.5 million or so: also the due and robust diligence checks on contractors that have been extended to include the parent company guarantees, and the new payment systems, incorporating the project bank account referred to on page 54, designed to protect the interest of sub-contractors and to encourage a more transparent approach to sub-contractor payments.

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These are all very commendable but I would ask the Minister about the vacant space in the existing facilities. £24 million is still an awful lot of money to be spending on a very limited number of people, actually, at any one time using the facility. And the recent shutdown of wards and the doubts cast on the effective and efficient use of the King Edward VII Hospital building, the question is whether all of this been factored in to assessing the need for a new building, given the resources already at hand. So I would like some answers with regard to that.

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And I would also like some comfort with regard to the headlines in the paper today, the newspaper, that a local firm has been caught in a States Works dispute, with the nominated mental health contractor owing a certain amount of money. That needs to be looked at again and I hope that the Minister can give confidence to the Assembly, that he will be actually prying exactly what is going on there with the nominated contractor for this job.

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I would also like to ask what, actually, the anticipated savings are estimated to be in future from the avoidance of off-Island referrals facilitated by the new building, as mentioned in paragraph 85.

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I have to commend, though, the Department for the final section of the Report on page 288, relating to conformity with States over-arching objectives. It rolls out the relevance of the project proposals to compliance with the over-arching strategic objectives of the States of Guernsey in the economic, social and environmental policy plans. And it goes beyond, actually, in illustrating how the strategic plans should be used to encompass an integrated way forward for future project development, incorporating socio-economic and environmental objectives of the States Strategic Plan – a very important point to be mentioned.

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On a related point, I am particularly encouraged to note how the environmental aspects of the project have been highlighted in paragraph 97 of the Report. It is relevant to comment on this aspect, given the Vision resolution whereby consideration of our environment will be core to all policy decisions. Departments have been instructed by Policy Council to identify and comment upon any significant environmental issues in all States Reports which are included in a Billet d'État and that the resolution is implemented in regard to any other relevant policy decisions and actions taken by Departments. This has been done in this Policy Letter particularly well, and it is a commendable example for others to follow. I look forward to responses from the Minister to my questions earlier.

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Thank you, sir.

The Deputy Bailiff: Deputy Soulsby.

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Deputy Soulsby: Sir, I am very supportive of the need for this new facility and believe it makes sense for it to be located on the PEH site.

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However, as the hospital site, and its surroundings, is on my patch, I would just like to raise the issue of the increase in traffic in the area that will clearly arise as a result of the relocation of services. I know that Oberlands residents have been updated by HSSD on progress made in this project and I have heard this directly from the residents themselves. But this Report is silent on the traffic implications of this new facility. We know there will be 50 additional parking spaces that will be created, assuming, as is inevitable, all spaces will be occupied on a daily basis. Certainly, based on the current position, where every space seems to be fully occupied now, I cannot see that this is going to be any different. There will be at least a *minimum* of an extra 100 car journeys every day likely to be made to and from the hospital site, and it is much more likely to be far more than that.

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I would, therefore, like the Minister to confirm that a detailed traffic impact assessment has been carried out by the Environmental Department and also ask him whether any consideration

has been given to changing the traffic flows around the hospital, particularly along the Oberland side of the site.

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The Deputy Bailiff: Deputy Gollop.

Deputy Gollop: Sir, conserving the trees in the area is a consideration that tree wardens and environmentalists have long had and Deputy Soulsby's points about the traffic are quite intriguing, because, many years ago, 'Living streets' in its early days suggested travel planning and the then Chief Officer of Health and Social Services Department was actually extremely supportive. He was, in fact, a bus user himself from time to time and I think it now is the time for the Health and Social Services Department to look at the campus – the growing body of facilities there – and institute travel planning. As an aside, a kind of micromanagement point, the few bus services that go to the hospital all leave and depart at the same time and actually meet at the Oberlands, which is not a particularly good idea. I have long felt that the Oberlands entrance route should, in fact, have some pavement attached and one or two of the fields acquired and shortened to make better walkways, where possible and feasible.

