



OFFICIAL REPORT

OF THE

STATES OF DELIBERATION

OF THE

ISLAND OF GUERNSEY

HANSARD

Royal Court House, Guernsey, Thursday, 30th January 2014

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Present:

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

Law Officers

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

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, L. S. Trott

The Vale

Deputies M. J. Fallaize, D. B. Jones, L. B. Queripel, M. M. Lowe,
A. R. Le Lièvre, 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, P. A. Luxon,
M. G. O'Hara, F. W. Quin, M. P. J. Hadley

Representatives of the Island of Alderney

Alderney Representative L. E. Jean, and
Alternate Alderney Representative, R. N. Harvey

The Clerk to the States of Deliberation

S. M. D. Ross, Esq. (H. M. Senior Deputy Greffier)

Absent at the Evocation

Miss M. M. E. Pullum, Q.C. (H.M. Comptroller);
Deputies J. A. B. Gollop (*relevé à 10h 00*), A. Spruce and R. W. Sillars (*relevés à 9h 46*)

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States of Deliberation

*The States met at 9.30 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 Senior Deputy Greffier

EVOCATION

Billet d'État IV

HEALTH AND SOCIAL SERVICES DEPARTMENT

I. Health and Social Services Department – Motion of No Confidence in the Minister and Members – Debate continued

Article I.

The States are asked to decide:-

Whether, after consideration of the Motion of No Confidence in the Minister and Members of the Health and Social Services Department dated 8th January, 2014, signed by Deputy M.P.J. Hadley and six other Members of the States, they are of the opinion:

1. That pursuant to Rule 18 of the Rules of Procedure, the States of Deliberation have no confidence in the Minister and Members of the Health and Social Services Department.

2. To elect:

(1) a sitting Member of the States as Minister of the Health and Social Services Department to complete the unexpired portion of the term of office of Deputy M. H. Dorey;

(2) four sitting Members of the States as members of the Health and Social Services Department to complete the unexpired portions of the terms of office of Deputies M. J. Storey; E. G. Bebb; B. L. Brehaut and S. A. James MBE to serve until May 2016 in accordance with Rule 7 of the Constitution and Operation of States Departments and Committees.

The Senior Deputy Greffier: Billet d'État I, Article III, the continuation of the debate.

5 **The Deputy Bailiff:** This is very impressive, nobody else wishes to speak. (*Laughter*)

Before I invite the next Member to speak, and that will be Deputy Le Pelley to be followed by Deputy Ogier, can I just remind you of what I said during the course of Deputy Brehaut's speech at the end of yesterday. The grounds are set out in the Billet d'État in the Petition from the seven Members. This is a Petition of No Confidence moved by seven Members and not just by Deputy Hadley. It is not just a Motion of No Confidence in Deputy Dorey as the Minister, but all the Members of the Board of the Health and Social Services Department. So, please can we concentrate on the grounds, not make personal comments about individual Members one way or the other, and please can we respect the convention that we do not name individual civil servants?

15 **Several Members:** Hear, hear.

Deputy Bebb: I am sorry, *Monsieur le Député Bailli*, but I must disagree, because there are instances that go beyond the Vote of No Confidence which actually relate to the behaviour of certain Members and

that needs to be addressed as well as a part of this debate. Therefore in my speech, when I speak, I will be making certain references. I apologise to Members but I feel that that is necessary for this debate.

The Deputy Bailiff: Well, Deputy Bebb, if I may remind you of Rule 11(3), that you are to observe due decorum in a meeting and in particular to observe the Rulings of the Presiding Officer. (**Several Members:** Hear, hear.) If you fail to do so, then there will be consequences, it is as simple as that.

Several Members: Hear, hear.

Deputy Brehaut: Mr Deputy Bailiff, yesterday in my speech, I did make specific references to Deputy Hadley, and you were right in correcting my references so explicitly to Deputy Hadley. I think my fault was that I responded to Deputy Hadley's speech, which in itself made references, which were different actually from the motion that was placed before us.

So, again, I apologise if I was disrespectful to Deputy Hadley, but it stemmed from the nature of the speech that he gave.

Thank you.

The Deputy Bailiff: And I understand that Deputy Brehaut, but that is why I am trying to draw things back to where we need to be, bearing in mind the other business that we have at this meeting.

So, Deputy Le Pelley.

Deputy le Pelley: Thank you, sir.

This Motion of No Confidence was raised at a meeting of the St Sampson's Douzaine in the presence of two of the St Sampson's Deputies, myself and Deputy Stewart. The other four Deputies were, for various reasons, not present. The matter was given a good airing. They are, I think, truly grass roots concerns, and I would like to share them with you. What follows is a mixture of points made at that meeting by various Douzaine members and questions that I have of my own.

There have been some misleading statements. I asked the question or the questions were asked, were they done deliberately, innocently, or through sheer incompetence?

Leadership: what qualities have been evidenced throughout the Minister's term of office, and that of his fellow Board Members? There has been apparently some blaming or criticism of others, the previous Board of 2008 to 2012 – how relevant is this? Indeed the previous Board of 2012-13, but it was pointed out that the Minister did choose two of the previous Board in an attempt to have continuity. There is a responsibility for actions there and there was an overlap. So where does the blame lie, if there is any blame to be laid?

Service standards and satisfaction of patients and staff were discussed. Is everyone content?

Reality is what it is perceived to be, not necessarily what it actually is. Poor media coverage cannot just be brushed aside. Has the Health Service been brought into disrepute?

Here I would like to thank Deputy James and Deputy Storey for addressing some of the issues that I would have liked them to talk about. In fact, when I tried to get your attention yesterday, sir, I was hoping to speak ahead of some of the Board Members so that they could perhaps answer some of the questions that I had, but I did not quite catch your attention in the right way – my apologies.

There was some concern expressed about the Board's internal relationships. I really would liked to have heard a whole lot more about the feelings of the Board Members, and about the smooth running, or otherwise of this particular Board.

As an aside, and in response to a comment made in his speech by Deputy Storey, I should like to ask why should HSSD get a pat on the back for an underspend, when that underspend has been achieved solely by not providing a service for which they had been specifically charged? (*Interjection*) Please come back at me later.

There has been a PAC review, and that report is in part critical.

The Minister came into position in 2012 with a promise to sort things out, and to replace curtailed services. Has this happened, and if not, why not? I appreciate that all is fair in love and war, and politics probably. The question was asked what role did the current Minister play in ousting the former Minister and his then Board, and has this brought anything into play in this Vote of No Confidence?

The Deputy Bailiff: Deputy Le Pelley, that is not one of the grounds that has been put in the Petition, so please can you concentrate on what is in the Petition.

Deputy Le Pelley: Thank you, sir.

One question that I would like to have addressed is how many people have contracted bowel cancer by the bowel cancer screening programme not being fully funded? Even if the answer to this question is none, how many people have been put at risk by not having cancerous polyps identified at as early a stage as

80 possible? It has been said that FTP savings must be met, but at what price, and is this fair that this budget actually be moved around?

Deputy Dorey: Point of correction.

85 **Deputy Le Pelley:** Answers to these questions by all or some of the Board will enable me –

The Deputy Bailiff: Deputy Le Pelley, point of correction from Deputy Dorey.

90 **Deputy Dorey:** He has referred now to it twice: the service that HSSD provided is exactly in line with the service that was decided upon in January 2012, and the staff have followed that for two years, exactly the service that was decided upon. That is all we have done.

Deputy Pelley: Thank you, sir.

95 These were concerns expressed by people at a Douzaine meeting. I am quite happy for you to correct them and answer them when you come to give your final speech.

Answers to these questions by all or some of the Board will –
I will give way, sir.

100 **Deputy Hadley:** Mr Deputy Bailiff, I was going to leave this particular issue to the end, but because it is likely to come up in the debate, could I correct Deputy Dorey on this particular point, sir?

The Deputy Bailiff: I do not think you can make a point of correction – well, are you saying that Deputy Dorey has misled the States?

105 **Deputy Hadley:** He is misleading the Assembly, sir, yes.

The Deputy Bailiff: Okay, a point of correction.

Deputy Hadley: I can speak, sir?

110 **The Deputy Bailiff:** Yes, I am saying you can make a point of correction.

115 **Deputy Hadley:** Deputy Dorey has on several occasions, throughout today and in the media, referred to the fact that the Board of which I was a member, on 20th January 2012, agreed to screen one cohort. Now, originally some weeks ago I asked the Acting Chief Officer of the Department for a copy of the minutes of that meeting. As Members are aware, I did not obtain them until after the intervention of the Comptroller to get them released to me.

Subsequently, I have also obtained a copy of the original minutes, so I have got two copies, one provided by the Acting Chief Officer, and one that I found in my own papers.

120 These minutes make it absolutely crystal clear, sir, that the Board in 2012 agreed to screen two cohorts. And, I would like to read from the minutes, sir. It says:

‘to invite both men and women of two cohorts to attend for screening at the Princess Elizabeth Hospital.’

The Board agreed unequivocally to screen 60-year-olds and 65-year-olds. (*Interjection*) Now –

125 **The Deputy Bailiff:** What is your point of correction, Deputy Hadley?

Deputy Hadley: To try and ascertain whether in fact this has been changed at any point, I also asked the Acting Chief Officer for an extract from the minutes of every meeting that I attended when bowel cancer screening was in fact discussed. I have those minutes with me, sir, and at no point can I find any reference to the fact that the policy had been changed or that the Board had agreed to it.

130 There are several references to things that I had brought up regarding bowel cancer screening, so that in fact on 20th January I asked about the savings that would be made due to the initiative of bowel cancer screening, because I have always maintained it was an initiative that would save money rather than cost money, and at that meeting the Chief Officer said that the Department was working with the King’s Fund and the Chief Economist, Andy Sloan, the –

135 **The Deputy Bailiff:** Deputy Hadley, I am going to stop you there. You have made your point of correction. You can obviously reply to the debate in due course. Deputy Le Pelley to continue.

Deputy Le Pelley: Thank you, sir.

140 There is obviously something not quite right here. Because both of these learned Deputies cannot both be right. Somewhere down the line is the truth. Where is it?

Now, yesterday we paid a lot of compliments and paid our respects to Alderney Representative Paul Arditti. I serve on the Scrutiny Committee, and I regarded him as something of a friend and a mentor, and he has in the last two years, just under, made it quite evident that everything that is said has to be evidence based. You have to have proof, you have to have clarity. The reason why I am asking these questions is so
145 that either the *requérants* or the defending Board can actually put me right and explain the answers. Let us have the information, let us have the evidence.

I appreciate, sir, that one has to address the causes as laid out in the Billet, but we are in fact in front of a much wider audience than that. We have the people of Guernsey listening in to this debate, probably even further afield than that. And I think the people of Guernsey need to know the answers to what is going on
150 here. A Vote of No Confidence in a Board is a very, very serious thing, but then so is the health and wellbeing of the people that have elected us to be in this position here today. (**Several Members:** Hear, hear.)

I do not want glib statements, sir. I do not want something that says, 'We will attend to it, we are looking into it.' I want to have a lot more information, a lot more meat on the bone than that. I want to
155 know who, why, what, where and when. That is the kind of evidence I am looking for. And, I hope, sir, in the coming speeches that some of that information will be put forward, because until I have got enough information I cannot make a decision one way or the other.

Thank you, sir.

160 **The Deputy Bailiff:** Deputy Greffier, we note that Deputy Sillars and Deputy Spruce have both arrived – do both of you wish to be *relevés*? So we will *relevé* both of them.

Deputy Ogier, to be followed by Deputy De Lisle.

Deputy Ogier: Thank you, sir.

165 I was told when I was a young man that going through a load of old books would make me a bookworm. I wonder what going through a load of tapes makes Deputy Fallaize. (*Laughter*)

When I first heard about the Vote of No Confidence, I was doubtful that it was the right motion. I said I was supportive of Deputy Hadley's scrutiny of HSSD and I said I felt the research which went into the original answers by HSSD was not sufficient. And I applauded Deputy Hadley for his work in pulling at a
170 loose thread to see where it went.

Now, I think it is regrettable that HSSD did not get their figures right on formal questions to this Assembly. But I did not feel that it was a resignation matter. I told Deputy Hadley I admired his work, but I felt that I would chastise HSSD on this issue from the floor of the Assembly.

But Deputy Hadley has done exactly what he should do, which is pull at a loose thread and see where it
175 leads. There are few with that tenacity in this Assembly. There are a few, but it is a club with a rarefied membership, and I like his questioning. I may not always like what he does with the answers, but I like that he pulls at something until an answer comes out. (**A Member:** Hear, hear.)

Now, HSSD may feel harassed, but HSSD cannot give Members such inaccurate answers to written questions. Now I am not saying it is all right to give information which is incorrect to any Member, but to
180 give inaccurate information to Deputy Hadley is not asking for trouble; it is demanding it.

When Deputy Dorey explained the uncovering of this information had led to a significant amount of staff hours, he managed to make it sound like it was a service that HSSD had undertaken to invest this much staff time in extracting information. But, I see this as part of a problem – that significant amounts of staff time had to be invested in what should really be ready-to-hand management information. It does make
185 me wonder what other areas of expenditure are not undergoing scrutiny by Board Members or senior managers (**A Member:** Hear, hear.) due to accountancy practices. I am not going to use the word 'esoteric'... I just did. (*Laughter*) How do the senior management give proper financial scrutiny for the areas under their control without this kind of reporting?

I ask what will be the next area of the HSSD budgets to be discovered that the financial controls are not
190 sufficiently robust to give this kind of ready information. That is not a rhetorical question. What other areas of the HSSD budget suffer from a lack of transparency as this cost area has done? (**A Member:** Hear, hear.) If it takes such an investment in staff time to obtain answers to reasonable questions, it seems to me this can only lead to a reduction in scrutiny. It certainly does not facilitate scrutiny either by Board Members or by other Members of this Assembly.

195 And, I think Deputy Hadley made a good speech, and has made as decent a fist of this as was possible. But, I am unpersuaded this is a resignation matter. I do think HSSD have made mistakes and I think they should put the emotion to one side and concentrate on what this Assembly wants them to do, which is

scrutinise the financial information of their Department. I want them to extract what needs to be learned and gain from this experience, but I am not currently minded to call for resignation.

The Deputy Bailiff: Deputy De Lisle.

Deputy De Lisle: Thank you, sir.

I have been disappointed with some of the reporting in the lead up to this debate, especially the jockeying for positions on the Board and seeking retribution for past Board upsets. But that is not what all this is about, in my book.

People are reporting to me lengthy waiting times to see specialists; surgery cancellations, with little notice; infections on leaving hospital; concerns over the under-resourced cardiology unit; and now the issue of Island wide bowel cancer screening, where the funds –

The Deputy Bailiff: Deputy De Lisle, how do some of those deal with the grounds that are in the Petition?

Deputy De Lisle: – where the funds which were set aside (*Laughter*) for bowel cancer screening have been creatively used in other areas, and even worse not used for the intended purpose. The underspend on the bowel cancer screening programme, close to a quarter of a million pounds, in the last two years, is a serious 39% underspend of the £621,000 appropriated for bowel cancer screening. Most of the underspend was last year under the current Board's watch. Almost half, actually, of the £327,000 budget uplift received was unspent. And that totalled £155,000 or just about £156,000. I would like to know from the Minister and his Board where the money went, where it was used and, crucially, the amount held in reserve for spending on the bowel cancer screening programme?

Sir, our health service should be seen as exemplary and hopefully this Requête will focus minds on some areas that need improvement. Screening is effective at decreasing the chance of dying from bowel cancer and is recommended starting at the age of 50 and continuing until a person is 75 years old.

I was concerned to read –

Deputy Bebb: Sorry, point of correction.
The bowel cancer screening –

The Deputy Bailiff: Deputy Bebb.

Deputy Bebb: Sorry, bowel cancer screening is not recommended for anybody beyond the age of 65, due to the fact that people become frail. It is actually not recommended at all after that age. I apologise to Members who feel that that may be personal, but clinically bowel cancer screening is not recommended beyond the age of 65.

Deputy De Lisle: That is untrue, sir –

The Deputy Bailiff: Deputy De Lisle.

Deputy De Lisle: – and I will elaborate on that, thank you.

Bowel cancer screening is recommended starting at the age of 50 and continuing until a person is 75 years old. I was concerned to read that only 60-years-olds were being screened in the programme, and not different age groups. For those at high risk screening should begin at around 40. In England, in Scotland and Northern Ireland, people aged 50 to 74 are routinely offered screening every two years, and in England this year, the policy is to go to 74 years of age, in terms of screening.

Can the Minister outline what age group has been offered screening, and how he intends to make up for the lack of screening opportunity in different age groups? Sir, it disturbs me that there are Members of the Board that do not know the facts of what is happening in England with regard to bowel cancer screening and what the new programme has been stated by the Minister in charge.

Deputy Bebb: I am sorry, but I really must –

The Deputy Bailiff: Deputy Bebb, is this a point of correction?

Deputy Bebb: It is a point of correction.

The Deputy Bailiff: Then you stand and you say point of correction, and you wait to be invited to speak, please.

Deputy Bebb: Point of correction, sir.

The Deputy Bailiff: Deputy Bebb with a point of correction.

Deputy Bebb: The bowel cancer screening that Deputy De Lisle is referring to is faecal occult blood testing, not sigmoidoscopy. Sigmoidoscopy is not recommended beyond the age of 65. I am afraid that Deputy De Lisle is comparing apples with pears. And faecal occult blood testing is not offered in Guernsey, because it has a lower efficacy. Therefore we are aware of what is happening in the UK, we are aware that faecal occult blood testing is offered in the UK but it is not offered here for a number of reasons. Sigmoidoscopies are only offered to those up to the age of 65, in accordance with clinical best practice and advice.

Deputy Dorey: Can I also add a point of correction please, sir?

The Deputy Bailiff: Deputy Dorey with a point of correction.

Deputy Dorey: This is a minute of a meeting that I had with the lead clinician for bowel cancer screening on Thursday, 19th December 2013. These minutes have been approved by him. I will read it out to the Department. “He did not recommend screening later than age 65 because of comorbidities” – frailty, for want of a better word, which is why I used the simple word in the media – “and he did not feel it was sensible to screen earlier than 60 as people in their 50’s are less likely to have developed pre-cancerous polyps.”

That is the lead clinician for bowel cancer screening in Guernsey.

The Deputy Bailiff: Deputy De Lisle to resume.

Deputy De Lisle: Thank your, sir.

I can only say thank God that many people have been screened at the age of 40 and less age through their private insurance in England.

Sir, according to... I believe that all high risk candidates, those who have family members who have had bowel cancer should be offered bowel screening. Identifying bowel screening early can significantly improve a person’s chances of survival as well as potentially reduced treatment costs. This, sir, is a small Island community, and those without private insurance depend on Island’s services.

According to Jane Wardle, who is Professor of Clinical Psychology at the University College London, the UK bowel cancer mortality could be halved in the coming one or two decades through lifestyle changes, the implementation of endoscopic screening for pre-cancers and a higher uptake of stool based screening, combined with prompt help seeking for symptoms.

The Board has been irresponsible by not spending the money allocated for screening, given that bowel cancer deaths could be halved, as she has indicated, if detected earlier. Many are needlessly dying because they are not screened early enough.

Now, an analysis in 2012 of the first one million test results conducted through the NHS bowel cancer screening programme in England revealed that the programme was on track to cut bowel cancer deaths by 16%. Can we say the same for Guernsey, given the money has not been spent that was appropriated?

The fact is that the States of Guernsey were right to prioritise this area for further funding, and we as a community have been let down by the Board, by the fact that the money appropriated has not been spent on screening the people at risk. What plans does the Minister and his Board have to put this wrong right to Islanders, or is it now all too late, because the money set aside for screening has been spent by the Department elsewhere? Will Treasury and Resources top up the funds diverted elsewhere?