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Now, it was not the main issue, though. Why I got up to speak... for a start, we have all been lobbied today and before by representatives of mental health charities, Schizophrenia Fellowship, MIND, Mental Health Service Users, who have given us literature today, and before LVA or LVR, I am not sure – Deputy Le Tocq will have to help me there – but, how can they get better if they do not know what they are doing? That is their perspective: this is, admittedly, before the Reports were written. Please vote for the Mental Health and Wellbeing Strategy. How can we get better if we are stuck in a building that is not fit for purpose? Please vote for the funds to be released for the Mental Health new build at the PEH. So I thoroughly endorse that message

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I have, perhaps, one or two points that I think need to be addressed, though, and Deputy Laurie Queripel has already mentioned the deplorable state of the roofs on one of the not-that-old buildings. One aspect relates to Divette Ward and I hope that the facilities that will be built will be fully utilised but, at the same time, we do not unnecessarily hospitalise people and very much look to Jersey and take the best of what they offer as a communitarian approach, because there was a certain debate amongst users and professionals just how many beds were needed in the new facility and I think that is an ongoing question. Admittedly, it is not altogether a political one, it is a professional one but, inevitably, we are drawn in at the resource end of the equation: then I think that this appropriate management of the facilities, so that people feel relaxed, at ease, totally destigmatised in the new environment, at the same time protecting people who want privacy or who do not necessarily want to mix men and women, where there are issues, or men and children or whatever. All of those have to be carefully considered and looked at, and I believe that a lot of thought has gone into that process.

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On the cost side of it, we are aware that it is not cheap but it is not as expensive as it could be. A politician who has a wide understanding of building has said that the consultants' fees are not out of the way in terms of expense, at £2.6 million out of the total £24 million. But it does seem, to a lay person, a high figure. If one takes out the enabling works and the budget project continuity risk, which is another £1.7/£1.8 million, it rises above the 10½/12% mark to closer to 15 or 20%. That might, of course, be a reflection of the time we have taken on this project in the past.

My final point has also been referred to by Deputy De Lisle about a somewhat awkward *Press* story on the front page today. I do not feel at liberty to discuss any of it because there is clearly some work going on between the parties. But there was an abstract concern as to how Treasury & Resources cope with the situation, where a property has been handed over to them, perhaps in the future on this block, but there is an argument as to whether one element in the contract finished the job and how that actually works because, clearly, the States will only accept a property that is more or less signed off, and ready, fit for purpose. Clearly, that has to be watertight for this development. And that every safeguard be made that the payments are appropriately marshalled and that there are not issues with local sub-contractors. I would certainly like that assurance.

The Deputy Bailiff: Deputy Brehaut, followed by Deputy Ogier.

Deputy Brehaut: Thank you, sir.

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I, too, think it is a tragedy that Deputy Lowe has not had a public building named after her. Perhaps when Commerce and Employment open a new slaughterhouse they could... (*Laughter*) Sorry, sir, or an incinerator, of course.

It was just to, actually, challenge what Deputy Lowe said because there is nothing wrong with

3360 the expression ‘physical health’ There should be nothing wrong with ‘mental health’. We have turned all those mental health into a stigma and we are looking to de-stigmatise it, so do not change the language around. Let us not be afraid to talk about mental health. I thought that was the message that people should take from this meeting.

I only stand, really, to pick up the points identified by Deputy Soulsby and just to give an assurance that Dr Stephen Bridgman, the MOH, is working with the Road Transport Strategy Group. He is a member of the group and he is interested in concepts such as car sharing and travel plans and things of that nature. So these things are spoken about in relation to the PEH site generally and, hopefully, the intention is that they inform the Road Transport Strategy so that anyone, at any stage, can have input into that consultation.

3370 This is the day that I anticipated because of my interest in HSSD and mental health, in writing a very long speech, but I decided not to – and you will be pleased to hear that – simply because it is not needed! This is not a good day at the office. This is an *exceptional* day at the office. Today we signed off a Mental Health and Wellbeing Strategy and we are building a new mental health facility. This is a *fantastic* day. We do not need many words today. We just enjoy the day, embrace the moment, knowing we are delivering something to the community.

3375 Thank you. (**Members:** Hear Hear).

The Deputy Bailiff: Deputy Ogier, then.

Deputy Ogier. Thank you, sir. I will be brief.

3380 I just really want to ask a question on a technicality. In paragraph 64 we see that this is one of the first that we have seen with a benefit for the local economy weighting and I am very pleased to see that in some of the tenders that are coming forward. I think it is long overdue.

3385 What I am slightly concerned about is how we measure that, and how we ensure that it actually occurs. Because it seems an easy 4% of the overall tender to pick up, by saying we are going to do this, we are going to do that, we are going to employ these people, we are going to sub-contract to those... But if it is not delivered, you have given away a 4% advantage to another company that did not include a local benefit section – and for no reason.

3390 So my question is how do we measure that? How do we ensure that it occurs and how do we monitor it and make sure that this Island gets the value that the successful tenderer has said they will get?

Thank you.

The Deputy Bailiff: Deputy Bebb.

Deputy Bebb: Thank you, Mr Deputy Bailiff.

3395 I would simply like to address some of the points that have been raised in debate. Some people have asked about the suitability of the Castel Hospital and I think that anybody who has had experience of being around the Castel will understand that the building is now old, beyond belief. It is wholly inappropriate to be putting people into what was really an old Victorian hospital.

3400 To give an example of why that type of building is inappropriate, I was recently visiting the Albecq Ward there. I have to say that I was amazed as to how well people were actually coping there, how good it looked, given the constraints and the difficulties of it. But you only have to scratch the surface to start noticing the deficiencies in that ward. One of the very clear deficiencies is that beds are larger than the width of the doors. Therefore, any patient who needs to be restrained or is actually showing very temperamental behaviour, the bed would have to be put on its side in order to be dragged out of the door to then put the patient into the room and lock the door. And if anybody thinks that that is a quick and easy solution that it is acceptable in modern day services, then I have to say that it is obviously not. And making beds smaller just does not happen with regard to Health Services. Indeed, the practice is that the beds are slowly but surely getting bigger.

3410 I would also like to refer to the outbuildings at the Castel Hospital. They are pre-fab buildings, long overdue demolishing and it is inappropriate that we continue to say that that is a suitable place for people to be accessing services. So, in relation to the suitability of the Castel, I fully appreciate, I understand Members’ feelings that we have a building and we should utilise it to the best of our abilities. But this building is no longer fit for purpose. I remember, the first time that I turned up to the Castel, it took me ten minutes to find out where the porters’ lodge was, never mind anything else. And that is just not really suitable with regard to the context of the services that it should deliver. Questions were also asked with regard to accommodation by HSSD: we are reviewing the full list of our services and the sites and all of those. Whereas there might be some

3420 places that are currently vacant, if they are vacant there are plans underway in order to deal with
them, those places. And the whole portfolio of buildings is being investigated and I would like to
assure Members that that is a rolling, continuous project but it has specific focus at this point in
time. As to the future use of any properties that HSSD no longer requires, obviously that would
then go back to Treasury & Resources and it would be up to them to dispose of or deal with the
properties in the manner that they see fit. I definitely would not like to comment, and I have no
3425 idea what you would do with an old Victorian hospital. Thankfully, that is not going to be my
problem.

With regard to the upkeep of buildings, as well, I recognise that Members have seen in the
Press recently pictures of specific fairly recently-built buildings. The Department is fully aware of
the problems. It is investigating it further and when we have a resolution, of course, we will deal
with it. But it is a little bit more complicated than simply the fact that there has been no upkeep. It
3430 is a fairly complex situation. I will not bore Members with the full details of it at this point in time.
I am not sure that I fully understand everything with regard to flashings and other sorts of
technical terms myself but I am aware of the circumstances. I do understand the whole problem it
is very complex and I would quite happily discuss that with any Member who has interest.

That brings me to my final point. Frequently I hear the terms of 'I am asking this Question, I
3435 am asking another Question and, of course, this is the first time that the Department has heard of
it. The Department is more than willing to receive any questions on a regular basis but, generally,
Members present will receive a better response if they come in person and discuss the issues that
are of greatest concern to them, one to one. Therefore, this is an invitation to *all* Deputies that,
should you have concerns, it is an open door at HSSD for all Deputies to come in and discuss
3440 specific issues, because it is very difficult, in relation to a number of the services that are provided
by HSSD, to give a full and frank answer in what would be a very public forum – especially given
the very difficult nature of providing services to a very small community and ensuring the privacy
that is essential in delivering those services.