Thank you, sir.

The Deputy Bailiff: Deputy Adam. Deputy Adam! (*Laughter*)

Deputy Gollop: I just wanted to be *relevé*, please sir.

The Deputy Bailiff: Deputy Gollop, yes, you are *relevé*. (*Laughter*)
Deputy Adam to speak.

Deputy Adam: Thank you, Deputy Bailiff.

Bringing a Motion of No Confidence in the Board of HSSD or any States Department is the only way under the Rules to create debate by this Assembly about the functioning and competence of a Board. Even if the motion is unsuccessful, and most are, at least the Board are called to account for their actions.

I do worry in these debates decisions can be made based on personal feelings, rather than on the merits of the arguments on the facts of the case. I had thought that in this debate Members of this Assembly would be objective and focus on the arguments and not the personalities.

I hope that you do not doubt my integrity in signing this Motion of No Confidence, in the same way that I did not doubt the integrity of Deputy Hadley when he led a Vote of No Confidence against me, just over a year ago. Deputy Hadley and I have spent a lifetime engaging with health, health policies and performance, and that is what we are doing now, we care and are concerned about services provided by HSSD to the people of the Bailiwick.

Deputy Dorey is held in high regard by his colleagues, for his integrity, his honesty as well as for his reputation for hard work, analytical skills and the attention to detail. Many believe Deputy Dorey would never knowingly mislead. However, unfortunately that has occurred during his statements to this Assembly in October and December. So we have to call him to account for that. Did he know the statements were not true? If so, he is culpable. Did he accept without question that information given by staff? If so, he was naïve. In either case, Deputy Dorey's handling of this situation has to raise grave concerns about the competence of the Minister and Board to discharge the mandate of HSSD.

Let me remind you of the sequence of events. In the October States meeting Deputy Dorey answered Rule 5 questions on bowel cancer screening. He stated that all the money allocated to bowel cancer screening had been spent. What he has not mentioned so far is he had a supplementary question, which was asked at that meeting, which simply asked is the extended scope practitioner still in place? There was no answer to that question. But I feel maybe it should have stimulated his mind to think, wait a minute, what is Deputy Adam getting at?

Further oral questions were laid by Deputy Hadley for the December meeting. Again, he had further written questions and, he accepts himself, that if they had taken notice of these questions beforehand, he may not have repeated his statement at the December meeting, that all the money had been spent. Because the question asked straightforwardly about stating what the business case had been under various areas the money was to be spent in. That was the Rule 6 question sent in on 2nd December. And as I say, he repeated his... and I therefore felt, rightly or wrongly, I was trying to ensure that he did do further research by pointing these things out. But, unfortunately again, further assurances that monies allocated to bowel cancer screening had been spent.

In this meeting, Deputy Dorey has mentioned when the final business case was prepared for T&R it had been revised to a single cohort of 60-year-olds, and that this decision was taken in the light of the most up-to-date research and on the recommendation of senior professionals from the HSSD and MSG.

In the Christmas recess, Deputy Dorey admitted that there was likely to have been a significant underspend of allocation of money for bowel screening. Now, we have just had a recent discussion concerning bowel screening and what is not bowel screening. In Guernsey, bowel screening is flexible sigmoidoscopy to look for polyps. In lots of areas in Scotland and the UK, it is faecal occult blood, which means checking for blood in the faeces. I think it is important to realise the difference between these two.

A lot of areas in England do not have sufficient consultants to do flexible sigmoidoscopy as a screening method, and therefore FOBs are carried out. Likewise Glasgow, likewise Aberdeen do FOBs from the age of 50.

Sir, as I was saying, we got a letter round saying it was underspent. He also admitted to unintentionally misrepresenting the view of some of the lead professionals. They had not in fact supported the restricted screening to a single cohort for the full bowel cancer screening service.

On Monday of this week, HSSD evaluation of bowel cancer screening programme was released, including detailed financial information for 2012 and 2013. We have heard the Minister's statement and we know that there has been a significant amount of money that was allocated to bowel cancer screening, which has not been spent on this service. It has been used for other parts of HSSD budget. So this is not misappropriation; it is simply what Deputy Fallaize was trying to say that if there is money from this part it must be spent elsewhere. It cannot, in my opinion. Money provided from the SSP bid is ring-fenced for that purpose. Any money not spent for that purpose is returned to T&R.

As far as screening and the cohorts, the business case that went to T&R Board was the same as the business case that was accepted by HSSD Board at the meeting, which was actually 12th January 2012. The minutes that Deputy Hadley was quoting from were typed out and circulated on 20th January. That is why it is 20th January.

Now, what was Deputy Dorey's first line of defence? I accept that his answers were given in good faith, from information from his Department's staff. I accept there had been pressure of time and pressure of work and it was a genuine mistake.

But is this acceptable for the second time? Possibly for the first set of questions, but I am not convinced it is acceptable for a second time round.

We know Deputy Dorey had meetings with key staff involved in bowel cancer screening in early October about financial aspects concerning the service, because I gather they had not been paid, and as a Member has already said, was that due to SAP? But, therefore he should have been aware about bowel cancer screening, and he himself along with Deputy Fallaize and Deputy Hadley and many others wanted this screening carried out.

As I have said, he had other indications, supplementary questions, written questions. I find it hard to understand how he could continue to state with confidence that all the money had been spent.

The second line of defence: it is all the fault of the previous Board, they made the business case that restricted screening – no evidence for that. Why did the political Board make a clinical decision in this case relating to who or who should not be screened? A political Board is there to decide on policy and strategy. The political Board was to encourage and obtain funding for the procedure. But, as I have stated, the business case did not restrict screening.

There was a document that was provided to the previous Board that looked at issues of the pilot study and looked at how to introduce a full bowel screening going forward, and obviously that was not going to happen by the first month of the year. So the pilot study, I agree, was continued in a similar format, with intention of introducing the two cohorts, once everything had been established properly. That, of course, included having to upgrade the endoscopy unit.

Deputy Dorey is fully aware of these things, because he is meticulous and goes over the minutes of the meeting. So in theory, it should be two cohorts, flexible sigmoidoscopy, as Deputy Bebb said, at 60 and under 65. Or you could do a combination of faecal occult bloods and flexible sigmoidoscopy. That is what the review will be deciding, I assume.

His third line of defence was the previous Board stopped all screening in December 2012 because of the decision to close an operating theatre and wards. Is this a correct statement? Again, the Board decision related to elective in-patient procedures, changes to individual major and minor procedures booked for December were clinical and management decisions – not the Board's. If routine screening was stopped in December, this was a clinical and management decision. The Board, as politicians, did not say, 'That one is stopped, that one is stopped.' That is clinical.

The report released on Monday shows there was a reduction in screening sessions between September 2012 and April 2013, due to the refurbishment of the endoscopy suite, and only one session per week from September 2013. It should be noted that there was no screening – no screening – for bowel cancer for the four weeks out of five in August 2013. Now, the reason for that was probably the fact that the consultants may have been on holiday. It may have been that the theatres were being deep-cleaned, or something else. But, there was no screening, so it is not unusual to have a period of no screening if the clinical situation, or the work situation indicates that. But was this a political decision of the present Board or, as I have suggested, a clinical or management decision?

The fourth line of defence: it was difficult to get financial information because the budget was spread over a number of different areas. In actual fact, there are about 12 people involved in this workstream, of which by the end of last year, five of them had left the services of HSSD, so that may have been a slight problem with getting this up and running fully. But it should have been up and running by the beginning of 2013.

Now, why I say about bowel cancer screening and that it is difficult to find out the financing, I have already mentioned that PAC had reviewed six previous HSSD budgets that were funded through SSP bids and was given information concerning the finances of them, and they concluded that the welfare service (**Deputy Soulsby**: Sorry, but –) and Mental Health and Wellbeing, Obesity Strategy, all these areas reported on their expenditure... In fact, one had underspent amounts and was returned to T&R.

Deputy Soulsby: I think, just a point of clarification, please.

The Deputy Bailiff: Point of clarification, Deputy Soulsby.

Deputy Soulsby: This occurred under the previous PAC, but I can say that in terms of bowel screening the Public Accounts Committee got no information from HSSD about what they did with their funds on bowel screening.

The Deputy Bailiff: Deputy Adam to resume.

Deputy Adam: Thank you, sir.

May I ask through you, sir, are you saying that you looked at bowel screening finance – ?

The Deputy Bailiff: No, no, you cannot ask questions of the Chairman of the Public Accounts Committee. *(Laughter)*

Deputy Adam: Sorry, fine. The other thing, sir, which has been mentioned, I think it was by Deputy Ogier or Deputy Le Pelley, what about other areas where HSSD bids have been made, for example family and friends, care arrangements and learning disability respite care, have they been introduced yet or are they still on the shelf?

I would suggest that all these defences were simply ways to divert attention to protect himself and his Board from accepting responsibility for the situation they found themselves in.

Wrong information had been given to the States, failure to recognise the warnings of two Deputies with knowledge and experience. He had failed to question his advisers sufficiently before relying on their information.

Others have used different defence tactics in this debate. Deputy Fallaize called the motion a farce, by implication, there is no substance to it, the signatories are mere comic actors.

Deputy Storey and Deputy Brehaut attacked the lead signatory, Deputy Hadley. Like an advocate in court, they aim to destroy the credibility of the key witnesses for the prosecution so that his defence will be discounted.

Please do not be diverted from facts by any of these defence tactics. I believe that the actions of the Minister in dealing with questions on bowel cancer in October and December has given sufficient cause for this Assembly to have no confidence in the ability of HSSD Board to fulfil their mandate.

I turn now to the second part of the grounds of the motion: the failure of Deputy Dorey and his Board to fulfil promises – promises to this Assembly. The first thing is that we had the 2020 debate. It was brought to this Assembly, it was agreed unanimously by this Assembly, and it has been put on the shelf, or at least we are not aware of any issues emanating from that recently.

They have withdrawn the health care, health review report again –

Deputy Dorey: Point of order, sir.

The Deputy Bailiff: Point of order from Deputy Dorey.

Deputy Dorey: This is not in the grounds of the Requête, of the Vote of No Confidence.

The Deputy Bailiff: Can you refer, Deputy Adam, to where there is a promise made in order to secure election relating to that? I am looking at page 364, the grounds in the Petition. *(Interjection)* I can hear something speaking that is not a Member. *(Laughter)* Whoever or whatever that is, can they please turn it off! *(Laughter)*

Deputy Adam, if you cannot, then I suggest you move on.

Deputy Adam: Sorry, sir. I thought the Procureur was looking.

Deputy David Jones: Sir, I think I can find it.

The Procureur: The Procureur is *always* looking; it does not mean he is going to say anything! *(Laughter)*

Deputy Adam: Sir, I thought it said on... I will do my utmost to.... It is under the background aspect, is that not...? Do you feel it should be in the grounds on page 364?

The Deputy Bailiff: Well, if you are referring to that promise that is extracted –

Deputy Adam: I will pass that over.

One issue that is in the grounds is recruitment. He said staff recruitment policies must be reviewed, yet the member of this Board with the most experience in this area has resigned. We have heard quite a lot about recruitment, and it is interesting to note that as far as the PEH is concerned, there are only eight agency nurses employed at the end of November.

Sir, can I ask the Minister, does that mean that the rest of the wards etc have nurses employed by HSSD? Does it include the psychiatric wards or specialist nurses, or is this answer just trying to justify they have got a small number of agency nurses in that area, but it does not cover any other area?

In the August of last year, I also asked, and again I felt they had achieved a huge amount because there is only four agencies across the whole of adult mental health services, four in psychiatrics, one in theatre and none in ICU. My impression is that there is excellent recruitment and retention, but we have heard from

500 various Members of the Board that this is a problem. But it does help to control finances, as Deputy Brehaut clearly said. Opening de Sausmarez Ward would have cost money because of the agency staff. But de Sausmarez Ward is not fully open, and the orthopaedic consultants feel they need 16 beds and therefore there are still being patients cancelled.

I would argue that a major failure of this Board is the delay –

505 **Deputy Brehaut:** Point of correction, sir, if I may.

The Deputy Bailiff: Point of correction, Deputy Brehaut.

510 **Deputy Brehaut:** I did send a corrective statement, I think, to Deputy Adam. He must have seen it. I sent an e-mail to States Members saying that de Sausmarez Ward remained closed, or it was interpreted that I said because if we opened it, it would cost more with regard to agency staff. What I meant was, and I did send a correction, if it was opened it would have cost more in agency staff, but it is a path that we would have taken.

515 **The Deputy Bailiff:** Deputy Adam to resume.

Deputy Adam: Thank you, sir

520 I would argue that a major failure of this Board of HSSD is not just in relation to bowel cancer screening, but in overall concerns of bringing forward various other policies and strategies including SSP bids, health care review, 2020 Vision, and I felt that since this has not been done, one has to be concerned about where Health and Social Services are going in Guernsey.

525 You cannot decide the best way forward without doing a root and branch review of the whole service. In view of that, sir, I ask Members to consider carefully the overall facts and forget about the personalities. How safe, how reliable, is the situation? Bowel cancer screening is one small point. It is only £350,000 worth. What we have to look at is not £350,000 worth; we have to look at the overall health budget of Guernsey, which is more like £200 million to £300 million. I therefore suggest that you support this Vote of No Confidence.

Thank you, sir.

530 **The Deputy Bailiff:** Deputy Stewart, Deputy Langlois and then Deputy Bebb, and then Deputy Fallaize.

Deputy Fallaize: Point of correction, sir. Just a small point of correction.

535 Deputy Adam said, and I think it may have been said by a couple of other Members in their speeches, that a Motion of No Confidence was the only way of generating a debate in the States about the leadership of a States Committee. That is not the case. Rule 19A provides for Motions of Censure, and it is a relatively new Rule but I think it is worth pointing that out to Members, that this sort of debate could have been generated by a Motion of Censure.

540 **The Deputy Bailiff:** Deputy Stewart.

545 **Deputy Stewart:** Deputy Bailiff, States Members, I suppose I am going to stand here, really, not with my Minister's hat on, initially. I stand as a St Sampson's Deputy, first and foremost, and I think it is probably, there are two issues really – two key issues, rather than drilling down into detail, that I think we really need to focus on today and, however this debate and the Requête ends up, I think the future is enormously important.

550 I think, as a St Sampson's Deputy, it was clear to me, speaking with the Douzaine, that they had pretty much the same view as my constituents that I meet every day in the street. Whether we like it or not, and whether we blame the media, or whatever has happened, there is a general lack of public confidence at the moment in HSSD, and we cannot get away from that. I have had so many members of the public... I think it is clear there is a lot of misunderstanding. There have been things put out by the media, that these have picked up, and these are all situations that we have to deal with as Deputies, and now with my Minister's hat on, as a Minister.

555 Clearly, at the close of this debate we have to move forward. We have to get confidence generally by the public, not just us here, we represent our constituents, but we need that public confidence back out there. Confidence in probably the most important Department in many constituents' eyes, it is health; it affects our families; it affects everyone. We are all touched by a calamity at one time or another in our lives, and we want to feel that when we go into hospital or we have dealt with medical professionals that we are going to get the finest possible treatment for ourselves or our family.

Having said that, I think the two issues here, and the two big issues without drilling down: first of all is recruitment, and whether the Board stays or goes whatever the outcome of this debate, we cannot have HSSD bumping along the bottom, as it has done in this session of the Assembly. We need an HSSD that can restore public confidence that can restore the confidence of all the Deputies, and these are the assurances that I am going to be looking for from the Minister in his final speech.

We need to know, it needs to be out there: what is the plan? Not 'we are going to have a review'. What we need is a plan of how we are going to recruit, not just adequate nursing staff, but also doctors. What is the plan? It may well be that what we have in place at the moment is not enough to attract them, and if that is so that is going to have to come back to the States.

Which brings me on to the other big issue, and without drilling down into all the bits, it is about financial controls. One of the things that the Douzaine... and I had to answer honestly, I cannot really tell you whether the budget that HSSD has is sufficient, is it too much, is it the right amount? What I do know, and having done budgets for many, many, many years, and how we deal with it in C&E, in the same way I have always dealt with it, we go through it line by line, each line. So if we take orthopaedics, for example, you would make an assumption – and I know we hear 'demand led', and we cannot always blame that; what we can do is evidence that if there is a demand-led issue – but you would statistically look at your orthopaedic costs and how many people were coming for orthopaedic surgery and you would make an assumption on the budget, based on what you know from the past.

Now, if we have an extremely bad winter and it is very icy and loads of people slip over, break their legs, you would expect an overspend, and it is very easy to say, 'This was the assumption in the budget based statistically. It was a very bad winter therefore the costs of orthopaedic surgery went up through the roof, we had to hire another guy in from the UK, and it took up half a ward because of this.'

So this is what I am saying: I am not seeing in terms of the budgeting, and I suppose this is where we are with the financial controls. 'Oh, there is an overspend. It was crying for a bit of this, it has got a bit of that.' I am not getting that, how I would do if I was running a company, 'There is the variance – now tell me why we have got that variance: up or down?', I want to know. And, I think this is really where we are and where the public are. I do not think we have that level of understanding.

And, I think what has happened with this 'bowel-cancer-gate' issue is that is exacerbated the loss of confidence, because not being able to press a button and say, 'This is what it was and then it...' and I absolutely believe that it was a genuine mistake and it happened, but is it reflected so badly on confidence, because it is not the biggest hospital in the world. It is quite a small hospital actually, and I will repeat what I said at Policy Council. I had the misfortune of ending up in an American hospital, quite a big American hospital, and by golly they pressed a button and every bit of Elastoplast, every little... everything we used in two days was there, like a hotel bill. Absolutely everything down to the last penny.

Now, if the Board and if the Minister feels that there are not the resources for them to adequately control their Department, you are going to need some sharp elbows and pointy knees to get in there and make sure you have. Because what I do want to do, and I this is why I am really struggling, is these are the key issues: recruitment, financial controls, and being able to get the confidence, not just of us, but the people we represent, because if we do not have the confidence of the public, then really as a States we are impotent. We need the public behind us, and this is really all I would say: however this turns out at the end of the day, I think there needs to be an outpouring of information. We need to have better understanding of these budgets, we do not want, 'Oh, this has come along.' We need to actually understand why things are going wrong. We need to understand why recruitment in many people's eyes has not improved. And you cannot blame the media.

I think also the Board needs to address a proper communications plan, not just to the public but also to us as States Deputies – even ahead of a States report, I will welcome a briefing on what we are going to do on recruitment, what are we going to do to get our financial controls in place, and be able to adequately, in real detail, explain if there is an overspend why it is there.

I am still struggling. I would look to the Minister to give us some assurance that those two key areas are going to come together very quickly under the management of his Board.

Thank you, sir.

The Deputy Bailiff: Deputy Langlois.

Deputy Langlois: Thank you, sir.

Sir, I have been in the States for nearly six years now, and a Member of States' Boards for eight years before that. I hoped that if this debate had to take place in order for the concerns to be aired, the concerns which we are hearing about in terms of the public, as Deputy Stewart says, and the concerns of Members, that it could take place with a minimum amount of collateral damage to the parliamentary process and the democratic processes of the Island.

Now unfortunately, I believe, we have witnessed a most unedifying spectacle over the last nearly day, that can have done nothing positive for the States, and probably has done nothing positive for the future of health services in this Island.

This debate is in danger of moving the States to a new low, at a time when we have all got very difficult decisions to consider.

Sir, HSSD is a large and complex organisation. We have heard before, it has got a budget of over £100 million a year, employs more than 2,000 people. On top of that, it provides a hugely varied, complex and highly technical set of essential services. As somebody said earlier, this is probably regarded by most of us as the most important Government Department, or the most important set of Government services.