Therefore we are sometimes in a difficult position and I would extend that invitation heartily to
3445 all Deputies. If you do have concerns, please do come in, talk to either Members, Deputies on the
Board or Members of the Department and please do make time in order to understand the issues
that are happening there.

Thank you.

3450 **The Deputy Bailiff:** Deputy James.

Deputy James: Thank you, sir.

I really did not intend to get up and speak to this, but whilst, to a certain extent, I can
3455 understand why people are making passionate speeches to ensure that we get the new building – of
course, I support that 110% – some of the words being used today... we are painting a picture of
the Castel Hospital as a house of horrors. What I would suggest to you, there are patients currently
in those beds, there are staff working there and if we vote for it today, the new build, we will be
lucky if the new build will be occupied within two years. How would you, or any of your family
3460 members at home listening to this debate, knowing that you need to be admitted to the Castel
Hospital... so what I would suggest to you... I think the message is well and truly understood that
the Castel Hospital is no longer a modern facility, but let us stop painting this picture of this awful,
dreadful place of horrors, because I can assure you it is not.

Thank you.

3465 **The Deputy Bailiff:** Is anyone else standing to speak in the debate?
Deputy Storey. And then Deputy Lester Queripel.

Deputy Storey: Thank you, sir.

I thought I needed to speak about the new... shall we call it the Wellbeing Centre, because, as
3470 a new Member of HSSD, I personally felt I needed to be convinced that it was necessary, and that
we really needed to spend the money. Members know that I usually like to follow the money, so I
wanted to understand. Basically, I am convinced and the reason – I would just like to give you the
reasons. First of all, it is because this new centre is really the cornerstone of the strategic plan for
the Mental Health and Wellbeing Strategy.

3475 As far as I am concerned, there are three main reasons for building this new facility. The first
one is that we need to show that we care for those people with mental health problems. Secondly,
we need to do all we can to get rid of stigmatisation and, thirdly, I have been convinced that the

Castel Hospital is really not fit for purpose for the 21st century.

3480 If I can just cover those three points very briefly. The main building at Castel is a severe
austere Victorian building, located in a sort of semi-rural location, a bit out of way. If you did not
know it was there, you would drive straight past on L'Aumone and you would not get there. To
me, it is only too reminiscent of the out-of-sight, out-of-mind attitude of the post-War period. The
building does not look well maintained and it is never likely to be. It is not welcoming. To me, it
3485 says 'We don't really care about this facility, we don't really care about mental health and we
don't really care about you, the patient.' Now, this cannot be further from the truth. We do care,
but that is not the message that the Castel Hospital and that facility gives out. I believe a new
purpose-built facility would change this.

3490 Stigmatisation: well 20-30 years ago there was a stigma attaching to having cancer, and I
believe we have successfully combated this. But, as others have said, I am sad to say that a stigma
is still felt by those experiencing mental health problems. And this stigmatisation, I believe, is
enhanced by patients having to go to the Castel Hospital for consultations or treatments: it is
different, you do not go to the same place people go to for physical treatment. You go somewhere
different, and somewhere that does not look that attractive. So building this new facility at the
3495 PEH site will say, out loud, that mental illness is not really different from a physical illness and a
new purpose-built facility will enhance this attitude and do a great deal, I believe, to combat the
current stigma patients feel about mental problems.

3500 Finally, the fact that Castel is not really fit for purpose: well a report produced in the 1980s, as
others have mentioned, stated that Castel Hospital was not fit for purpose, and although there have
been changes since, they cannot be really fundamental changes because of the nature of the
structure of the building. Once again, out-of-sight, out-of-mind. At present, Albecq Ward
accommodates 21 inpatients but there is no real way of segregating male and female patients, nor
are there adequate methods for segregating patients with different nursing needs. The proposed
new building would be split into five dedicated areas, including a separate young peoples area. It
will provide 18 acute medical health beds, with provision for separating male and female patients
3505 and there will be an 8-bed assessment ward for elderly patients. Also – and I think this is quite
important – there will be decent rooms for patients to consult specialists. When you go the Castel
and you go for a consultation, the room you go to looks like... well, it might have been a public
toilet, for the ambience in the room. It is not good and there will be an enhanced facility to enable
safe containment for patients exhibiting high levels of distress and enable them to be stabilised
3510 prior to assessment and accessing treatment.

3515 Sir, the new development could also provide help for patients with eating disorders and
mothers who are showing signs of significant pregnancy related distress, who could be
accommodated with their babies, and this is quite an important factor in mental health. Now I
accept that the new centre is now budgeting to cost up to £24 million, but that is less than the
previous estimate of £25.4 at the time the project was approved in the capital prioritisation
process. It is a lot of money but I really believe that this new Mental Health and Wellbeing Centre
is absolutely essential and will bring benefits in the long term. And I hope you would agree. I do
ask you to please support all the four propositions so that we can get this centre built and move
these services from Castel to the PEH site.

3520 Thank you, sir.

The Deputy Bailiff: Deputy Lester Queripel, to be followed by Deputy Conder.

3525 **Deputy Lester Queripel:** Thank you, sir.

Sir, I have taken note of the Minister's suggestion that, perhaps, a meeting with him and the
HSSD staff would be more beneficial than submitting Rule 6 Questions about the new centre, but
the point I rise to make is that answers to Rule 6 Questions are to be provided within 15 days.

3530 Very often, unfortunately, it takes several weeks before Departments and members of staff can
fit a meeting into their hectic schedule. An example of that is that I recently had to wait five weeks
for a meeting with a member of staff and, in the meantime, parishioners are often waiting patiently
for answers. That is one of the reasons why I submit Rule 6 Questions on behalf of parishioners
because I know that I can furnish them with the answer within 15 days, sir, so I just rose to make
that point.

3535 **The Deputy Bailiff:** Deputy Conder.

Deputy Conder: Sir, I rise to speak on a medical matter.

3540 I was so concerned about Deputy James' blood pressure during Deputy Storey's speech but I would make the case, as she did, that the Castel Hospital is a fit-for-purpose building because of its staff, and I should declare an interest, inasmuch as my wife worked there for nine years prior to her retirement.

3545 I know a little bit about education as, so often, poor teaching facilities are at risk because of the quality of teachers. Occasionally, poor medical facilities, I am sure, are at risk because of the quality of the medical staff so I think, as Deputy James said, we have to be so careful in what we say about this facility. (**Members:** Hear, hear) I am slightly light-hearted but I am serious... I was concerned about Deputy James during Deputy Storey's speech so I thought I should say what I have just said. Let us actually support the staff there until they get a new facility. And I urge colleagues to do that and I also, of course, urge colleagues to support all the propositions.

3550 Thank you.

Deputy Storey: Sir, can I just say, in my defence there, that I certainly was not trying to suggest any detriment to the staff at Castel Hospital. In fact, what I did say was that the *building* says we really do not care about the facility but nothing can be further from the truth: we do care. The message the building gives out is what concerns me.

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The Deputy Bailiff: I do not see anyone else.
Oh, Deputy St Pier.

3560 **Deputy St Pier:** Sir, I shall be brief but I rise primarily to answer a number of questions which have arisen during the debate, which I may be in a slightly better position than the Minister for HSSD to respond to.

3565 The Treasury and Resources Board comment on the States Report is, of course, set out on pages 208 and 209 of the Billet. As Members know, it is, of course, the last project in the current capital prioritisation programme and, despite Deputy Brehaut's comments about this being a 'good day at the office' – with which I would agree – there will, of course, be many people outside this Assembly who, in the current environment, will be wondering what on earth we are doing contemplating spending this sort of money on this facility at this time. I think it is incumbent on me, as the Treasury and Resources Minister, to offer the reassurance to those that do have their concern, that this is a capital prioritisation project which has been provided, that has been planned for some time and has been provided for within the current capital prioritisation programme. It is budgeted, as we know, at a cost that is less than the last estimate and, as the Minister has pointed out, it will release back to the States the Castel Hospital site.

3570 As Deputy De Lisle and others have mentioned, what will then happen to the space available... of course, consideration of the space that is freed up is very much part of the strategic asset management plan part of the Financial Transformation Programme, which is obviously aware that this project is potentially in train, subject to today's decision.