In December 2012 – and I move here into timescales, partly because of what was said in the previous speech – five of our colleagues took on the onerous responsibility of turning around a dysfunctional organisation. I believe it is now clear that the HSSD has severely deficient financial and management information systems. (**Several Members:** Hear, hear.) Those deficiencies have developed and deteriorated over many years. They do not just occur overnight. It takes time for an organisation to evolve in that particular way.

Now, all my professional experience of the direction and management of organisations tells me that effecting change to reverse that process is a long and slow process in itself. And yet here we are, just over 12 months after the new Board took on their responsibilities, talking at a level of detail that would seem to be totally inappropriate in terms of correcting those major problems which other people have referred to. That sort of change cannot be done under constant pressure of micro-management – yes, sir, micro-management, not ‘reasonable parliamentary scrutiny’, the words behind which so many people hide, when they are actually simply putting blockers in the way of a group of Deputies trying to get a job done.

In HSSD, we have got five Deputies taking on this major responsibility. Indeed they were – I use the word with great caution – but they were *entrusted* with that responsibility by this Assembly. Yes, they are accountable, but they cannot do it without a level of trust that they are moving in a particular direction.

The grounds for this No Confidence Motion are simply not a sufficient reason for demanding resignations. Reasonable questions have been asked and reasonable answers have been given. We should have the parliamentary maturity and integrity to recognise that and move on.

I ask Members to vote against this motion and to allow the Board to continue its difficult work, under reasonable scrutiny, but with our support as it tackles the immense organisational issues which they face.

The Deputy Bailiff: Deputy Bebb, to be followed by Deputy Gollop, to be followed by Deputy Le Tocq.

Deputy Bebb: Thank you, *Monsieur le Député Bailli*.

Questions have been asked today, and questions are generally asked with regard to financial controls on HSSD, and I think I would like to start by talking about those.

Deputy Adam will recall that towards the end of 2012, we asked, as the then Members for a review of our financial department’s recruitment. How many people we had available, and how many were appropriate and how many we needed in order to conduct a proper financial services in relation to the expenditure of HSSD.

HSSD’s budget – Deputy Stewart made reference to the fact that it is not an enormous hospital. It is not, Deputy Stewart is quite right in that. The hospital is only one small portion of it. Only about half of the expenditure of HSSD goes on that hospital. We frequently forget the social services that are included within Health and Social Services. That is something that actually adds to the complexity of the budget.

The budget complexity, regardless of the amount of money will remain. You could double the amount of money but the complexity of the budget remains. The complexity of the budget is comparable to the complexity of the budget in Jersey. There they employ 17 members of staff as full time accountants. Here we employ approximately 10. We do not resource the Department sufficiently and that was agreed by Deputy Adam and I on the then HSSD Committee.

We asked for additional resources in order to fully staff that Department, and when the new members were elected at the end of 2012, they agreed to that plan, that it needed to be increased. We were advised that we could increase it, but that we would need to find the budget to increase it from within the existing HSSD budget.

Now, I am heartened to hear so many Members actually say that they would like to increase the financial controls at HSSD, in which case I look forward to the time that they will support increasing our budget in order to increase the number of accountants that we have available. It is a very difficult task, and we need to understand the constraints which we are working under. When people ask the questions about cancer screening this is not one budget line, this is not a budget line that has increased by a certain amount. The budget spreads over a number of different budget lines. Exactly what went where is not an easy thing to extract unless we put in a cost centre.

But let us talk about cost centres: as part of the installation of the new SAP system, HSSD was asked to, and it complied with Treasury and Resources' request to remove a large number of cost centres because they are not seen as beneficial. So at what point in time do we keep this cost centre on bowel cancer screening and at what point do we give it up? I asked that question yesterday of Deputy Trott, and he agreed that this is a very difficult question and he did not have the answer to it. At what point in time does an SSP bid become business as usual?

Part of what we have with regards to the finances of HSSD is a very complicated picture that cannot be summed up in simple terms that make easy sound bites in order to gain public trust in an easy and credible manner. It is a very complex budget, and actually working within that budget cannot be as easily defined as it is to destroy confidence with easy snippet one lines.

It therefore requires every single Member, if they are so interested in it, to actually try and grasp the complexity. When people say, 'We want to know where the money was spent', well, the examples of where things are spent is the whole of the budget lines that were overspent, and you will have full opportunity to scrutinise that when it comes to the annual accounts. HSSD is currently estimating a £1.3 million overspend for 2013. So the rest of the budget that was supposed to go on bowel cancer screening has gone on other services. Some lines have overspent, some lines have underspent.

So, when we come to the bowel cancer screening and we see for instance that pathology has underspent, pathology were able to absorb the additional work needed by bowel cancer screening into their existing resources. People will then say, 'Well, why do we therefore give you that amount of budget if they were able to do that?' The answer is simple. The next time we make an additional demand on our pathology department, they might not be able to absorb that into existing resources. They will need to employ additional people. The costs do not go up incrementally. The costs jump. That is something that we need to understand.

Pathology is a very complex area. I have heard today suggestions that faecal blood occult should be used as a means of testing. Part of the reason we do not do that is because we do not have the equipment here in Guernsey to do that. We could. We could quite happily consider getting the equipment for the pathology department to undertake that form of testing. But that will require an additional form of funding, and Members have seen the report that has been actually done, that was released by HSSD and they will see the options that are available to us. But this suggestion that everything is settled, and everything should be delivered in one way: the experts do not agree. I heard Deputy Hadley yesterday in his speech say that, and then I heard Deputy Adam, it needs to be two cohorts screening at 60 and then repeating screening again at 65. Well, wonderful, but the expert advice that we are receiving does not actually have an agreement on that. I personally am therefore unwilling to commit to one form or another of bowel cancer screening without the experts agreeing to it. Surely that is good governance.

When we are actually looking at the bowel cancer screening the question of cohorts has been asked, and people have some difficulty. Well, strangely, the experts have some difficulty in relation to cohorts. Some people believe that there should be screening at 60 and at 65, but what does that actually mean? For many people here, the argument is portrayed that there should be screening at the age of 60 and then the same people re-invited for another screening when they reach 65. But there are some experts within HSSD who have suggested that would should happen is screening at 60 and the age of 65, but that we do not recall people. Now, I am content to undertake whichever action we believe is the most effective means of screening bowel cancer, but I am unwilling to commit to one way or another when even the experts cannot reach agreement.

But, if we want to talk about what the plan is in relation to bowel cancer screening, that is clearly laid out in the report that was circulated to all Members. The plan is to work with the experts in order to find the best solution and then to commit to that action. If that is to actually screen at the age of 60 and then re-invite people at 65 so be it. I will quite happily commit to that. Obviously, there will be a great increase in costs and we need to understand that in relation to our budget. We need to make sure that it will be able to be delivered within that budget. I am fairly sure that it could, but that is something we need to investigate. I will not give the commitment here and now, because I would rather look and understand from an evidence point of view – as Deputy Adam said, from an evidence point of view – whether this is the right course of action.

Bowel cancer screening is considered to be around 75% effective in the trials that were conducted in the UK – 75% efficacy within detection rates. But it is interesting that having spoken to the Chief Pathologist here, she believes that in Guernsey we are seeing a greater prevalence of bowel cancer within the small bowel rather than the large one. And therefore that 75% rate may not be quite as acceptable here in Guernsey as it is in the UK. Why, we do not know. There are certain phenomena to our cancer rates in Guernsey that we simply do not understand. We have a very large proportion of bladder cancer, compared to areas of the UK. We do not know why, but we know that we have it.

Our cancer screening by sigmoidoscopy, for instance, is also not considered appropriate after the age of 65, because it is a very delicate operation. There is a risk with regard to bowel cancer screening by sigmoidoscopy of piercing the bowel wall. That is not something that could be considered a minor detail.

Deputy Hadley has made reference to the... or a request within the original business case in order to have a nurse conducting the sigmoidoscopy. Yes, that is exactly what was originally envisaged. But a large university hospital within the UK recently put an advert for a nurse in order to conduct that work and not one person applied. The simple answer is there are not that many people, as nurses, fully trained to do this work. It is an exceptionally competitive market. But we do have a consultant from the MSG group who is conducting the work to a very satisfactory level. Therefore the question as to who conducts it is a difficult one that is not going to be determined by our desire, but by simple market forces of who is available to conduct this work.

I would suggest that if sigmoidoscopies are happening and that they are happening within a clinically safe environment by a fully qualified person, whether it be a nurse or a consultant, it does not matter, as long as we are doing the right thing within a safe environment for those people who undergo bowel cancer screening.

There have been suggestions in relation to recruitment and staff retention. Recruitment and staff retention seem to have been a problem for HSSD for quite some time. I have heard the request for a programme in order to deal with this. Well, I wish that there was an easy answer but there is not.

What I can say to Members here is that Deputy James, in my opinion – and if she will please allow me to say – her greatest contribution was that she was relentless in highlighting the issues around recruitment, specifically of nurses, but she also expanded into other areas. She has been relentless. I wish that there was a magic wand that we could wave in order to fix our recruitment issues. There is not.

It is interesting that in the UK, they are now offering three months free rent for nurses as a means of enticing nurses from Portugal, from Greece – all the places that are suffering economic problems at the moment and therefore are shedding nurses, so we will quite happily take them. Whether that is ethically right or not we do not particularly care, because we want the nurses here.

We do not pay the same rates of pay here in Guernsey as they do in Jersey. We restrict nurses as to where they are allowed to live. Many nurses do not want to pay the rates of rent that we demand of them within the accommodation that we offer. So, some will not want to go into John Henry Court because it is too expensive. Some would rather go into cheaper accommodation which is not of the same quality. Some nurses have turned up and been appalled at the state of some of the accommodation and have left as a result of that.

This is a complicated issue. We are looking at it, but unless somebody is willing to give us large extra millions in order to pay large sums extra to nurses, I do not see this being fixed. And whilst I hear this great cry for additional nurses and a plan to resolve our recruitment issues, I do not hear that big cry of wanting to spend huge amounts of additional revenue expenditure year in year out. (**A Member:** Hear, hear.) So, it is one of those questions that we are trying a balancing act in a difficult situation with a complex set of criteria.

Our housing situation does not make it easy for us to employ nurses. It does not make it easy for us to employ social workers. It does not make it easy for us to employ carers. But a recent trip to Dublin was a very fortunate trip, in that we have employed 13 additional carers who will turn up in March. That is a rare success event. All too frequently we see smaller numbers being recruited from recruitments trips.

So to say that we do not have a plan is not true. We are working – admittedly I do not think that we have a fully formed employment plan, and it is something that we are working towards. That may come with a price tag, and I look forward to those people complaining that we do not currently have a plan in place to deal with recruitment at HSSD to be fully supporting that price tag.

Another charge that has been laid is in relation to leadership. Now, anybody who knows about my political views and Deputy Dorey's political views will know that they are not exactly closely aligned. But Deputy Dorey manages to bring agreement and consensus around the table. Leadership can take many different forms. The idea that it requires someone to be able to stand up with confidence and deliver, regardless of the subject matter is not exactly the only form of leadership available. Quiet perseverance, mediation and building consensus so that services develop and are committed to, within difficult circumstances, is a different style of leadership to what some of you would recognise. But it is absolutely what is required in the wake of some of the recent appalling media coverage in relation to HSSD.

Bowel cancer screening was recently, as a result of the new SAP system, which in case anybody has not put two and two together is causing a lot of problems at HSSD and therefore, surprise, surprise, it is putting an additional amount of pressure on our finance department, which actually were the ones responsible for the misinformation coming up here. It does not take a genius to join the dots. Bowel cancer screening was not being paid for, because of the new SAP system. It is one of the many areas that SAP causes us problems.

There are a number of suppliers that were not being paid and therefore there were threats of legal action against HSSD. All of these things are being resolved. There is an immense amount of work that has been done. Bowel cancer screening was one of those areas that was not being paid to MSG. As a result of it not being paid there was a threat of discontinuing the service.

805 This great commitment that I hear about from MSG and from other clinical members to clinical services, we need to forget and *stop* with this idea that there is simply some vocation that brings people. These are *business* people, who make *business* decisions. We think of the hospital, we think too frequently of the nurses as angels and this appalling synthetic idea of health care as portrayed by Hollywood. It is not.

810 **The Deputy Bailiff:** Are you...? Deputy Bebb –

Deputy Bebb: It is a business, and I have to say that bowel cancer screening –

The Deputy Bailiff: Deputy Bebb! Deputy Bebb, are you straying from the grounds – ?

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Deputy Bebb: No, because I am about to return to it. (*Laughter*) Bowel cancer screening was about to be discontinued as a result of non-payment. It was only because of the intervention of Deputy Dorey that it did not discontinue. Now that is leadership in my mind, and therefore I do not recognise that charge. It may not be within the media every single day but it definitely works.

820 I thank Deputy James for her speech yesterday in relation to the reason for her resignation. I would sincerely hope that Members respect people when they say that they do not want their resignation debated. I am aware of a number of people who either resigned or are thinking of resigning from Committees and their reasons are very personal. I think it is appropriate that we do not then stray into a public debate on those issues. I thank her for her very candid speech yesterday.

825 Finally, I would like to suggest that there are a few things that were raised within debate that I would like to answer. The first one was in relation to some wastage that people see within the budget lines of HSSD, with reference to our off-Island placement. That goes once again to people misunderstanding part of the HSSD budget. There are large parts of the HSSD budget that we have no control over, and when a court order demands that we put a child or a person off-Island, we obviously comply with that and we pay for it.
830 It is not within the gift of HSSD to overrule – and neither *should* it be within the gift of HSSD – to overrule a court ruling.

There is also the Children's Secure Centre. For those Members who are unaware of it, we do not put children into prison, but we do have a Secure Unit, and that is part of HSSD's remit to provide that, and if the court deems it appropriate to put a child into the Secure Unit, that Secure Unit is opened immediately at great expense. But it is not as if HSSD has control over it. This is what I mean when I am talking about a complex budget, that really does require a little more thinking.

835 Finally, I would like to say that certain Members have made reference to how highlighting bowel cancer screening has been beneficial and has brought the issue to the fore, but I would like to give the counter to that. Bowel cancer screening has sucked up the oxygen of any debate around the table at HSSD for a considerable amount of time. Yesterday, I had a meeting with carers in relation to their requirements, and I found it incredibly frustrating that questions were asked that normally I would be able to answer, but I have been investing so much time into, as Deputy Fallaize said yesterday, less than a quarter of a percent of the budget, that I could not answer those questions in that meeting – questions from people who are very concerned and who work very hard as carers.

845 And the Chairman of the Electronic Health and Social Care Records: we have very big issues in relation to parts of that project. Deputy Perrot sits on that Board with me and he will be fully aware that we have some problems in delivering that programme. We expect to be able to deliver it but there are issues and difficulties. Am I allowed to focus my energy as the Chairman of the Electronic Health and Social Care Records? No, because I spent my time reading yet more reports on bowel cancer screening. I have been running around trying to find out all the details everywhere around that.

I am now the Chairman of the Mental Health Strategy, something that needs to be progressed urgently, as we all agreed in that debate last year. Have I been able to invest time there? No.

This is not scrutiny. This is detrimental. This is what I would call a classic example of this Assembly participating in self harm. Please stop.

855

The Deputy Bailiff: Deputy Gollop, I was going to call next, followed as I said by Deputy Le Tocq.

Deputy Gollop: Thank you very much, Mr Deputy Presiding Officer.

860 I could speak for hours on this subject, but I sense the mood of the States is to complete the debate as soon as possible. And it is difficult for me on a number of levels, because if I am candid, I signed the Requête under a fair degree of persuasion, after thinking about it for at least 24 hours. I came to the

conclusion that this matter, which has already taken up a least a day of our debate, was sufficiently important to warrant a debate, and I think we have had that debate today.

865 Deputy Langlois has made a point about his professional experience, and I recall he has said in the context that one of his many roles has been as a football referee. And I think in that context, the Board deserves more of a yellow card than a red card.

870 Nevertheless, I do have a number of grounds, some of which I think go beyond the scope of this Requête, that I would have phrased differently in some respects. Because if one turns to page 364, some of the paragraphs specifically relate to Deputy Dorey and others relate to the Board. But clearly, as you, sir, have reminded us it is a collaborative effort on both sides. But I will outline my points.

875 Having said that, I think the debate has strayed quite a few times, even this morning, and what has come out from a number of speeches – Deputy Bebb, Deputy De Lisle and others – has been that the real issue here is how much money Health and Social Services Department have at their disposal, and that I think is a primary reason for bringing this kind of issue to the Assembly, in the absence of a more coherent report from HSSD that perhaps is contributing to the situation.

If I go through the grounds, the first point is Deputy Dorey consistently said that the money for bowel cancer screening had been spent, when a quick look in the business plan would have shown that money could not have been spent. I think we have dealt with that issue, and Deputy Dorey has apologised and there were mistakes made at various levels within the HSSD hierarchy, and it was a complex subject.

880 Deputy Dorey's leadership and ability is questioned. I accept Deputy Bebb's point that everybody has got a different style of leadership, and I know that Deputy Dorey was an able leader at Housing when Deputy Dave Jones was unwell for a few months, and that he is one I think of several people here who could make a good show of being Minister of this Department.

885 Nevertheless, I think there have been perceived issues from my point of view, which might not be true, of the Board working together in every sense. I note that the Board has no non-States members on it, which is curious given the debate which led to Deputy Adam resigning, very much questioned whether a future Board should have additional resources on it, perhaps people who are expert in legal, financial or other matters, and the fact that they have chosen not to have non-States members, I think is intriguing.

890 I would also say that I have complete confidence in all the five, or four, individuals who sit on Health and Social Services – and of course Deputy James, my Deputy Minister at Social Security – individually, but whether the particular chemical, psychological combination is the best possible for the Board, we do not know. But, of course, we have a chance to change that by electing a new member later today.

895 Recruitment is mentioned here, and recruitment has undoubtedly perhaps improved but has still led to money wasted, and the issue I have is there was a pincer movement on the former Health and Social Services Department from various sources, and there was criticism from both what I would loosely call the political right and the political left, but the combination of forces that led to Deputy Adam retiring surely would have given the new Board a determination not only to increase the number of financial accountants and managers beyond the levels that Deputy Bebb has suggested, but if necessary to re-prioritise and re-focus their forces. Because they were equally aware that many of the people who had initially brought the aborted Requête of No Confidence that Deputy Hadley had put before the Assembly at that time were concerned about perceived cutbacks and closures.

900 And therefore the message the Board should have got was an early debate in this Assembly on resources. Instead, during the period when admittedly there was a departure of a senior officer and a few changes made, the 2020 Vision that Deputy Adam had got more or less approved by the States, kind of disappeared, and that was really my main concern about leadership: that we have not had leadership from the Board about future strategy and about the resources they need to do the job, and possibly unmentionables like outsourcing. We have heard micro-management of the canteen, changes of policy one way, changes of policy the next, and a reason given that a member of staff retired so they changed the customer service strategy. The leadership there needs to look more fundamentally at these issues.

910 I agree with a lot of what Deputy Stewart said: perhaps the Department from a Board does not just mean the caring, it means the business delivery as well.

915 And as for the bowel cancer, we have heard a lot of complicated arguments from many sides. I have sympathies with what Deputy De Lisle has said, I have to say, and I suspect that if you asked a variety of professional experts from the United Kingdom and elsewhere you would get, as you do in other walks of life, different answers. I think that if we had a Rolls-Royce amount of money to spend, we would explore screening people at 50 and older, using the other techniques that are technically different.

920 The issue again comes back to money, and the ability of Health and Social Services not only to make efficiency savings within their staff and recruit utilising less money, but come to the Assembly. I am convinced a few years ago, former Deputy Roffey, who is well known as a critic of the current Assembly, and a commentator, would have done just that, and that is the leadership I am looking for. I do not want the Board to resign with a cloud over their heads – they have chosen not to go earlier – but I am looking for that leadership.

I would say one further point: one of the factors which influenced me to sign this was that I value very highly Deputy Storey's political abilities and integrity and his work as Deputy Minister of this Department, and I was perhaps concerned that he would not be able to continue. Now that he is continuing, I support him entirely.

The Deputy Bailiff: Deputy Le Tocq, to be followed by Deputy Soulsby, Deputy St Pier and Deputy Paint.

Deputy Le Tocq: Thank you, Mr Deputy Bailiff.

Sir, when there were strange voices emanating from the floor around Deputy Conder's seat, just before, I did wonder whether it actually was a Member of this Assembly who had lost the will to live, and was asking for somebody to take them away. I was coming to that point, sir.

I will be brief because Deputy Langlois has already articulated a lot of what I was going to say, and indeed others, from when you indicated that I would be allowed to speak.

I was mindful, sir, to potentially bring a Guillotine Motion under Rule 14(1) earlier. But knowing that the demise of French things seems to be indicative in this Assembly at the moment and I would probably be booed down by both sides for doing that, I have not done so and I have begun a speech, so I cannot do so now.

But, sir, my point is, I do believe that whilst this sort of debate may be of great interest to the public and the media and to certain Members here, I do not believe it is actually achieving what we want it to achieve in terms of leadership, and I will come back to that in a moment if I may. Because I do believe it will discredit this Assembly, particularly because we are seeking to do, and achieving in many areas, some very good things under very difficult conditions. And it is exactly those difficult conditions which I see and why the current Minister and Members of HSSD have my sympathy: they are working under very difficult conditions. And when you work under very difficult conditions, you have got to take leadership very seriously indeed.

I want us to look at the grounds for this Motion of No Confidence, and just explain to the Assembly why my sympathies at the moment lie with the current Minister and Board.

First of all, the grounds state in the Requête:

'Both of the statements made by Deputy Dorey referred to in the foregoing paragraphs numbered 2 and 3 were incorrect and seriously misled the Assembly.'

I do not believe 'seriously misled the Assembly'. They may have misled the Assembly, that is true, but they were not intended to mislead the Assembly and Deputy Dorey has covered that, as indeed have other of his Board. They were not intended to and under the constraints there, I do not think you can qualify that as 'seriously intended to' or with any degree of intention.

The second ground is that:

'Deputy Dorey consistently said the money for Bowel Cancer Screening had been spent when a quick look at the outlined financial case in the business plan would have shown that the money could not have been spent.'

I do not believe that a 'quick look' would have done that. It has proven to be, as this debate has shown, a very complex situation, and one of our difficulties is that we are working with limited resources, HSSD particularly. Now we need to realise that, to get to a place where we have the right information at our disposal. I have been conscious of this, and sometimes yes, it may well be down to staff competence and we need to deal with that management culture that does not handle that properly. But you do not cover those sorts of things overnight. It takes time for that degree of leadership to come into place. It takes time to do it, and I am politically at the moment trying to do that. If we do not give people the opportunity to do that, then actually we will just shoot ourselves in the foot, because we will go round in circles and that is what I am fearful of us doing in this respect.

The third ground listed here is:

'His leadership and the ability to get the board to work together has been so ineffective that the most knowledgeable member of the board has resigned.'

Well, Deputy Brehaut has made comments on the qualification and the knowledgeable Member. We could debate that for some time. It is an emotive way of describing things. I will not go into that. But the phrase 'so ineffective', I think is incorrect. It may have been ineffective in certain areas. We are all ineffective in certain areas and that is probably why we need the help of a Board.

Now, I may run things differently than Deputy Dorey may do. I do not think I have actually been in a situation where Deputy Dorey has been chairing a meeting. But, I do believe that given our current system where you can end up with Board Members that you have not chosen to work with – I will not make any

further comments on that – you have got to deal with that under democracy and you need to do that to the best of your ability.

Now, it turns out that Deputy Dorey actually, I think, supported all of his... well, they were all of his nominees. So he is working with that, and I want to give him the benefit of the doubt of working in a difficult situation, no doubt where lots of scrutiny takes place around the Board meeting table, and I do not think it is true to say that his leadership so far has been ‘so ineffective’ in that. And we have heard certainly that that has not been the reason that a Board Member has currently resigned.

The next thing, the failure to recruit nurses, I do not want to comment on. That is again something that I believe will take longer than they have been given time to actually deal with.

The next one is:

‘Deputy Dorey has not got the budget under control and has not brought a report to the States.’

Well, my understanding is that the budget is more under control than it was this time last year. The question is a matter of quality. We have T&R now involved, which last year was not the case. There is certainly a move in the right direction and I am willing at this stage, at this juncture, to allow that culture and that new sense of focus, with all the changes that are happening in the staff there, to be given some time to take effect. I think that is fair and equitable under the circumstances.

The next says:

‘Thus Deputy Dorey seriously misled the States on two important issues and failed to fulfil promises that he made in order to secure election.’

Again the word ‘seriously’, I do not believe it. I do not believe it was intentional, in fact in some situations he has not misled the States, he has not been given an opportunity as yet to demonstrate control, or the Board has not been.

And coming back to that point I think they need to work as a team, and at the moment, I am very happy to say I am watching you very carefully, personally, and as a Minister, to make sure that you do keep to these things and you bring results. We need to see that.

The final grounds here are:

‘We the undersigned Members of the States of Deliberation declare the Minister and Members of HSSD have grossly mismanaged this issue by misleading the Assembly and not spending allocated...’ etc.

‘Grossly mismanaged’: I do not believe it has been grossly mismanaged. There are far bigger issues that we should be dealing with, and one of the things that most frustrates me with our system of government is we end up spending inordinate amounts of time on things like this, which are important I will give you, but they are not so important that we spend very little time, or we are given very little time as a result, to concentrate on the sort of policy decisions and cultural change that really needs to happen. (**Several Members:** Hear, hear.)

I ask for some discipline. I am not into party politics the way they do it in the UK, but one of the great advantages would be some discipline. We have none. None, virtually no tools at our disposal, except force of personality. Now, some of us have that in oodles and others do not. But we need to operate with that degree of leadership.

Leadership implies followership, and I know we are called representatives of the people, but sometimes if we are asked to be leaders, we have to lead by telling the people, as it were, ‘This option is better than that option. This direction is better than that direction.’ Otherwise, let us go out to referendum on every single issue. Some of these issues a decision needs to be made by the political Board and as we have heard, and I know that from my responsibilities in the Home Department. Sometimes you have opinions that are given to you on technical matters, on legal matters, and here on medical matters that are opposing one another. You have to come to some sort of conclusion on it. Now we might disagree with that conclusion, but we have actually instructed that the mechanism for making progress swiftly is to have a Minister and a Board who work on those sorts of decision-making processes. Yes they should be scrutinised but not like this.

That is why I believe Deputy Fallaize was absolutely right this, if anything, this should have been a Motion of Censure, not a Motion of No Confidence.

So I have succeeded in wasting more of the States’ time (*Laughter*) but I hope that I have sent a very clear signal that I shall not countenance, I will not spend time in this Assembly debating these sorts of things, that in my mind remove us from the opportunity to talk about far more serious things that we need to do, and urgently.

The Deputy Bailiff: Deputy Soulsby.

Deputy Soulsby: Sir, I will be speaking on behalf of the Public Accounts Committee. However, let me make it very clear from the start that whilst individual Members of the Committee may have their own views on the Motion of No Confidence, the Public Accounts Committee has no opinion on the matter.

The Committee considered it necessary, given the context in which the Motion of No Confidence was proposed, that we comment regarding the figures provided in relation to bowel cancer screenings and the findings from our recent report into HSSD's financial management, insofar as it relates to the motion.

I will firstly focus on the financial information recently provided by HSSD in relation to bowel cancer screening. The Committee welcomes the publication of the internal report on this topic and notes the Department's acknowledgement that there was an underspend on this budget of £87,000 in 2012 and £156,000 in 2013.

Whilst we have had limited time to analyse the information, it is evident to the Committee that there are questions surrounding both the level of the original budget and actual expenditure.

In October 2011, the States approved as part of the SSP a budget of £294,000 for the first year and then £328,000 on an ongoing basis. This was based on the business case produced by HSSD. It would be logical to assume that the budget request would be based on the additional costs that would be required to undertake that service. However, it is clear that not all these costs have been incurred, and some elements of the work have been absorbed by existing staff. Whilst it would appear this has not prevented the service from running we note the comment that it may have had an effect on workload elsewhere.

However, we do question whether the original budget needed to include the level of pathology indicated, given that this is a tiny fraction of the annual workload undertaken by the laboratory.

Therefore, we agree with the statement made in the internal evaluation report undertaken by HSSD that the budget allocation included a higher allocation than was actually required, although we do not necessarily agree that this is because of the reduced cohort. The underspend therefore should be seen in this context.

The Committee noted that the original business case allocated £45,000 for an IT system from capital expenditure, but at present it appears that a system to support this screening requirement has not been implemented and this is causing major difficulties for the staff. There appears to be no reason given in the report why this system is yet to be implemented, when it would clearly allow staff to make more effective use of their time. It may also reduce the need for additional staff time, should numbers screened increase.

In the initial proposal document, it states that there would be a tendering process for the full programme to obtain best value for money and that costs obtained from local tenders would be benchmarked against those available from UK providers, to ensure value for money is achieved prior to any contract award. It appears that such a process was not undertaken. It cannot therefore be assumed that we are getting value for money until that review is undertaken.

Now, the bowel cancer screening service is minor in cost terms when compared to the overall HSSD budget, around 0.3% in fact. But the issues identified merely serve to confirm the Committee's findings in its recent report, that financial management in the period reviewed had been weak.

However, the Committee found that financial management was improving, indeed one of our recommendations is that Treasury and Resources should provide an oversight role with a clear focus on enhanced communication. It is therefore encouraging to see that Treasury and Resources have assisted HSSD in terms of verifying figures, albeit that it has come with certain caveats.

The PAC report into financial management within HSSD made it clear that matters have not been helped by frequent Board changes, and as such we have recommended that during any transition of Board membership, there is a need to focus on knowledge transfer, specifically with regards to financial matters.

The Committee is also of the view that more generally there should be financial expertise on all Boards and that such a requirement is imperative for a Department responsible for over £100 million worth of annual expenditure.

Now, this particular issue just emphasises the fact that the States of Guernsey needs to determine and prioritise the services it wishes to provide, and decide how these will be delivered in the most sustainable manner for the future. Until we do that we cannot be assured that we are getting value for money from our expenditure on health and social services provision.

The Deputy Bailiff: Deputy St Pier.

Deputy St Pier: Thank you, sir.

I would just like to begin by responding to some of the comments which have been made so far during the debate, which touched some of the areas of responsibility for the Treasury and Resources Department.

Sir, a number of Members have referred to SAP. Deputy Trott mentioned it in the question to the Minister of HSSD yesterday, and Deputies Storey and Bebb have mentioned it in their speeches.

I think the first point to make, sir, is SAP of course is just a system and what Members are really talking about is SAP and the Shared Transaction Services Centre, the implementation of that project.

And the second point is, of course, the implementation of that project has produced well known challenges for all Departments, including of course HSSD, and particularly in the early part of the implementation at the beginning of last year, and up to period 5, as Deputy Storey mentioned in his speech.

1090 But that does *not* explain the overspend, or indeed the failure to track spending on bowel cancer screening. If the cost centre had been set up, then those expenses could easily have been tracked through SAP and the Share Transaction Services Centre.

1095 Sir, I think it would be useful for the Minister in his summing up on this debate to confirm that the implementation of SAP and the STSC project, whilst it has produced challenges for the Department, the challenges for the Department do indeed go well beyond that.

Secondly, I would like to respond to Deputy Fallaize's comments. He made a number of references to seeking to track over- and underspends against each budget line of a Department's budget, and questioned that practice. Well, there is a significant difference between the SSP bids, of course, of which bowel cancer screening was one, because those bids are voted for a particular purpose, and therefore Treasury and Resources does expect that if funds are not used, or are underspent, that they would come back and not be used for other purposes, and that indeed has been the practice elsewhere.

1100 There is a fundamental difference with cash limits for Departments, which are for Departments to allocate and manage. The point which Deputy Fallaize made about the Government Services Plan and his fear that resource allocation would hamper the operation of the Departments by seeking to manage Departments line by line. Well, yes, the Government Services Plan, I would expect budgets to be built line by line and to be monitored line by line, but that does not necessarily mean that they would need to be accounted for in this place, in terms of over- and underspend line by line, unless of course that is what we ask, and I would suggest it would not be. But the key point is that there is a difference between SSP bids and the Department's cash limit.

1110 The third point I just wanted to pick up was Deputy Gollop's comment about non-States members, because I would certainly echo that. We, as Members will know, have taken a non-States member on to Treasury and Resources which has been an invaluable addition to our Board, and I too would strongly urge HSSD to consider it. It is in essence a free additional resource that can help share a burden of a very busy and challenged Department.

1115 Sir, turning the substance of the Vote of No Confidence, winding the clock back a year, I think it appeared to be suggested in the Vote of No Confidence a year ago that in some way Treasury and Resources was wielding the knife, and it became painted as an interdepartmental conflict between HSSD and Treasury and Resources, and I think that is largely because I actually came out and said that personally I had lost confidence in the Board at the time. The reason for that was that there appeared to be, there appeared to be a dogged refusal to accept that the overspend was anything other than a demand-led problem. And I said then, that nobody could say what the right level of spending was and indeed the Public Accounts Committee have in essence come out and said the same thing, and Deputy Stewart has made the same point this morning, and I said that the problems were ones of poor financial management, lack of management information and budgeting, and without which we really did not stand a chance of being able to manage within budget. In essence, I think actually the previous Department were perhaps poorly advised and it was never a personal issue, and of course that has been proven by the fact that we nominated Deputy Adam to join our Board, and he is now a very content and useful member of our Board. But I do think that we have been vindicated by the Public Accounts Committee report, which in essence said that we knew no more than others until it was really too late.

1130 So, if we now roll forward a year and in the last year we have, of course, had the Public Accounts Committee itself, the Finnamore Report, the Internal Audit Report on Private Patients' Income, and all of those have said the same thing: that financial management and controls are weak. Now, if the current Board were in denial and still continued to maintain that that was not the case, and that it was an entirely demand led problem, then I would have the same lack of confidence that I did a year ago. But they do not, that is not the position that we are in.

1140 Of course, the immediate cause of why we are here is the bowel cancer screening, accounting for that. And I think Deputy Ogier was seeking some kind of reassurance that this could not happen elsewhere. I think it is very likely to have happened elsewhere within one of the other SSP bids, and we already know from the Minister's opening speech from this debate that the overspend will be larger than the £1.3 million that was previously forecast. So, it is absolutely inevitable.

Sir, actually I can do no better than quote from the PAC's report themselves, where they actually say, 'It comes as no surprise to the Committee that such shortcomings exist', and really nothing has changed since that report was of course published.

1145 We often forget, sir, until Deputy Fallaize reminds us frequently, that we are one Government. This is all our problem. This Department spends £110 million. It is a third of our general revenue budget. We cannot possibly leave it to just five Members. It would be an abdication of responsibility of the rest of us to do so. We need to work together. Deputy Brehaut said that yesterday, and he referred to the assistance, or

the dependence which his Department had with working with Housing to assist the work of HSSD. I think Treasury and Resources has recognised that, and we have done what we can, recognising as the PAC report says that we currently have no formally mandated oversight role. We have done all that we can to assist with the particular problems of the SAP/STSC implementation challenges, and I am sure the Minister will confirm that in his summing up.

We have supported the Department through the use of the budget reserve in 2013. We have supported the Department in recommending to this Assembly the reversal of the FTP targets between the two years, and there has been significantly better communications between the two Departments in this last 12 months, which I am grateful that the Public Accounts Committee has acknowledged.

Sir, the Public Accounts Committee, in the summary of their report, made three recommendations in particular, which I think are of relevance to my Department. This is at paragraph 1.9 the PAC recommends that the recommendations within the Finnamore and Internal Audit Unit Private Patients' Income Reports are implemented. Absolutely I would endorse that, and indeed Policy Council, on 6th January this year, the first meeting at which the new Chief Executive was present, tasked the Chief Executive, the States Treasurer and the Acting Chief Officer for Health to work together to expedite the implementation of the Finnamore Report, as quickly as possible. But, we should not underestimate the scale of that. That is a huge, huge piece of work. It will not be quick. Anybody who tells you so is naïve.

The second recommendation was that the implementation of robust FTP projects is undertaken in conjunction with the States Treasurer's team. Again, I fully accept and indeed endorse the Public Accounts Committee recommendation there, and we will do, and are doing, all we can to support HSSD in the delivery of robust FTP projects.

And finally, the Treasury and Resources Department continue to provide an oversight role with a clear focus on continuing to enhance interdepartmental communication, and again I am grateful to Deputy Soulsby for acknowledging that in her speech. I think the report of the Public Accounts Committee is an excellent report which we should not ignore or allow dust to gather on a shelf.

Deputy Fallaize said that no other Committee could do better, and in essence I would endorse that.

Deputy Hadley asking questions, as others have said, is entirely appropriate, and I see those as being ripples or pebbles thrown into a pond. But Votes of No Confidence are throwing rocks into the pond and are not helpful.

I can conclude, sir, unable to improve on the words of Deputy Soulsby in the Public Accounts Committee Report where she says, in her covering comment.

'The Committee calls upon all parties to embrace the opportunity to forge a robust partnership with HSSD to ensure that support is provided in its ongoing endeavours to address those issues that have been identified.'

Sir, that is what we must do. We must all support HSSD and the Board. This is not an issue... or they do not face challenges which they will be able to solve on their own without our assistance. Thank you, sir.

The Deputy Bailiff: Deputy Paint, are you wishing to speak... and then Deputy Perrot, who are the last two of the signatories who have not yet spoken?

Deputy Paint: Sir, and Members of the Assembly, for a Minister, or indeed any elected Deputy to mislead any Assembly is a very serious matter – not only for that particular Deputy, but also for the reputation of the States of Guernsey as a parliament.

In this particular instance, I do not believe that Deputy Dorey or his Board set out deliberately or wilfully to deceive the Assembly.

Having said that, it is clear that something went drastically wrong for him, having been so adamant that the ring-fenced bowel cancer funds had been spent, when they had not, which he was forced to admit was not the case later. It is all a matter of trust. I like to be able to trust my fellow Deputies.

Sir, I would like to take you back to the event just over a year ago, if I may. Following the Vote of No Confidence against the SSD Board at that time, I was left feeling after the event that I had been used by some of the Members of this Assembly for their own ends. I agreed to sign the Requête of that time because I felt strongly that it was the right thing to do. I believe that it was wrong to close a vital hospital ward and cancel patients' operations for the sake of saving money, leaving distraught Islanders without the treatment they needed. What I now think is a possibility is that a group of Deputies had their own political agenda, used this event to engineer the removal of the Minister of the HSSD, then Deputy Adam, in order to put their own preferred Minister in the job.

What has been said today also gives the impression that the present Minister was deeply involved in assisting in that engineering to remove Deputy Adam –

The Deputy Bailiff: I am going to stop you on that point, because it does not form part of the grounds in the Petition.

Deputy Paint: Sir, I am trying to explain how I feel on this matter, which I will if I possibly can –

The Deputy Bailiff: Well, you have just explained it, so can we concentrate on the grounds, please.

Deputy Paint: Because history tells you that you get an impression and if we allow that impression without that impression being aired, then it will just remain in you and you will not be able to say it. You just cannot vote properly.

I am trying to get the Assembly to understand how I feel. If that is wrong, then I will stop saying it.

The Deputy Bailiff: Sir, you can continue very briefly on that point.