3575 Sir, I would just like to draw Members' attention to a few of the key issues which have been addressed in the Report and which have come up in debate, as well. As the Minister has said, it has been noted this project is utilising this project bank account through which sub-contractors will be paid. As we know, cash flow is, of course, absolutely critical to any business. Whilst, of course, a project bank account does not eliminate *all* the risk to the project of financial problems being encountered by the main contractor, it will ensure better protection for sub-contractors. It should be emphasised that there is no reason to expect any particular financial challenges with the main contractor, as against any other, and appropriate financial due diligence has been undertaken, as is reported in paragraph 89 of the Report and as, again, Deputy De Lisle drew attention to in his comments. It is simply a reflection of the current economic environment, together with prior well-publicised experiences to which Deputy David Jones referred on some other projects. So this is simply a pragmatic response by the States and the main contractor to provide reassurance to sub-contractors on the project and it should be welcomed as, indeed, it has been today.

3580 In relation to Deputy de Lisle and Gollop's questions in relation to the topic which is on the front of today's *Press* – I have not actually seen the article myself – I am probably in a slightly better position than Deputy Dorey to comment on this because States Property Services has played a role in seeking to arbitrate the particular issue, but I think it is important to emphasise that this is a commercial dispute between the contractor and the sub-contractor. I think, again, just following on from that, in relation to Deputy David Jones' comments, I think we do need to draw a distinction between commercial disputes and between non-payments. And the project bank account has been set up to deal with the latter problem of non-payment. There may still well be

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commercial disputes which are part of the risk of any project.

3600 It has been noted in paragraph 84 of the Report, and as the Minister alluded to, the revenue costs for running the new centre are anticipated to be £25 –£30,000 a year less than the running costs for the current facility. It also noted, of course, that the new facility should also avoid some off-Island referrals which are, of course, particularly expensive.

3605 Finally, paragraph 86 notes that, again, we did mention this in the previous debate, the Mental Health and Wellbeing Strategy *itself*, rather than the building, may, in the longer term, require new resources and this will, as again is noted in our comments, be subject to the established business case and new service development process.

So the Treasury and Resources Board does support this project and, indeed, the propositions.
Thank you, sir.

3610 **The Deputy Bailiff:** Minister to reply to the Debate, then, please, Deputy Dorey.

Deputy Dorey: Thank you, Mr Deputy Bailiff.

3615 Deputy Laurie Queripel opened the debate, after myself, and he spoke about maintenance of the buildings. I think States Property Services ensures that Departments have adequate resources to maintain the buildings and that is part of the ongoing costs of a building because there is no point allocating the capital without allocating the ongoing revenue. I think the States has learnt from that and that is the situation with there... there is the maintenance and, like all buildings, there is a proper maintenance plan set up.

3620 People have spoken about the situation with the Lighthouse Wards. I believe the problems stem from when it was originally built... and there are ongoing problems. I can assure the Deputy and the Assembly that I am taking a very keen interest in that situation. I am getting regular update reports on what is happening and we are, as a Department, committed to solving the problem because it is, in my view, unacceptable to have a building that leaks.

3625 Off-Island placements were mentioned: we envisage that there are some acute off-Island placements which currently are necessary because of the inadequate facilities we have. With these new facilities, we will be in a situation where we will not have to place these people off-Island because we will have sufficient facilities due to the new building.

3630 He mentioned about sub-contractors and the local economy and someone is listening: yes, hopefully, I think the States has gone through a major change, when you look back at the situation at the beginning of this century, with projects going overspent and overspending. We have had a major change through T & R and the States Property Services and now we are far better at managing projects and we do listen to the political will of the day. Hence the reflection and the fact the set up for sub-contractors and also the valuation of the use of the local economy.

3635 I think it has been anticipated that just under half the total construction costs will be provided by Guernsey companies. I have been provided with a list of the companies which will provide that, and that also includes the use the supply of non specialist materials as well, so the majority of non-specialist materials will be purchased locally and this... *[Inaudible]* 100% of local non-specialist sub-contractors will be used to complete the project. That, obviously, is one of the reasons why the particular contractor scored highly on that benefit to the local economy weighting in the evaluation of the tenders.

3640 I think Deputy Lowe mentioned about the delay from when it was originally proposed. One of the benefits of that delay is that the design of the building has considerably changed over the years and we have been informed that we now have a far better building, designed for the purpose, than we would have had in earlier years. Also, she mentioned about the name of the centre: well, the name included in the Billet is a working name and we have yet to decide on the actual name for the building when it is completed.