Deputy Paint: I am nearly finished, sir. And also the fact that, after Deputy Dorey was elected the Minister, two who had resigned were re-elected onto the Board. If this is as I think is the case, this is committee politics at its very worst, and makes me ashamed that I actually signed that last Vote of No Confidence. One only has to look at the voting patterns to see that this is a definite possibility – of certain Members, that is. Unfortunately, in my view, we may have the makings of a political party in this consensus Government. Sir, I am glad to be able to get this off my chest as I think it needed saying, and I am not a man who is afraid to speak out when I feel I have been used as a pawn in somebody else's game.

Of the present Board, I have the greatest respect and faith in Deputy James, who has unfortunately resigned. To my knowledge, Deputy James is a very experienced nurse and an exceptionally good Deputy and very easy to get along with. I know that she did not want her resignation to be debated and I will say no more on the matter, but these events all indicate that there is something drastically wrong with the SSD Board.

I equally have the greatest regard and respect for Deputy Martin Storey. I know he is one of the few Deputies that can actually count. *(Laughter)* I worked very well with Deputy Storey in the last term and closely in Housing in this term. I am sorry that he is leaving Housing, for the reason he has made clear in his letter of resignation, and for the record, I believe that Deputy Storey would not condone any misleading of anyone, and in my view he is, or was, an excellent choice for Deputy Minister.

To sum up my feelings on this issue, this all indicates that the Board were wrongly advised by someone in senior management, as Deputy Dorey has already said.

However I did not get elected for the fear of upsetting a colleague, even those I feel deep respect for. I signed this Requête because I believe this matter is so serious that it had to be debated by this Assembly.

I have three questions for the Minister to answer, if he will. What is he going to do, if he keeps his job as Minister, about the SSD employee who appears to have given misleading information to him and his Board?

Can he also inform the Assembly whether any Islanders have been refused bowel cancer screening in the last two years, and if so, what were the reasons given?

And lastly, will the underspend money allocated to bowel cancer screening be returned to T&R in due course?

Thank you, sir.

The Deputy Bailiff: Deputy Perrot, Deputy Lowe.

Deputy Perrot: I am obliged, sir.

It was getting towards late afternoon last October when I was trudging around a mountainside in Northern Corsica that I realised actually that I was getting a bit past it. *(Laughter)* I have been walking in the hills and mountains in Europe generally for many years now, and good God, that damn near defeated me! But it was not until this morning that I realised that I was so past it that I had actually gone beyond the age when I can be medically inspected. *(Laughter)* I hope that that does not relate as well to the cure, merely to the inspection. *(Laughter)*

Now when Deputy Gollop was speaking, he sensed that there was a wish for this debate to be concluded, and he nods vigorously at that as I say it. Well he may think that, but the point is, of course, once we have spoken, we are happy that we have spoken and then we do not want anyone else to speak after it! **(Several Members:** Hear, hear.) “Not in my backyard.” Well, I am going to speak, and I make no apology for it. I was one of the signatories, I am a *requérant*, so I think it is my duty to speak let alone anything else. *(Interjection)*

Doubtless my very many critics will disagree with me that whatever we do in this Assembly, we ought to act in accordance with our consciences and it does not matter, as far as I am concerned, whether the lofty

Ministers or on political Boards or on Committees, we are here to act in accordance with our consciences. We are rather like lawyers, but in this case representing our own consciences without fear or favour. And so I think there ought to be a presumption on the part of everybody within this Chamber that anybody who brings forward a Motion of No Confidence is acting in accordance with his conscience, and he ought not to be dismissed simply as another suspect, one of the usual suspects, or somebody in whom someone is disappointed. We act in accordance with our conscience. (**A Member:** Hear, hear.)

And if it is thought that we are wasting precious States' time and the precious time of Ministers and Deputy Ministers, you ought to see what it is going to be like if we go towards anything like executive government, because then the only opening to those of us who are foot soldiers is the scrutiny which we give to politics generally in this Chamber. (**Several Members:** Hear, hear.)

So as far as Deputy Hadley is concerned, I have to say I do not know him particularly well, but I regard him as somebody who is acting in accordance with his conscience. Now, I know, sir, that you have said that we must not refer to individuals, but the trouble is what has been said cannot be unsaid. And what happened over the course of yesterday was that a person was stripped bare of his political character, and that has not just been heard within this room. It has been heard on the wireless. So someone, and that someone is me at the moment, until I am stopped, is here in part to defend Deputy Hadley, because yesterday, I have to say this is genuine, I was shocked and I was outraged at yesterday's performance by Deputy Storey and by Deputy Brehaut in their attacks – their *ad hominem* attacks on Deputy Hadley.

Incidentally, may I pause and assure Deputy Storey that I do welcome him back and that I am pleased to see him in the Chamber and I am sure that we all are, (**Several Members:** Hear, hear.) but I hope that he does learn that one plays the ball and not the man. That sort of behaviour is the behaviour of ignorant school bullies who are afraid of how an argument might turn out, and I deprecate that.

And as their criticism grew yesterday of Deputy Hadley, the more I had respect for him, because he was characterised as a headline chaser. How often have we seen Ministers grinning into the camera boasting of what their Department has been just recently in the *Press*? Everybody is constantly pestered by reporters from the *Press* for copy. It would be very odd indeed if the efforts made by Deputy Hadley were not reflected in both print media and broadcast media. But he was characterised not merely as a headline chaser but as masking his bid for ministerial power by a false concern expressed in relation to this Requête. He was also characterised as a rogue who cares nothing about causing public concern and as a person who presses, a sort of vulture who preys upon HSSD staff so that he can repeat their views in the *Guernsey Press*, and as somebody who causes chaos in the public services, which he falsely purports to protect.

I think that all of those allegations should be cast to one side. They are scurrilous, and Deputy Hadley ought to be commended for his tenacity in asking questions, and at least bringing this before the States. Our time is not too precious to be discussing this sort of thing. That is in part what we are here for. (**A Member:** Hear, hear.) If Deputy Hadley spoke inappropriately to Deputy Storey when he was delivering a document to him, Deputy Hadley should apologise. That is not the right behaviour, but I strongly suspect that we have not heard the full story – no pun intended. But, I think Deputy Hadley, when he winds up, might have a little bit more to say about that.

So, however pestilential Deputy Hadley may appear, however difficult he has been, his persistence has shown that actually there *was* a misleading of this States recently. That actually is a fact, and it has been admitted.

Sir, it is for the Hadleys of this world to do that sort of thing, to hold the States of Guernsey to account. Departments are not too precious that they should not be held to account. That is what he is there for.

I confess that to begin with I was a reluctant signatory. I was not pressurised. I challenge anybody to say that I am the sort of bloke who would be pressurised, quite honestly. But I did feel that the Hadley noise in the background despite my deafness was irritating. It was not the comforting drone of a summer bee, but it was the high pitched squeal of an irritating wasp. (*Laughter*) But the reason why I signed eventually was I realised that Deputy Hadley was on to something, and that this boil really had to be lanced, that we had to have this debate, an open debate. So Deputy Hadley quite rightly, accurately quoted me in saying, 'Okay, I will sign, but put up or shut up. If you are going to do this and if it wins, put yourself up as Minister, then we will see what people think of you after that.'

But I am not part of a coalition of the usual suspects, and Deputy Storey yesterday said that we were a coalition – some of them, I paraphrase him, were the usual suspects, some he was disappointed in. How condescending! What we were were a number of signatories to a Requête.

Only yesterday unanimously – and in that unanimity, we include Deputy Storey – we endorsed, we passed a Requête in relation to Alderney. No criticism there, that some of those were the usual suspects, or some of those were people in whom Deputy Storey might be disappointed.

The point is that it is not only the great and the good who have their own individual consciences – the rest of us in the political *Untermensch* who are merely, in the views of some, the usual suspects, we have consciences as well. In signing this motion, it should be understood that I am not attacking – but this is how it is characterised, of course – but I am *not* attacking the integrity of individuals, of the Minister Deputy

1325 Dorey or of his Board. I am not in any way criticising their truthfulness or their capacity for hard work. What I do criticise is their ability to deliver what we thought we had been promised at the end of 2012.

1330 When Deputy Hunter Adam did the honourable thing and resigned I think it might have been November of 2012 – I might be a month out – against a background of overspending much was expected of the new Minister and his Board. It was the Guernsey equivalent of a sort of city company boardroom replacement, and replacement of the Chairman by concerned shareholders. The expectation at that time – at least *my* expectation at that time – was that there would be a proper clearing out of the Augean Stables by Hercules and his helpers.

1335 In circumstances where there had been severe criticism about spending and financial controls, my expectation would be that a new Chairman and Board would challenge absolutely everything. That, in my view, was not and has not been done. I understand that there is a sort of symbiosis between politicians and civil servants. They co-exist, but sometimes that co-existence seems to be just that little bit too cosy. Against the backdrop of events in 2012, I would have expected the mother of all frank discussions to have taken place between the Minister and the new Board and various civil servants. That sort of range of discussions seems not to have taken place.

1340 Because when under pressure from Deputy Hadley, the Board seemed to hunker down in its cave with its staff, repeating what the staff had told them, hoping that the criticism would eventually evaporate. One senior officer –

1345 **Deputy Dorey:** Point of correction.

The Deputy Bailiff: Point of correction, Deputy Dorey.

1350 **Deputy Dorey:** Deputy Perrot seems to be speaking to the House about what has happened within HSSD's Department when he has no knowledge of what has been happening (**A Member:** Hear, hear.) in this Department. He has absolutely no basis for what he is saying, and I also do not believe these are anything to do with the grounds in the Motion of No Confidence.

The Deputy Bailiff: Deputy Perrot to resume.

1355 **Deputy Perrot:** The words I used were '*seem* not to have been done' – *seem* to me not to have been done, and I am dealing with the grounds set out in the motion, because I am dealing here with:

'His leadership and ability to get the board together have been so ineffective that the most knowledgeable member of the board has resigned.'

We are talking here about leadership and ability. That is a ground.

As I was trying to say, one senior officer fell on his sword but that was it. From an internal report, made by the Board itself, we read that there have been failings at directorial and management level.

1360 The point is, as set out in this motion, the Board has continued to leave wards closed; it continued to fail to recruit nurses; it has failed to control its budget; it is an open secret that Board meetings have been on a number of occasions an exhibition of temper tantrums and in some case walk-outs. I thought I was going to be interrupted there. And now we learn that the wrong information was given to the States in October. I accept that there has been an apology for that.

1365 But it does seem that there is an issue about whether we have been told, given the correct information in respect of these cohorts. As I understand the argument, HSSD is saying that it had agreed that only one cohort would be examined. What I have here is an extract from the Board minutes. These are dated 20th January, I accept that that date might not be correct, but what the minutes said is that the Board agreed to approve the draft business case for submission to the Treasury and Resources Department, subject to inclusion of the latest data available from the pilot bowel cancer screening programme. Now that minute then related to a paper submitted to the Board by the Director of Public Health, Stephen Bridgman, and I have that document. It had attached to it the draft business case, and that draft business case, and I have a copy of it –

1375 **Deputy Bebb:** I am sorry, but I am not sure –

The Deputy Bailiff: Just a minute, Deputy Bebb. On what basis are you rising?

1380 **Deputy Bebb:** I must ask you on what basis can I rise, because I am very concerned as to how Deputy Perrot has papers that are supposed to be confidential to the Board, and how he is able to talk about them here.

I am concerned and I would seek your guidance as to whether it is appropriate.

1385 **The Deputy Bailiff:** Deputy Bebb, I am not sure that that is a point of order, or a point of correction. That is a matter you can take up with Deputy Perrot elsewhere. Deputy Perrot to resume.

Deputy Perrot: Thank you, sir.

1390 The reason why I have these papers is that they are copies of papers which were originally held back by the Department and then given to Deputy Hadley, who very kindly copied them and gave them to me. The person who gave them to Deputy Hadley was the Acting Chief Officer of the HSSD, and that was all cleared by HM Comptroller.

So I do not know what I have to do to show that I am squeaky clean on the subject, (*Laughter*) but they seem to have come into my possession by the appropriate channels. (*Laughter*)

1395 **Deputy Bebb:** Point of correction.

The Deputy Bailiff: Deputy Bebb, point of correction.

1400 **Deputy Bebb:** I am afraid they are *not* appropriate channels for confidential papers to be passed on inappropriately, and I feel that that is what has happened on this occasion.

The Deputy Bailiff: Mr Procureur?

1405 **The Procureur:** This is a Rule of Conduct matter. There are appropriate avenues to raise it through.

The Deputy Bailiff: Thank you Mr Procureur, which is why I said that that is a matter that could be taken up elsewhere.

Deputy Perrot to resume.

1410 **Deputy Perrot:** Well, if I am doing something improper as a result of quoting from this, I surrender myself to the justice of whatever Committee is going to look into the way in which I have conducted myself.

But these were released by the Acting Chief Officer. I am not sure that any stamp ‘Top Secret’, ‘Confidential’, ‘If you release these I must kill you’, was (*Laughter*) applied to them.

1415 Sir, if I could just, in referring to the business case, read point 1.1(ii) where the case says this:

‘to invite both men and women of two cohorts’

– *two cohorts* –

‘to attend for screening at the Princess Elizabeth Hospital.’

I merely read the document.

1420

Deputy Storey: Point of correction, sir.

The Deputy Bailiff: Point of correction, Deputy Storey.

1425 **Deputy Storey:** The point is that the document that is being read to this Assembly today is not the document that was passed to Treasury and Resources for their approval of the business case.

The Deputy Bailiff: I am not sure that is a point of correction, because Deputy Perrot made it clear that it is a Board minute, and not a document that was passed to Treasury and Resources.

1430 Deputy Perrot to continue.

Deputy Perrot: Thank you, sir.

That is exactly the point I was making.

1435 Sorry, I know that I am repeating myself, absolutely wrong, but I am going to do it. One of our jobs as Deputies is to hold Departments to account –

The Deputy Bailiff: Giving way to Deputy Dorey.

Deputy Dorey: Thank you, Deputy Perrot.

1440 I would just like to read to you from the Code of Conduct for Members:

‘For the avoidance of doubt the “confidential information” referred to in the previous paragraph includes, but is not limited to, Department and Committee minutes and other papers circulated to members thereof. The content of such minutes and other papers is not to be disclosed to any third party other than by resolution of the Department or Committee concerned.’

The Procureur: Mr Deputy President, we know what the Code of Conduct says. The issue is not about Deputy Perrot’s speech, but the circumstances in which he came across the document. If any Member wishes to raise a matter under the Code, that is for the procedures outside of this Assembly, as we all know.

1445 **The Deputy Bailiff:** Thank you Mr Procureur.
Deputy Perrot to continue.

Deputy Perrot: Thank you, sir.
Even I am getting bored with what I am saying, (*Laughter*) because I almost got –

1450 **The Deputy Bailiff:** We will not go to a vote on that, Deputy Perrot! (*Laughter*)

Deputy Perrot: You are too kind, sir.

1455 What I was trying to say before I was rudely interrupted was that I am not going to take pious lectures from people about my role in the States of Guernsey. (**Several Members:** Hear, hear.) And if I am going to challenge something, I am going to challenge it, and that does not make me part of some sort of political party. It is *me*. My signature on there represents what *I* think. I am not just one of the usual suspects.

I have little doubt, having heard all that has gone before, that this motion is going to fail. But, again I make no apology for supporting it.

1460 I commend the work, however irritating it may be to all of us, of Deputy Hadley. The fact is, because of his persistence, we do actually arrive at a position where we see (1) that this has been admitted, that there was an underspend which simply was not known; and (2), it does seem that there has been some sort of mistake between the meeting of a political Board and what then came through to Treasury, as to how many cohorts were going to be dealt with.

1465 Even if this motion fails, it is right for politicians and management to pause and look deeply into their actions and to ask themselves, really, whether they have acted as they should have done.

The Deputy Bailiff: Deputy Lowe.

1470 **Deputy Lowe:** Thank you, sir.

Just following on from the confidential papers and the exchange that has just taken place, if Members actually listened to Deputy Hadley’s speech yesterday, he read out the extracts of the very paper that Deputy Perrot just read from. So, it is already here in this Assembly. What is the problem with that? That is called evidence base, to be comfortable to put your signature on a Requête of a Vote of No Confidence that you feel there is justification for it. No problem with that whatsoever.

1475 And as for HSSD they stamp everything ‘Confidential’. If they have got a new piece of artwork in the PEH, every bit of paperwork that came to me as a Board Member when I was on HSSD had ‘Confidential’, and I tried to get that changed and said drop the confidential on everything because it is a nonsense. Put “Confidential” when it is meant, not just for stamping it. The answer was given, ‘But it is easier to do everything at the same time.’ Do not go there!

1480 Where I am on this is that I am not attacking the staff at HSSD. In fact, I am not attacking the political Members of HSSD. What I am saying is that what I feel is the political Members of HSSD have let down the States. Because here we were just over a year ago, when Deputy Adam and his team had been in place for a year, and there were problems with closing those wards, and this new Board was put in place and they were thought about very carefully, by the Minister, of who he wanted for financial expertise or indeed expertise for continuity.

1490 And of course the continuity thing comes up quite frequently, and what a nonsense that is! Absolute nonsense is continuity. If you want continuity, you must scrap four-year elections. If you want continuity, have elections every year to make sure you do have continuity for those that are re-elected, but they will be on the same Board when they go back. Because the current system that we have got and we have seen it several times already, you have got four, possibly five new members on a Board. Where is that continuity? It takes four years for the members to be on that Board, they are stuck on that Board – although we have seen a few resignations of late, and in fact, I think I have seen more resignations in this term, in the first year, than what I have ever seen in my 20 years in the States. (**A Member:** Hear, hear.) Is that good? No it is not. Do I have to love the people I work with? No I do not. I have been elected to do a job, and I will do a

job. It does not mean to say I have to be all lovey-dovey to everybody. I get on with, and do the work I am elected to do on a Department. If they are uncomfortable with that, so be it.

We are there to ask questions, not matter how uncomfortable that will be. That is our role. We are there to scrutinise, and better yet if everybody can get on. But nobody, nobody at all, should be intimidated for asking questions either at a Board or a Committee, or in here, and I welcome the likes of Deputy Hadley and others who do ask questions, and they should not be intimidated by Members around here because they are doing so. That is good governance. If you are not happy with a paper, send it back. It is no use saying, 'That is what the staff gave us.' Send it back. I have been on Boards with some of you round here and you will know we have sent paperwork back three times for not being satisfied with it. Evidence-based or no decision. Do a comprehensive paper or no decision. Because there will not be a decision from me and it will have to be a majority vote, because I will not sign up to that. I have to be comfortable I can sleep at night, as a custodian of the public purse, that the expenditure that I have been involved with or decision that I have been involved with has been evidence based, and that will remain during my political career. I will not be beaten into making a decision I am not happy with.

During my time on HSSD, which was three years, I saw two Chief Officers, I saw three Finance Directors, I worked with Deputy Adam, who had three Deputy Ministers in that four-year term. He had complete new members during that four-year term, and so we then had the start of the 2012 elections and it all changed again, and here we are facing another look of whether we change the members on here. And that must tell you something really. It must tell you something, that you actually need somebody in there who is prepared to ask those questions, who is prepared to come to this Assembly if there is problem and ask the States for support or guidance on the way forward on that. It is not necessarily the staff's fault. It is the political Members who are there to ask those questions.

And it is certainly not the first time – I accept this one with the bowel cancer screening that it was a very clear business case for two cohorts, and that is what was signed up to. I was a member on that Board and that is what I signed up to. I have those same minutes as Deputy Hadley had.

But, previously when I was on that Board – and I made sure it was minuted, because I thought it was immoral – on more than one occasion, I saw paperwork come forward where expenditure had been designated as part of the budget for a project to go ahead in capital and it did not take place because it was then transferred to help the overspend. I said that was immoral. In my opinion, if you have actually gone to the States it is in your budget you are going to do project A, or you have come to the States and you are going to do a certain area of work and that does not take place, that is misleading and that is not acceptable, without coming back here to explain your reasons for doing so. But to use that money to help the overspend, I wanted to make sure each time that it was made very clear in the minutes, I did not sign up to that. That is manipulation of expenditure.

We also heard yesterday about the blame culture. That came across so strongly, and Deputy Perrot has covered some of that. But they are blaming the media. When is this Assembly going to stop blaming the media? It is down to you! If you do not want to be open with the media, that is your problem. The media are your scrutineers. They are working a lot of the time and asking the same questions as the public.

Deputy Stewart said it this morning: the public are not happy with the States. We are too protective, we are too secretive. If you have got a good news story get out there and say it. If you have got a problem, get out there and say, 'We have a problem, and we are trying to resolve it.' Yes, 'we have a problem Houston', and I think we have got one here at the moment, I really do, and I do believe that this blame culture of the media is not acceptable either.

It was also a case of HSSD were given the opportunity to go on the phone-in last Sunday, and apparently, according to the presenter, he said they declined to do so. They wanted to wait until they had come to the States. Well, how shocking is that? I think the five of you are shocking, you are there to answer the questions for the public.

And no I am not going to give way, sir.

Deputy Brehaut: Sir, point of correction, sir.
I was approached by the radio and asked –

The Deputy Bailiff: Deputy Brehaut, point of correction.

Deputy Brehaut: Thank you, sir. I was asked by the radio to go on the phone-in. I had my two children. I could not go on the phone in. I then referred them to another Board Member.

I would be careful of Deputy Lowe, sir – just listening to the media and taking all of her information from the media.

The Deputy Bailiff: Deputy Lowe to continue.

Deputy Lowe: There are five on that Board and I am sure that somebody could have actually gone to the media. I accept if you have got family commitments, Deputy Brehaut, your family must come first. I support that.

1560 Deputy St Pier said it would be good to have non-States members on HSSD or any Department as they are free. No they are not. They get paid for being a non-States member on a Board. So do not think they are free. You have got to pay them for four years – you cannot even pay them for a year. You have to pay them for the whole term. That is part of the non-States members' rules.

1565 And equally, and it has happened many times in the past, you bring in expertise as and when you need it, because the person who is a non-States member on a Board is not necessarily an expert at everything. We also have the expertise supposedly in the Civil Service. That is what they are there for. If it is financial and you have not got enough financial support with your financial directors on your Board, you can go to T&R, I am sure they will assist you. We are all supposed to be working together corporately. Or you can bring in expertise from outside, as and when you need it. But they are certainly not free. At the end of the day, you are responsible –

1570 **Deputy St Pier:** Point of correction, sir.

The Deputy Bailiff: Point of correction, Deputy St Pier.

1575 **Deputy St Pier:** Sir, point of correction. I need to examine the record, but I think I said they were virtually free.

A Member: Yes, you did.

1580 **The Deputy Bailiff:** Deputy Lowe to resume.

Deputy Lowe: 'Virtually' – if you have to spend £4,000 or something, 'virtually' is not much to this States of Guernsey, but it is an awful lot to a pensioner, if they got £4,000. They are not free. It has cost this States money, and if you multiple that by 10 Departments, two on each Department, you have suddenly got an awful lot of money.

1585 That is what we are there for. We are the ones that are accountable and I have always made it very clear, I am not a supporter of non-States members – not against anybody in particular, I just do not believe in non-States members. You bring in that expertise as and when you want it, or you are the ones that are voted in and you have to make those decisions. Non-States members on the Public Accounts Committee, that is a proper constituted four non-States members and four political Members, and they are not classed as non-States members. That is the way it is actually formulated. I have no problem with that at all. But certainly with regarding Departments, I do.

1590 It was said yesterday about how staff had been silenced, and I raised that because my colleague on my left – Deputy Hadley was shot down for saying that – but my colleague on my left put on Twitter yesterday that he too had been told by staff that they could not speak to the media. I hope he is going to stand up and back up what he put on Twitter yesterday, because it is unfair when one Member is being accused of making this up and there is another political Member in this Assembly who is saying publicly that is the case. I do not know. I have never been told that, nobody has ever said that to me, that they will not actually talk to me.

1595 Sir, I just reiterate really, I do think there are concerns as far as I am concerned. There is not enough questioning. I accept that that was given in all good faith, at the time, but you know, hey ho that is just one thing over this last year. We were promised a lot that actually would happen.

1600 They have massive problems at HSSD. I do not think that anybody can get away from that. I commend the Acting Chief Officer who is an excellent Chief Officer and for him to be in HSSD, they are really lucky to have such a good capable person there. So I want to make sure that what I am saying here, and if I vote to support the Vote of No Confidence, it is certainly not against his ability and I will leave it at that, sir.

Thank you.

1610 **The Deputy Bailiff:** Deputy Wilkie, followed by Deputy Sherbourne.

Deputy Wilkie: Thank you, sir.

1615 I will be brief. There is just one point I want to reply on. The Minister and the Board in their speeches gave the impression that the underspend had been due to a lack of staff and disagreements between health professionals. They failed to mention that in the PAC report into the 2012 overspend, it states in the Board papers of 18th December that the current HSSD Board stopped bowel cancer screening for financial

reasons. The current HSSD Board stopped bowel cancer screening for financial reasons. Can someone from the Department explain this to me in their reply?

Thank you.

1620

The Deputy Bailiff: Deputy Sherbourne.

Deputy Sherbourne: Thank you, sir.

1625 I have no prepared speech, and I will be brief myself. But I feel as though I would like to make a contribution to this morning's debate, and I would like to put to bed one or two of the things that were said yesterday: criticism of Deputy Hadley in his search for signatories for the Requête.

1630 I would like to associate myself actually with the comments made by Deputy Perrot, who did sign. I was asked and I refused. Deputy Hadley is a friend of mine, and I applaud him for everything he does, burrowing away finding out information that most of us find very difficult to get. We are not a party system. We do not have party machines, research people working for us to get that information. So we rely on our network of friends and colleagues to get information to base our questions and our approach to various debates.

1635 The fact that Deputy Hadley has very close links with the medical profession, I am sure is a privilege for him, but it also means that he is subject to discussion, debate on the provision of a service in the Island. And I think it is right and proper, if he has concerns raised by professionals – just I would on Education if any of my head teacher colleagues, or teaching colleagues alerted me to concerns – I think it is appropriate that I should do that. And in fact I do, in Committee.

1640 But I think that Deputy Hadley is correct in his approach. I refused to sign, not on the basis that I was against what he was saying. In fact, the claims that he has made have been substantiated. There is no doubt about that. Not all of them.

1645 My main concern was that I did not see this as the solution to the problems of HSSD. As simple as that. I do not see replacing this current Board with another Board will be helpful. It is a poisoned chalice Committee in many respects. I do not think it is big enough. I am disappointed to hear that they do not use non-States members. I am on two Committees that do, and I am grateful for that. PAC has four non-States members, every single one of them complimenting the other with their skills and their professional expertise. And it means that we have informed debate, right the way through. Education is the same, we have been very fortunate to have one non-States member who keeps us on our toes. But, in fact, we work well because of that – not because of that intervention, that contribution, but because it adds to our experience and our knowledge base, and that really is essential.

1650 I objected yesterday to anyone claiming that the integrity of Deputy Dorey was in some way greater than Deputy Hadley's integrity. They are *both* men of integrity, and I have no doubt whatsoever of that, and I have full confidence in both of them.

But I could not sign the Requête. I do not agree with this as the solution to our problems. We have to find another way.

1655 But I do, and will, defend Deputy Hadley's right to act as a scrutineer in the way that he does. It is uncomfortable for us. It is not easy to say no to Mike Hadley. People said yesterday –

The Deputy Bailiff: Deputy Hadley, please.

1660 **Deputy Sherbourne:** Sorry, I beg your pardon, sir.

1665 People said yesterday that there was some talk about people being bullied to sign. Come on, we are grown-up adults! I do not feel bullied if someone persistently asks me to do something. I use a different sort of terminology and tell them what to do, (*Laughter*) but I did not feel bullied at all! Mike and I just – sorry, Deputy Hadley and I happened to disagree on the actual solution, the procedures, the strategy. But what he has done is right and proper and I will defend him on that, and I was very saddened yesterday to hear people attempting a character assassination, and we should keep that out.

It is a complex Department to manage, there is no doubt about that, and we need to get behind Deputy Dorey and his current Board to help them solve the long term problems of HSSD.

Thank you, sir.

1670

The Deputy Bailiff: Nobody else is rising. I had given a prior indication that I would invite Deputy Dorey if he wished to speak a second time in this debate on behalf of the Department, if he wished to do so, before the main representative of the Petitioners spoke, Deputy Hadley, so Deputy Dorey.

1675 **Deputy Dorey:** I do wish to speak. I am going to be quite a bit longer than the two and a half minutes.

The Deputy Bailiff: On that basis, we will adjourn until 2.30 p.m., but it will be Deputy Dorey to speak when we resume.

*The House adjourned at 12.28 p.m.
and resumed its sitting at 2.30 p.m.*

**I. Health and Social Services Department –
Motion of No Confidence in the Minister and Members –
Debate continued –
Motion lost**

1680 **The Deputy Bailiff:** Are we ready, Deputy Greffier?

The Senior Deputy Greffier: Billet d'État I, Article III.

1685 **The Deputy Bailiff:** I think you will find it is Billet d'État IV, Article I. (*Laughter*)
Deputy Dorey.

Deputy Dorey: Thank you, Mr Deputy Bailiff.

1690 I thank everybody who has spoken in the debate, particularly the ones who have supported the Board. I will try and go through some of the points made. I am not going to refer to everybody's speech but hopefully I will answer all the questions that have been asked.

1695 Public Health England issued a press release last year, which said from March 2013, sigmoidoscopy will be as a pilot in six hospitals in England. I think that just illustrates how far advanced we were in Guernsey. They were starting... They issued it in March, I think it was 1st April this pilot project was going to start, in just six hospitals, while we have been running it since October 2011, which was the decision of the previous Board, before the election. Sir, I think that just illustrates how advanced and how good our health services are in Guernsey.

1700 The first issue I would like to talk about is this issue, what was the Board's decision in January 2012? Deputy Hadley has said that the Board, when he was a member, never agreed to screening one age group. Well, I did mention it yesterday, and I will repeat it again. The States Strategic Plan bid had a front sheet which said, 'Description of proposal' and it said:

'Invite men and women of two age cohorts to attend for screening at the Princess Elizabeth Hospital.'

In the Business Plan, those words were changed to:

'Invite both men and women to attend for screening at the Princess Elizabeth Hospital'

and added to it was:

'to detect pre-cancerous polyps and remove them at an early age of 60.'

Now, there is one place in the report where the original words are repeated again, but the 60 is repeated again and there is one sentence which I think is particularly important, where it says:

'This will enable the development and expansion of the screening programme to a second cohort.'

1705 But we can argue endlessly about the interpretation – there is some sloppy editing – and why that other reference was left in. But, how did the staff interpret the decision of the Board at that time. Did they do two cohorts or did they do one? They did one, and that is how they interpreted the decision of the Board, and they did it why? That decision was made in January and Deputy Hadley was on the Board until the end of April. Deputy Adam was on the Board until the middle of December. So that is how they interpreted it.

1710 Yesterday, also Deputy Hadley said that, 'If I was Minister, more people would be offered screening within weeks.' Well, the report we issued specifically says, all participants in the meeting – this was of the key professionals –

'felt that some of the problems with the service to date could be attributed to the rushed implementation which is a result of political pressure. It was agreed that as far as reasonably possible this should be avoided a second time round.'

1715 And that is exactly what my Board is trying to do. We are trying to... We do not want to repeat the mistakes. We want to put this service on to a permanent footing and properly set up with the proper management, so that we can be proud of the service we deliver and we can also make the decision about who we screen. I will come back to that later.

1720 He said the review shows that lack of leadership was a clear problem with the bowel screening service. Yes, the service was set up when he was on the Board, but we are listening to the views of all concerned, and setting up properly, as I said, with the correct leadership, which it did not have, to put it on a permanent footing.

1725 He also mentioned about £0.75 million for off-Island costs, which I think shows how well T&R and HSSD work. It was money given from the budget reserve. He said it was for off-Island costs, but two thirds of it was from Children's Services. This particular cost was identified. I was on the T&R up to the middle of December 2012, I can remember Deputy Adam coming to T&R at that time and saying that they had this possible cost, and they were talking about a sum considerably more than that, and it was specifically referred to in the Budget for 2013, which was debated in December 2012 that there would be a need for some money to fund that. Sir, it was an extraordinary expense which was identified and the other expense for off-Island was for very special circumstances, which T&R funded from budget reserve. It shows how closely the Departments work together and the right way of financing is when you identify extraordinary expenditure that money is there to help the Department.

1730 Deputy James, I thank you for your very clear speech on your personal situation.

1735 Deputy Fallaize talked about scrutiny of HSSD in questions, but – and I will return to this theme – I think there has to be responsibility with questioning. You cannot just keep throwing questions at Departments. In this particular case, as I have said, before Deputy Hadley put his questions in we had started a review. I think the responsible way in that situation was to wait until the review was complete and then to ask the questions, if we had not answered them. As you can see, the report we issued at the weekend was very comprehensive.

1740 I would just ask Members, we have been bombarded with Rule 6 questions as well, and I would just ask – I fully accept the right of Members to ask questions, but just think of the cost of asking those questions – the way you divert managing staff from delivering services within a Department with a fixed budget. Do you really need to know that information? If you do, I fully accept the need for it.

1745 Deputy Fallaize said that he wanted to expand the programme and would do anything to support Deputy Hadley to extend it. Well, I was one of the ones with him, before I was on HSSD obviously in the last House, wanting the bowel cancer screening programme.

1750 Deputy De Lisle also asked about what was the plan for the future. Well, we want to do it properly, making sure it has a correct management structure, and the best decisions are made. I have said I spent a considerable amount of time and one of the factors that staff said to us, they said, 'We have a model that we use for breast screening in terms of the management, in terms of the clinical lead, it works very well, that is what should be applied to bowel cancer screening. We want to do that, we want to make sure we set it up on a firm footing for the future.'

1755 But one of the key decisions – is who do you screen? Beyond the 60-year-olds, that decision was made. That is why we want to get advice from the Professional Guidance Committee, which is made up of health and social care professionals from both primary and secondary care, as well as professionals working for HSSD. Because, as we have said, the professionals concerned do not agree, within HSSD, who were particularly concerned and MSG with delivery of this service. If the decision is to screen people a second time, this will not happen until 2017, because that is when the first 60-year-olds are 65. So there is not an immediate need for that. What the immediate need, if we do make the decision and we do get the advice from the Professional Guidance Committee, is other people who were born in 1951 or earlier who are aged 1760 65 or less who have not been screened. And that is one of the key decisions that we need to make – "are we going to extend the service to those people?"

1765 Deputy Lester Queripel spoke yesterday: he spoke that he had lost confidence because a cost centre had not been set up in 2012. Well, that was the decision of the previous Board, and as I understood it was not the norm to set up cost centres for States Strategic Plan bids. The pressure on the Department was to reduce cost centres, as I think Deputy Brehaut mentioned.

1770 He mentioned about the Children's Plan and about questions. He said he asked about questions that he asked before the debate and that gave him more information than was in the report. Well, that was responsible questions and surely that is the whole point of asking questions to get more information and where the report on the Children's Plan, he needed more information and we gave him that information before the debate.

There were two or three things which I would particularly like to focus on which he brought up about off Island placements. We are very aware of the cost of off-Island placements. We have negotiated with our UK suppliers and we in fact reduced rates and that is some of our FTP savings. We are reviewing the criteria for people going off-Island, it might result in us taking some greater risks in the Island in order to

1775 save money. That is a work that we are doing at this current moment. For acute off-Island, I mentioned a new approach in my opening speech which means that bookings have to go through us rather than directly to the hospitals, from secondary care. This gives us controls and visibility. Sir, we are committed to trying to reduce costs in these areas.

1780 He mentioned that age-related macular degeneration: we are very keen and, as I think Deputy Brehaut said, we are looking to start it 1st April or as soon after that as possible. This will save money, as well as being far more convenient for patients, but it is a joint project, we are working with Social Security Department.

He also mentioned about cardiac and we are well aware of the points he has made. We are working with MSG and Social Security to find a solution.

1785 I thank Deputy Storey and Deputy Brehaut for their supportive speeches.

I think people questioned about leadership and HSSD. I think the passion of the speeches from the Members of the Department shows how committed we are to working together as a team. We are working together, I think, very well.

1790 Deputy Ogier and Deputy Adam both touched upon the reasons for the error. Well, I have explained why the error happened yesterday and I would just remind them, I think it was in the statement, the pressure on staff produced an answer quickly, the absence of cost centre in our accounts, a presumption that the budget was overspent and a lack of appreciation of the significance of the question being asked, and a lack of in-house challenge to the initial draft answer. We have certainly learned from our errors and we will do our level best to make sure that does not happen again. I very much regret making those errors, but as I have said all the way along, I do not believe it is a resigning matter.

1795 I think Deputy Paint asked about what action, if anything, was happening, The Acting Chief Officer concluded there were no grounds for disciplinary action.

1800 We do have proper scrutiny of finances; we have a financial report every month, which gives detailed commentary on our finances. There are detailed financial figures, graphs, tables, so that we can fully understand the financial position at HSSD. We meet normally twice a month or we sometimes have to have extra meetings, and we have the financial report at one meeting and we have a verbal update at the previous meeting. Finances have been a key subject which we have concentrated on and the challenges of getting back into budget have been immense during the year.

1805 The analysis is not detailed by SSP bids, there has not been a necessity in the past from T&R to provide those figures. As I have said, T&R in their budgets have repeated the statement, they do not micro-manage Departments.

1810 Deputy Stewart, we do not keep figures by patient, so you cannot go in and find how much a patient costs. For private patients we have standard charges for different procedures, although we do record any other diagnostic work or pathology which is additional to that and we have improved our collection and recording of that information for private patients. But the basic procedure cost is done by the procedure and we do not... for example, I cannot see from this report how much we spend on orthopaedics because a ward that does orthopaedics also does other types of surgery, goes is there, and we have the breakdown by wards, because it does not actually, in terms of the cost of a ward, whether the ward is full or there is an empty bed, it does not make very much difference to the cost of delivering the service.

1815 Deputy Adam spoke about the professional advice given to the Board. Again I explained yesterday, the professionals were listed on the business case. We had no idea that they did not support it. We thought that they did support it, because they were listed on that business case. We have obviously learnt different since then. And the answer was discussed at the central management meeting where an MSG partner was present and there was no challenge to it.

1820 We do not have a procedure for returning money from SSP bids. I do understand there was some money returned in one year when the Department underspent, but from what information I have, for example in 2010 when the Department overspent, there appears to have been an underspend on one of the SSP bids that money was not returned to T&R, and it made no sense doing it. If you overspent, why return the money?

1825 He spoke about stopping bowel cancer screening whether it was a clinical decision in December 2012. Well, the information I have from staff is that, wrongly or rightly they interpreted the decision of the Board at that time to stop elective surgery. That meant stopping bowel cancer screening. I fully accept that might not have been what the Board then wanted to happen, but that is how the staff interpreted it, and therefore there was no bowel screening done in December 2012.

1830 He mentioned about the agency nurses. That was one of his questions that he asked recently. We have given the answer. I think it was on the same basis that he asked the same question in August. I did specifically question the answer back with the Head of HR to make sure it was right, because I was concerned because I did not want to give any incorrect information. He assured me that he has done it on the same basis because he referred to the August question, and it is a snapshot at that time. But if you want any clarity on that, please come back to me and I will give it to you.