3645 I emphasise that the building will not just free up the Castel Hospital, it will also free up Bell House. But we are proposing to use that, as was mentioned, for children's accommodation. And I think it must be emphasised that this building is not just an acute hospital ward. We envisage that there will be 2,500 – 3,000 referred to Mental Health Services per annum. There are many other parts of the service, including the professionals, who would have consulting rooms there and also the day services and also the Children and Adolescent Centre so, when you think about the cost of the building, it is providing all those additional services and, of course, it is not a simple building because it involves making use of an existing building and also a new build on to the back of it...
3655 so there is a combination of conversion of an existing building and new build.

It is mentioned about the environment: there will be solar panels on sections of the roof to assist with hot water; we utilise steam from the PEH incinerator which we have diverted to new

development; there is little mechanical ventilation in the new development, majority by natural ventilation; and having movement sensor LED lights, to name but a few.

3660 Deputy Soulsby mentioned about traffic. Part of any application for planning permission includes consideration of traffic and, obviously, that is for the Environment Department: that was part of the application and they obviously approved of the site. We did write to Traffic, requesting making the road one way but it was rejected: however, for the duration of the project we will reduce the speed limit to 20 miles an hour.

3665 I think I have covered most of the points. The only thing I would say, sir, comments have been made about the existing Castel Hospital site, I think when the previous HSSD Board made a decision to progress with the medical block at the PEH, rather than this block. The decision was made also at that time – I think they spent about £250,000 upgrading the acute ward at the Castel Hospital, so it has been upgraded – you can make many comments about its being fit for purpose
3670 but the actual building is a beautiful granite building which is in a rural environment.

Finally, I hope I have answered all the points that people have made. Just one other point to Deputy Lester Queripel, if he does ask for a meeting we will try and meet you as quickly as possible and, please, if there is delay, come back to me and chase me! (**A Member:** Chase me! *Laughter*)

3675 Finally, I would just thank the Assembly for unanimous support of the Strategy and I hope that we can also unanimously support this building, (**Deputies:** Hear, hear.) which is greatly needed. I think Deputy Brehaut talked about what a brilliant day it was. I think the final bit of the jigsaw will be when the Commencement Ordinance for the new Mental Health Law, which will be in the March debate... That will complete a very major change to our mental health facilities, our
3680 Strategy and our Law.

Thank you.

The Deputy Bailiff: Deputy Ogier, you are rising.

3685 **Deputy Ogier:** I did ask a particular question on the weighting of the benefits to the local economy which I do not think was dealt with in the course of that summing up.

The Deputy Bailiff: Thank you, Deputy Ogier.

3690 **Deputy Ogier:** Would it help if I re-summarised it?

The Deputy Bailiff: No, no. I am sure that Deputy Dorey remembers it. Are you minded to answer that or is that something you can deal with another time?

3695 **Deputy Dorey:** I did try and answer it: perhaps I did not mention Deputy Ogier's name directly.

I said that it was anticipated that just under 50% of the total construction costs would be provided by Guernsey companies so that the local element... also the builder has a strategic objective, which is co-ordinated with Employment and the Education Department, to enable them
3700 to create opportunities for a minimum of 20 unskilled Islanders, in order that they can gain skill sets to enable them to contribute to the local economy.

So those are the two main elements of the contribution to the local economy, if that is the question that I understand he is asking.

3705 **Deputy Ogier:** I was just wondering how we police that and how we ensure that that comes to pass?

Deputy Dorey: That is part of the project management of the project, as I did use the word 'anticipated'. That was very carefully used. That was part of their tender and, obviously, it is
3710 subject to commercial decisions made but we do, as you know, have project boards and we carefully manage the contractors. But I cannot give you any assurance, as I am not able to do that.

The Deputy Bailiff: Well, Members of the States, we have got four Propositions. They appear on pages 290 and 291 in the Billet. Again, unless anyone is inviting me to put them separately, I
3715 was going to put them collectively.

Those in favour; those against.

Members voted Pour

3720

The Deputy Bailiff: I declare that resoundingly, unanimously carried. (*Applause*)
That concludes the business for this month. Can I add my congratulations for a good day at the office. (*Laughter*)

THE GRACE
The Deputy Greffier

The Assembly adjourned at 5.25 p.m.