1835 Deputy Stewart talked about recruitment, which has been one of the key areas we have tried to work on. It has been a problem for the Department. As has been mentioned, Deputy James did a lot of work in relation to this and also in relation to discussing it at Board meetings and making sure it was discussed at Board meetings.

1840 We started the year with no HR business partner. We had an appointment. Unfortunately, that person left not that long after. Then we had the Head of HR from the Policy Council, who has been very good for HSSD, but he himself said he is not full time, although he is located at HSSD, probably it is only at times probably 40% of his time is spent working on HR work for HSSD. But we still have made improvements. We have got a detailed action plan. But just the most recent report where we had about people who were going to leave it just shows the fact that in areas where we struggle to recruit, there is competition from
1845 other hospitals in the UK, and they are willing to offer better packages to staff to tempt them away. It is complicated, it is difficult, and we are reviewing some of our packages whether they are right or not.

I thank Deputy Langlois for his support. Making change is a long process. As ever, senior management is key to it and as you know, we have had changes there. But we are progressing, but it does take time. It will not happen overnight, and I just ask for your patience while we try and improve the situation. I am very
1850 confident that we are making considerable improvement, but they take time. I just echo his words: do not constantly micro-manage us. Allow the Board to carry on under reasonable scrutiny.

Deputy Gollop, I explained in my opening speech about my approach to leadership: commitment, hard work and finally consensus to find the best solution for the public of Guernsey. As I said, I think you can see from the members of HSSD, they are passionate and they really do care about health. Sometimes that
1855 makes it more difficult to find an answer, but we do work together as a team and we do find, I believe, the right answer which is best for the public of Guernsey.

Deputy Gollop, Deputy St Pier and Deputy Sherbourne all spoke about working with T&R. As I have said, we have had a close working relationship. We meet on a monthly basis, both at a joint meeting with staff and political.

1860 We have delivered the FTP savings in 2013, not just... I think Deputy St Pier mentioned about the flip-over from 2013 to 2014. We did not just deliver those; we delivered £900,000 which was left over from 2012, or just a few thousand short of it.

As I said in my opening speech, he spoke about bringing back a report to the States. I said in my opening speech, our concentration has been on financial matters and meeting the FTP project, but as we
1865 know, that ends at the end of 2014.

I said I believe that we need to have early discussions with T&R about what is the right financial model because we have made savings, but you just cannot carry on making further savings within health without cutting frontline services. I think this Assembly will need a report and will have to decide what does it want, and obviously T&R coming back with their personal tax jointly with SSD and benefit, and perhaps
1870 that is a time when we need to also have a report about the spending pressures at HSSD, because we have to decide what services we want.

We can always make cuts, but we will have to cut back on front-line services. I do not think there is much left to cut. There is always the odd bit, but I think we have the major things in terms of trying to deliver health and I am not just saying this Board; the previous Board as well.

1875 Deputy St Pier specifically mentioned SAP. It has been a challenge. We have worked together with T&R. I have reported back to the Policy Council at times when we have had problems and we have had support from other Departments, with staff particularly in Procurement, to try and help us.

Deputy Soulsby spoke about IT. Within the bowel cancer screening, we have got Endobase, which is a document and image management software, but we need administration software for our administrator, and that will be part of the permanent solution to the bowel screening programme. I think most of the cost of that Endobase software was financed by charitable contributions.

Deputy Sherbourne also mentioned about concerns raised by professionals, but I want to hear about concerns raised by professionals, but what I want is for them to come through the management of MSG to HSSD. We have done a lot to try and improve communications. As I mentioned before, the senior partner
1885 at, or one of the senior partners at, MSG come to our weekly management meetings and we go to their Board meetings. We do have good communication channels and we want to ensure, if there are problems, they let us know. I think what has happened with bowel cancer screening is a good example of that. How it should work is that they came to us and said they had a problem at the beginning of October, I met with them – because they expected this review to have been done earlier. It was the first I knew about it, we
1890 started that review and we have completed it by the end of the year, in the timeframe that we said.

The Vote of No Confidence originated from information which I gave to the States in good faith and which turned out to be inaccurate. For me the deep irony is that so much misinformation has been mingled with criticism of HSSD to mislead and I would say worry States Members and the public, leading up to this debate. There are many points I could make, saying that MSG's finance rate, HSSD budget, saying that
1895 politicians do not negotiate with MSG.

But I would like to touch on a few points. It has been repeatedly claimed that bowel cancer is the second biggest killer. It is not. Depending on the period time you look at, it is between the second and fourth biggest cancer killer in Guernsey. It is between the second and fourth biggest cancer killer in Guernsey. In the decade between 2003 and 2012, it claimed 140 lives, while lung cancer, which is the biggest cause of cancer death, claimed 350. In that same period, some 500 people died from a stroke in that period and 400 people died from heart attacks. It is important to note that the largest number of deaths in a particular age group was 38 of the 140 from bowel cancer was in the 85-plus age group, we do not know if screening will have any effect, as the Atkins research only considered 11 years after people were screened.

It has been claimed that screening could virtually eliminate bowel cancer. Bowel cancer screening can reduce the risk of death from cancer by 40% in the 11-year period after people are screened. That is not the same thing as eradicating the disease. It is important that Members know what the risks are, because I think it has almost been talked up out of all proportion to what it is.

Claims have been made about the cost of treatment, yet the business case which HSSD approved in January 2012, which included the cost of treatment, said it was between £8,800 and £12,800. If you use then the chance of polyps turning into cancer and in the evaluation report the higher figure of £12,000, the cost saved so far by the programme is £358,200 – not the millions sometimes being claimed. These baseless statements have completely distorted the situation and created a scandal which does not exist in reality.

As I have said, HSSD has been bombarded by questions over the last couple of months from politicians and media. This approach has been aggressive and confrontational. There seems to have been more of an interest in catching the Board out in the act of wrongdoing than in procuring the right service for Islanders.

Do not forget, the Board set out to review the bowel cancer screening service before Deputy Hadley even began to ask questions. And it is a review that will lead to us getting the right service in the future. But in the interim... and we estimate several hundred hours of staff time have been diverted in dealing with political pressure and dealing with media pressure that could be dealt with in a much more constructive way.

I am more than willing for my actions and the actions of my Department to be challenged and scrutinised, but when I stood for election as HSSD Minister, I said I would have an open style of working, that I would listen to diverse views and try and achieve consensus. That is my approach to Board meetings. I think dialogue is the right way to get good solutions. I think the challenge is helpful but it must be responsible.

The Vote of No Confidence has been fuelled by often inaccurate claims, which have misled States Members and worried the public. It does not represent a realistic way to improve health outcomes for Islanders, which is what we actually should be all caring about.

Voting this motion through will only create further instability for HSSD and will further delay the progress on key issues of service delivery and financial management of the Department, quite possibly out of reach of the current States term altogether. We need to take responsibility, as a States as a whole, for providing and protecting our health and social care services.

I think Deputy Flouquet used to often say and Deputy Jones about the Corporate Housing Policy: it is your policy (**Deputy David Jones:** Yes.) HSSD and the health care services: it is your services. If change is needed point it out constructively and let us work together, but this is not the right way to go about it, by this motion. Please do not support it.

The Deputy Bailiff: Deputy Hadley to reply to the debate, as the lead signatory.

Deputy Hadley: Well, Mr Deputy Bailiff, what I can say is that if any tender flowers are contemplating a seat in this Assembly they should desist, because yesterday I stood up to cries of ‘Shame!’ from Deputy Brehaut and ‘You should be lynched!’ from Deputy Quin. And I have to sit here for the next two years! (*Laughter*) (**A Member:** Shame!) (*Laughter*) Deputy Dorey –

Deputy Brehaut: I have to sit here for the next two years too, sir!

Deputy Hadley: Deputy Dorey started yesterday by expressing surprise that issues other than his misleading the Assembly had been raised by me.

Well, I think people should be aware that, important though the issue of bowel cancer screening is, it is not the most important issue. The most important issues are the closure of the surgical ward and the failure of his Department to recruit and retain staff. And the fact is that the continued closure of the surgical ward increased the overspend of the Department, instead of reducing it, as well as putting many Islanders through the trauma of a postponed or cancelled operation.

I am not surprised that he failed to address these two issues because he has not dealt with most of the issues that I raised. I think Members should realise that this is not a personal attack on anybody in the Assembly. These are valid questions on decisions that his Department have taken.

He has failed to explain to the Assembly why he failed to read the business case and the further information and the financial information at an early stage. Because I would have thought that it would be fairly obvious from a quick reading of that financial information that the money could not have spent.

1960 He continues to assert that there is disagreement among professionals about the way the screening should be carried out. There is *no* disagreement amongst the professionals.

Deputy Dorey: Point of correction, I just –

1965 **The Deputy Bailiff:** Point of correction, Deputy Dorey.

Deputy Dorey: It is in the report that was issued. He just cannot... I mean, I am being criticised for giving inaccurate information to the States. That is absolutely inaccurate information. He has got no basis for that. I have sat down with all the key professionals involved and it is absolutely obvious to us all and they explained there was disagreement. They were open with us in saying they disagreed.

1970 I would ask him to withdraw that statement and not give the States inaccurate information.

The Deputy Bailiff: Deputy Hadley to resume.

1975 **Deputy Hadley:** I will not withdraw that statement, Mr Deputy Bailiff.

I did say to the Assembly that I was going skiing in March. There are four people on this Island that carry out bowel cancer screening. Three of them are going skiing with me. There is one nurse on the Island that is capable of screening people for bowel cancer. She is on the same skiing holiday. Do you think I would have it wrong? The reality is, Mr Deputy Bailiff, that all of the clinicians involved in screening patients and the consultant pathologist employed by the Health and Social Services Department are unanimous that we should be screening 60-year-olds and 65-year-olds. The one person who does not agree is the Director of Public Health who is not an expert in the field. He is a generalist dealing with public health. *That* is the true situation.

1985 So, to tell me that I do not know what I am talking about and that I should withdraw, I am afraid I am not going to withdraw.

And he in fact has offered no explanation as to why the Director of Public Health is refusing permission for the staff to act in the way they wish to do so. They are the experts in the field. He continues to assert that the Health and Social Services Department Board, when I was a member, decided to change the programme from two cohorts to one. Now if the final business case really does say one cohort, then that business case has been changed between the point at which the Board agreed it and the point it got to T&R – and I think that that is something that should be investigated, because that is quite a serious thing.

1990 **The Deputy Bailiff:** Is that relevant to the motion, though, about what has happened in the last 12 months, Deputy Hadley?

1995 **Deputy Hadley:** Right, sir.

Now, his Chief Officer has provided me with the minutes of every meeting where I was present as a Board Member and where bowel cancer screening was discussed. There is no evidence whatsoever to back up his claims. And if he thinks there is evidence, I would like it produced, even if it is after this debate has decided the outcome.

2000 I should also say that it is I, and not Deputy Perrot who has breached the Code of Conduct for Members, because I told Deputy ‘P-rrot’ that I had evidence that Deputy Dorey was misleading us over the issue of who should be screened and quite rightly, Deputy ‘P-rrot’ asked me to show him the evidence so that he could be happy himself that I was correct.

2005 **Deputy Perrot:** Point of correction, sir.

The Deputy Bailiff: Point of correction, Deputy Perrot.

2010 **Deputy Perrot:** It is actually ‘Perrot’. (*Laughter*) I know we all regret the departure of Alderney Representative ‘Arditt-I’, but it is ‘Perrot’ and ‘Fallaise’. (*Laughter*)

The Deputy Bailiff: Deputy Hadley to resume.

2015 **Deputy Hadley:** I had the greatest respect for Alderney Representative Arditti and I am just trying to emulate the pronunciation that he had. (*Laughter*)

The Minister said that he would review the policies regarding the recruitment and retention of nursing staff. And I asked him what he had done about it. And I do not think he has given us a satisfactory answer.

He has admitted that he cannot bring a report to the States regarding his out of control budget.

2020 He has not explained why he reprimanded the lead Medical Specialist Group clinician for bowel cancer screening, when that doctor gave me the figures. He has offered no explanation of his desire to keep the figures secret.

Deputy Dorey: Point of correction.

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The Deputy Bailiff: Point of correction from Deputy Dorey.

Deputy Dorey: I cannot reprimand an employee of the MSG group.

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The Deputy Bailiff: Deputy Hadley to continue.

Deputy Hadley: I asked why he and Deputy Storey had not asked about the financial case for closing the surgical ward. And there has been no dispute about the figure I have given, that approximately £32,000 a month is lost by closing the ward as opposed to keeping it open. Now this to my mind is a very serious issue.

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Deputy Brehaut in an e-mail to all of us, originally told us – and we all had the e-mail we have all seen it – that of course we could have opened the wards earlier, but it would have cost a lot of money in agency staff. Then we hear that perhaps that was not quite right, perhaps they could not get the agency staff. Well, I thought they might say that. So I telephoned one of the largest recruitment agencies in the UK. It was a recruitment agency that has in the past supplied agency nurses to this Island, and asked them if they could supply us with nurses. And they said, ‘Well, of course it is difficult to say just like that, they would have to know what the requirements are and see what the availability was’, and I said, ‘Would it be a problem supplying the Channel Islands?’ They said, ‘No, we already supply the Isle of Man and Jersey.’ Had they supplied the Isle of Jersey in the last 12 months? They said, yes, in the last 12 months they had been supplying Jersey with all the agency staff they want – and incidentally the rates of pay that I was quoted for agency staff were much less than the rates of pay that the Department have been telling us.

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Now, Deputy James also dealt with the issue of nurse recruitment, and she is correct that some of the issues require the help of other Departments. Last week on the radio the nurses representative made the point that more senior nursing staff often had a family and needed better accommodation and longer licences.

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The point is, though, that the Department is not trying to get the co-operation of other Departments. At my initiative the staff of the Housing Department wrote to the staff at the Health and Social Services Department offering to meet them to discuss ways in which the Housing Department might help with housing licences to aid recruitment. There was no response. A reminder has been sent, and I checked this as recently as the last Board meeting, and still there has been no response. The salaries paid to nursing staff are far too low, and I can be fairly certain they have not dealt with that issue either.

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We both agree that accommodation for nurses is poor and that has not been dealt with. Paying retention bonuses of £3,000 after two years is an incentive to leave early. That has not been dealt with. It is perverse. Paying nurses to come to Guernsey, but not locals to come back to the Island: that is perverse and it creates a lot of ill feeling amongst nurses. There is no strategy to try and recruit and retain nurses.

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And he has admitted in his closing speech today that all they have is one half-time HR director. Well, that is not the way we are going to get our hospital fully staffed.

Deputy Dorey: A point of correction. I said –

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The Deputy Bailiff: Point of correction, Deputy Dorey.

Deputy Dorey: – the HR business partner is part-time. There are other staff working in HR as well.

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The Deputy Bailiff: Deputy Hadley to continue.

Deputy Hadley: Deputy Storey in his speech claims that I was unpleasant when I delivered a letter to his house. The reverse is the truth. I was expecting to post the letter through the letterbox, but Deputy Storey was at the door. I apologised for having to give it to him and enquired about his health. He said he was feeling better and hoped to return to the States in January. After that, there was an intervention by somebody else, but that is another issue. Until that point, we had a very amicable conversation.

2075

I said before that I am not trying to trash our health service. I am trying to bring management failings into the light and the front-line staff know that.

2080 If I had not been criticising the Department there would now be no suggestion that the bowel cancer screening programme should be extended. No-one would know that we were losing £32,000 a month by closing the ward. In the first six months of last year, according to Deputy Storey, 165 patients had their operations postponed or cancelled. They were ill and suffered longer, when it would have been cheaper to operate on them.

2085 In fact, I am tired of this continuing assertion that I am trying to rubbish the Island, and in fact when I was on the Board, Maverick Television asked the Department if they could use the Princess Elizabeth for a TV series. This was strongly opposed by the management who refused. Because they persisted it was then brought to the Board, and then we heard from the Director of Tourism that we should not do it, and they should be sent packing. I argued vehemently that the series should be made, and I was supported by Deputy Lowe. As a result of that, the producer came over to meet the Board. At that time Deputy Adam was rather
2090 on the fence about it, but listening to the force of the argument, the TV series was made –

Deputy Bebb: Point of order.

2095 **The Deputy Bailiff:** Point of order from Deputy Bebb.

Deputy Bebb: I am afraid that I fail to understand how the Island television programme is in any way relevant to this debate.

2100 **Deputy Hadley:** The relevance, Mr Deputy Bailiff, is that I am accused of continually trying to show the Island Hospital in a negative way. That series had such a massive impact, showing the Hospital in such a positive way, that the Housing Department got enquiries from people that wanted to come to the Island. I think hotels on the Island had record bookings. The Chairman of the Commerce Department –

2105 **The Deputy Bailiff:** Well, you have made that point now, Deputy Hadley. Can we try and respond to the points that have been made against the Motion of No Confidence? That is your opportunity to reply to them.

2110 **Deputy Hadley:** Deputy Fallaize talked about a Requête to increase the number of people being screened for bowel cancer. I am surprised at this strange suggestion, because he knows as well as I do that the Department would just say they are going to do it – as they probably will at a snail's pace. Instead of sticking to the policy that was developed when I was on the Board, they now want to review it and perhaps implement the original policy, which was to screen two cohorts at the end of the year.

2115 As I said there is no practical difficulty in screening two cohorts now. Of course, there is not. The two consultants most closely involved would not have been arguing to have the programme reinstated a year ago, if there were not the resources to deliver it. Their own non-clinical staff have no good reason for blocking it. And the spurious reason given now is that we need quality assurance. Well, there is a figure of £15,000 a year for the last three years and they have not spent it. To use that now as an excuse for delaying the service, to my mind, is quite wrong.

2120 Deputy Brehaut enjoyed himself at my expense. He started with maternity services, saying that I had put this in the public domain. Well, those that were here at the time will remember that the then Chief Officer sent me a highly critical e-mail copied to all Members of this Assembly. I responded by replying to all, as we often do. He did not like my reply so he reported me to the Code of Conduct Panel, which caused my concerns about a risk in the service to get into the public domain. Indeed, it was a nurse again who first made me aware of the worries.

2125 I am sure Members of this Assembly do not wish to debate again the issues of the A&E Department – suffice to say that my concerns were the concerns of nurses and other staff working in the PEH and my actions have probably been helpful.

2130 I do agree that I did make an error when talking about bowel cancer. I should have said that three or four people a month are diagnosed with bowel cancer, and not three or four people a month die. I did correct this, but as so often happens the correction is lost.

2135 However, some of the people who are diagnosed with bowel cancer have to have unpleasant operations and sometimes have to have colostomy appliances; some have to have unpleasant treatment with expensive drugs; some die. That is why it is important to find the people at risk now, not in 12 months' time after the HSSD prevaricate and pore over lengthy, costly, unnecessary reports.

Deputy Brehaut said that I have raised valid concerns but there were better ways of doing it. It is not true that I suddenly rushed to the *Press*. In the case of the A&E Department, I lobbied Deputy Dorey, the Chief Minister, the Chief Executive, the Deputy Chief Officer, long before releasing the report.

I am told that when I ask a question, it can be that five senior management people can be huddled round a table in a room trying to answer it. Well, I would ask Members to look at some of the questions that I have asked. Do you think it should take all the senior management to answer, to discuss the replies? If it does, then the problems with the management team are far worse than I thought.

When I said that the bowel cancer screening programme was underspent, it was because a quick look at the financial case showed that it must be underspent because of the nurses that were not employed and because of other costs that could not have been spent. They did not need hours of staff time trawling through different accounts to see that. If they had quickly looked at the accounts, they could have seen clearly that the money could not have been spent, forgot the past, moved forward to start screening the two age groups.

Again, the idea that I do not try and do things privately first is again evidenced by the fact that two weeks after the present Acting Chief Officer was appointed, I spent an hour with him discussing issues of concern. I also met Mr Graham Smith, with the Acting Chief Officer, and I know Deputy Adam was with me at one or both of these meetings, so that we wasted less officer time by seeing them together.

Again, I refute the suggestion that I pestered Members of this Assembly. I would like to know who they are. In fact I left answerphone messages with about a dozen Members of this Assembly, who did not return the answerphone messages. They chose not to. I never rang them a second time.

I think the only people that might say I pestered them are people that I ring up regularly anyway – like poor old Deputy Sherbourne – oh, poor *young* Deputy Sherbourne! (*Laughter*)

Deputy Brehaut said I was harming the health of the people on Guernsey by constantly criticising the health service, that I was demoralising the staff at the Princess Elizabeth. Well, it does worry me, especially as my wife works there, and a number of my friends do as well. This suggestion has been made before and that is why, as I said previously, I spent some hours last week talking to nurses that have left the PEH, and they emphasised to me that the biggest issue was lack of leadership and support for the nursing staff. They said I should continue with the criticisms that I have been making.

Deputy Le Pelley said that the services had not been provided that this Assembly had paid for, and I saw Deputy Conder shaking his head in disagreement. Well, I have to say, sir, you are wrong. Deputy Le Pelley is absolutely correct. The allocated money was for screening men and women as they became 60 and men and women as they became 65.

Deputy De Lisle is quite correct in saying that the recommendation is to screen people up to the age of 65. And I am amazed that Deputy Bebb tells us they have been advised that sigmoidoscopy is too risky in patients over 65.

I should tell him that my wife has carried out this procedure, although she ceased to, since she has come to Guernsey, and she was very surprised. And because she is not supposed to talk to me, (*Laughter*) I actually Googled the subject and I could find, this lunchtime, a number of references suggesting use of flexible sigmoidoscopy up to the age of 75, and I could not find any reference saying that it should not be done on people over 65.

Deputy Stewart mentioned IT systems, and Members might be interested that in the Board meeting on 16th February 2012, I was assured, in answer to my question that the IT systems would be in place for the bowel cancer screening programme by late 2012. It was something we were on the ball about. I do not know what happened after I left, because, of course, I left the Board at the election two months later.

Deputy Langlois spoke of collateral damage. I think that if you have had your operation cancelled or postponed for no good reason, you might think that was collateral damage.

He said that I was micro-managing the Department. Well, I am sorry, but if you have got a Department losing £35,000 a month, unnecessarily and damaging the health of people on the Island, that is not micro-managing.

When I asked why only half of the bowel cancer screening programme was being carried out, that is not micro-managing. I think it is more like macro-economics.

Deputy Bebb spoke of the experts that could not agree with bowel cancer screening. He talked about the risk of bowel cancer screening. I have to say that they have never perforated anybody's colon on this Island yet, and that the incidence of it happening is 1 in 20,000. The local professionals are dismayed that their professional advice – and when I talk about professionals, I mean the clinicians actually *doing* the work – they are dismayed that their advice is not being followed. And there is also a specialist nurse on Island who is capable of undertaking sigmoidoscopies.

I am glad that Deputy Bebb is aware of the housing problem and the rates of pay. I just wish he had taken some action. I am not giving way, sir, unless it is a point of correction.

I agree with Deputy Le Tocq that we need a culture change. I just disagree about where the culture change should be.

Deputy Soulsby is correct, much of the underspend was because there were figures in the budget that did not need to be spent because they could be absorbed into the existing workload and that is why it was so

obvious that the money had not been spent: such as the £30,000 for pathology, the one morning clinic of 10 patients a week, which would quite clearly be a tiny fraction of the workload of that Department.

2200 I thank Deputy St Pier for correcting Deputy Fallaize on how the States accounts operate. It is always nice to see Deputy Fallaize corrected. *(Laughter)*

I agree with Deputy Paint. I felt let down having fronted a Requête to have the wards re-opened, only to find that there were closed for 10 months and are still not operating to full capacity.

2205 I thank again Deputy Advocate Perrot for his spirited defence of my character.
If anyone thinks that I am criticising front-line staff then please look carefully at the Vote of No Confidence again. It is that this Assembly has been misled, poor leadership, nurse recruitment, postponement and cancellation of operations, the budget being out of control. Nowhere have I criticised the Hospital's front-line staff. Yet again Deputy Brehaut follows the well-trodden path of shooting the messenger.

2210 We have a hospital management and now a Board who spent all of their efforts in explaining why they could not do something and I would like to see a can-do management rather a could-not-do one. I want a Hospital where staff are not prevented from speaking out on issues of concern.

2215 Many people have said that the Board should be kept in place so there can be a clearer period of continuity and stability. Well if you want the wards continually closed, and constantly striving to get agency staff from Portugal and the Philippines, then that is your answer. But, if you want to change, I ask you to support the Motion of No Confidence.

The Deputy Bailiff: Deputy David Jones.

2220 **Deputy David Jones:** Thank you very much.

On a point of information. Because nursing staff live in HSSD accommodation, they do not require licences.

2225 **The Deputy Bailiff:** Members of the States, Proposition 1 on page 366 of the Billet is whether or not the States of Deliberation have no confidence in the Minister and Members of the Health and Social Services Department. We will move to a recorded vote.

There was a recorded vote.

2230 **The Deputy Bailiff:** Well, Members of the States, we will wait for the formal result of that vote, but I think it was lost, and therefore, without waiting for the formal count, I will declare it lost, so that we can now move on to the next item of business.

Deputy Greffier, can we call the next item of business, while you count up the votes please, just so that we can keep moving?

Billet d'État I

HEALTH AND SOCIAL SERVICES DEPARTMENT

2235

III. Health and Social Services Department – Election of a Member – Deputy Brouard elected

Article III.

The States are asked:

To elect a sitting Member of the States as a member of the Health and Social Services Department to complete the unexpired portion of the term of office of Deputy S. A. James, M.B.E., who has resigned as a member of that Department, namely to serve until May 2016, in accordance with Rule 7 of the Rules relating to the Constitution and Operation of States Departments and Committees.

The Senior Deputy Greffier: Billet d'État I, Article III, Health and Social Services Department, new Member.

The Deputy Bailiff: Deputy Dorey.

2240 **Deputy Dorey:** I wish to propose Deputy Al Brouard.

The Deputy Bailiff: Is that nomination seconded?

Deputy Storey: I second that nomination, sir.

2245

The Deputy Bailiff: Thank you Deputy Storey. Seconded by Deputy Storey.
Are there any other nominations for a seat on this Department?

Deputy Perrot: Yes, I propose Deputy Hadley.

2250

The Deputy Bailiff: Is that nomination seconded?

Deputy Adam: I second Deputy Hadley.

2255

The Deputy Bailiff: Thank you very much Deputy Adam.
So it is proposed by Deputy Perrot. Are there any further nominations?
Then I will invite Deputy Dorey to speak to the nomination of Deputy Brouard.

2260 **Deputy Dorey:** It gives me great pleasure to nominate Deputy Al Brouard for this position as a Member of HSSD.

Deputy Brouard has the unanimous support of the Members of the current HSSD Board. He brings skills and qualities which we all recognise the Department needs, and we believe that he will be an asset to the Board.

2265 Deputy Brouard is an experienced politician who is currently the Deputy Minister of Commerce and Employment. When I was Minister at Social Security Department, he was Deputy Minister for four years, a role he filled admirably. However, a politician of his talents and experience is clearly underutilised as a member of just one Department.

Deputy Brouard has the capacity and the skills to be a committed and hard-working member of HSSD too, and I am grateful that he has agreed to stand for this role.

2270 Deputy Brouard has been a States Member for the past 10 years, serving on Public Services, on Social Security and most recently on Commerce and Employment. In the 2004 term he was a member of the Legislation Committee. He has served in three successive Assemblies and his commitment to public service is recognised and appreciated by his parishioners. He topped the poll in his first re-election in 2008 and came second in the West in 2012, again with a sizeable vote.

2275 As I know from my own experience, Deputy's Brouard's involvement with the oversight of the MSG contract and the many other areas where SSD and HSSD work together will be invaluable. This will be a big help for him at HSSD and it will give him insight into the overlapping responsibilities of different Departments and the ways we can work best together to achieve good outcomes for the people of Guernsey.

2280 At Social Security, Deputy Brouard also had experience of working with large budgets and whole areas of expenditure which are driven by people's unpredictable needs. Again, this will be an asset at HSSD.

Deputy Brouard also brings skills from his work outside of the political sphere in a career in banking. He has had diverse management roles from responsibility for multi-million-pound deals to branch management. His financial and managerial knowledge and understanding will be an obvious asset at HSSD, which is the States' largest general revenue spending Department and its single biggest employer.

2285 Deputy Brouard's personal qualities are well-suited to the demands of the role of a member of HSSD. He is a very pleasant person, good sense of humour, who works well as part of a team. He is hard working and full of common sense. He has a personal connection with the Island's health services as many of us do through his wife's part-time administration job at HSSD. He is respected and trustworthy and a man of integrity.

2290 As a politician, he offers strong scrutiny and challenge and he will bring positive and creative ideas to the table. It is very important that a new Board Member can work constructively with the Board and the management team. Some of you might think we need a cat among the pigeons – someone who is not afraid of upsetting the applecart. I can assure you that we do not. We need a strong team player, albeit one who can offer strong scrutiny challenge and who can work with us in working towards my Department's many challenges.

2295

Every member of the Board recognises that Deputy Brouard will be an asset to HSSD, and every remaining member of the Board believes that we can work with Deputy Brouard as part of an effective team, to ensure that we continue to deliver good health and social care services to the people of Guernsey in the face of ongoing challenges.

2300 Deputy Brouard has the personal qualities and political experience to recommend him for this important and demanding role, and he has the support and confidence of all those who work with him. There cannot be a stronger endorsement than this.
Thank you.

2305 **The Deputy Bailiff:** I will now invite Deputy Perrot to speak on the nomination of Deputy Hadley.

Deputy Perrot: Anything I say, sir, about Deputy Hadley is going to be entirely superfluous. Everybody well knows within this Chamber the interest which Deputy Hadley has in relation to the HSSD. It will be of considerable interest if the States decide not to vote Deputy Hadley onto the Board given all that has been said in this Chamber over the last two days.

2310 This is an opportunity for the HSSD to take on board somebody who is knowledgeable and yet, if they give him a chance, would be entirely constructively critical. I give him that chance. I do not imagine for a moment that my proposal will be accepted, but I am giving the States a chance. *(Laughter)* No, I do not, and I say that because I am being realistic, because I have been listening to the unwarranted criticism, led by the Minister of the HSSD, over the last two days. So, I stand here with no confidence at all, but I do think that he would be an entirely appropriate person to serve on that Board – notwithstanding the laughter of Deputy Fallaize.

2315 **The Deputy Bailiff:** Well, Members if you can fill out your voting slips. *(Interjection)*
2320 All right, well whilst the voting slips are being handed out – *(Interjections)*

**Procedural –
Result of vote on Motion of No Confidence**

Not carried – Pour 10, Contre 34, Abstained 1, Not Present 2

POUR	CONTRE	ABSTAINED	NOT PRESENT
Deputy Lester Queripel	Deputy Harwood	Deputy Gollop	Deputy St Pier
Deputy Stewart	Deputy Kuttelwascher		Deputy O'Hara
Deputy Le Pelley	Deputy Brehaut		
Deputy Lowe	Deputy Domaille		
Deputy Paint	Deputy Langlois		
Deputy Adam	Deputy Robert Jones		
Deputy Perrot	Deputy Le Clerc		
Deputy Wilkie	Deputy Sherbourne		
Deputy De Lisle	Deputy Conder		
Deputy Hadley	Deputy Storey		
	Deputy Bebb		
	Deputy Gillson		
	Deputy Ogier		
	Deputy Trott		
	Deputy Fallaize		
	Deputy David Jones		
	Deputy Laurie Queripel		
	Deputy Le Lièvre		
	Deputy Spruce		
	Deputy Collins		
	Deputy Duquemin		
	Deputy Green		
	Deputy Dorey		
	Deputy Le Tocq		
	Deputy James		
	Deputy Brouard		
	Deputy Burford		
	Deputy Inglis		
	Deputy Soulsby		
	Deputy Sillars		
	Deputy Luxon		
	Deputy Quin		
	Alderney Rep. Jean		
	Alderney Rep. Harvey		

2325 **The Deputy Bailiff:** Members of the States, quiet please.

Can I just announce the vote after the *appel nominal* on the Motion of No Confidence in the Health and Social Services Department? There voted in favour, 10; there voted against, 34. There was one abstention. I therefore declare the Proposition lost.

Procedural

The Deputy Bailiff: Can I just check that everyone has returned their voting slips?

2330 Members of the States, unless there is a strong wish not to do so, what I propose we do while those votes are being counted is to take the next Article, which will be Article IV, Deputy Greffier.

POLICY COUNCIL

IV. Guernsey Financial Services Commission – Election of Chairman and appointment of one ordinary member – Propositions carried

Article IV.

The States are asked to decide:

Whether, after consideration of the Report dated 25th November, 2013, of the Policy Council, they are of the opinion:

1. To elect Mr Alex Ferguson Rodger as an ordinary member of the Guernsey Financial Services Commission for three years with effect from 2nd February 2014.

2. To elect Dr Cees Antonius Carolus Maria Schrauwers as Chairman of the Guernsey Financial Services Commission for one year with effect from 2nd February 2014.

The Senior Deputy Greffier: Yes indeed, sir.

Billet d'État I, Article IV, Guernsey Financial Services Commission, Chairman and one ordinary member.

2335

The Deputy Bailiff: Deputy Le Tocq, the Deputy Chief Minister to speak to this matter.

The Deputy Chief Minister (Deputy Le Tocq): Sir, on behalf of the Policy Council I am pleased to be presenting this matter before you today.

2340

This Report recommends the re-election of Mr Alex Rodger as an ordinary member of the Guernsey Financial Services Commission for three years with effect from 2nd February 2014 and the re-election of Dr Cees Schrauwers as Chairman of the Commission for one year with effect from 2nd February 2014.

2345

The Policy Council continues to work very closely with the Commission and welcomes the changes and improvements the Commission continues to make under the leadership of the Chairman, including a greater emphasis being placed on a proportionate and balanced approach to the Commission's regulatory and supervisory responsibilities.

The Policy Council is encouraged by this different approach, which was outlined by the Chairman and Director General at the Commission's Annual Industry Presentation.

2350

The Policy Council is also encouraged by and very much welcomes other initiatives announced by the Commission last summer, aimed at controlling its cost base.

It is also aware that the Commission is working more closely with the Commerce and Employment Department as evidenced by the Commission's constructive contributions it has made to various consultation papers issued by the Department.

2355

The Policy Council is confident that Mr Rodger and Dr Schrauwers are the right people to consolidate and continue this new approach and recommends their re-election to the Assembly.

The Deputy Bailiff: Deputy Trott.

2360

Deputy Trott: Sir, I rise not to question the integrity of either of these nominations. They appear eminently sensible but rather to ask on a matter of governance, if the Chief Minister under Item IX, why Deputy Harwood felt that given his previous role in the Commission he could not participate in the Policy Council's discussions relating to this Report? I have to say I cannot for the life of me think why, sir. I

would have thought there was no-one better to advise the Policy Council on the appropriateness of these candidates.

2365 But that aside, why if he did not feel willing to participate in discussions and with the Deputy Chief Minister bringing this Proposition before us, is the Chief Minister's name accredited at the bottom of the page? He is either conflicted in his own mind or not. It appears to me, sir, to be a fundamental breach of good governance to say one thing and appear on paper to do another.

2370 **The Deputy Bailiff:** Deputy Lester Queripel.

Deputy Lester Queripel: Thank you, sir.

Sir, you may recall, you and I met at the bookstall at the Viaer Marchi last year. *(Laughter)*

2375 **The Deputy Bailiff:** Yes I do, Deputy Queripel! *(Interjections)*

Deputy Lester Queripel: Well, I recall it, sir.

The Deputy Bailiff: Well, so do I.

2380

Deputy Trott: It was really the beer tent, wasn't it?

Deputy Lester Queripel: At that time, sir, I had a book in my hand that I was about to purchase for £2 – this book, *Great Speeches of our Time*. *(Laughter)*

2385

Deputy Brehaut: Might I suggest you read it!

Deputy Lester Queripel: Bet you are not in it! Whereupon, sir, you offered the stall holder £4 to not sell it to me. *(Laughter)* But the good news is, sir, I offered £6 and I purchased the book. *(Laughter)*

2390

And since that time, I have analysed every speech in this book, over and over again. I have learnt that there is a time for detail and there is a time to be brief. *(Laughter)* It might not be apparent, sir, but I have learnt that. And seeing as I rise merely to seek an assurance from the Minister, this speech falls into the latter category.

2395

Bearing in mind that the Commission has recently appointed a special adviser who has specific instructions to, and I quote: 'improve the Commission's dialogue with its key stakeholders', and bearing in mind that the Commission has stated in the past that they would like to see more engagement coming from the States, can the Minister give me an assurance, please, that if the levels of communication from the Policy Council and from the States do need to be improved, that they will do their utmost to ensure that those levels of communication are improved, please, sir.

2400

Thank you.

The Deputy Bailiff: Deputy Chief Minister, I do not see anyone else rising, so you get the opportunity to respond to those two points.

2405

The Deputy Chief Minister: I will do so, sir, and remembering that this is actually an election (**The Deputy Bailiff:** Yes.) itself. Just very briefly, Deputy Trott I think makes a good point but it was largely because the likes of himself and others perhaps felt it was inappropriate that the Chief Minister deal with matters such as this that he has recused himself. At the time I think at which the matter came before the Policy Council, it would have perhaps made sense to have made that clear in the letter and I will take that up, certainly in the level of good governance he is absolutely right.

2410

With regards to the question that Deputy Lester Queripel raised, it is true that following a tender process the Policy Council appointed an independent advisor, Mr Ian Tower to carry out a review of the funding mechanism of the GFSC and Mr Tower visited Guernsey and met with representatives of GIBA, Guernsey Finance and the Commission and political representatives to inform his report.

2415

This is all part of an ongoing process, I think, which comes as a result of this Assembly having a robust debate last year regarding the manner in which the Commission operated. That is still ongoing and that is the reason why we believe, and I will give an assurance that whilst this Policy Council is involved in this, we believe that there is a need for change and there is a new direction that is being taken and is being seen through.

2420

So we do anticipate that communication both internally and relationship with the States, as well as with industry, will improve as we move forward. As a result of that, I would encourage the Assembly to vote for these two nominations.

2425 **The Deputy Bailiff:** Well, Members of the States, the Propositions are on page 12 in the Billet. The first Proposition is to elect Mr Rodger as an ordinary member for three years with effect from 2nd February this year and the second is to elect Dr Schrauwers as the Chairman for one year. Unless there is any suggestion that we take them separately I was going to put both Propositions to you at the same time. Those in favour; those against.

2430 *Members voted Pour.*

The Deputy Bailiff: I declare both of those Propositions carried, and Mr Rodger elected as a member and Dr Schrauwers as the Chairman.

Billet d'État IV

HOUSING DEPARTMENT

II. Housing Department – Election of a Member – Deputy Sherbourne elected

Article II.

The States are asked:

To elect a sitting Member of the States as a member of the Housing Department to complete the unexpired portion of the term of office of Deputy M. J. Storey, who has resigned as a member of that Department, namely to serve until May 2016, in accordance with Rule 7 of the Rules relating to the Constitution and Operation of States Departments and Committees.

2435 **The Senior Deputy Greffier:** Billet d'État IV, Article II, Housing Department, new Member.

The Deputy Bailiff: Deputy David Jones as Minister of the Department.

2440 **Deputy David Jones:** Thank you, Mr Deputy Bailiff.
I have pleasure in putting forward the name of Deputy Peter Sherbourne for the vacancy.
Thank you.

Deputy Hadley: I rise to second that.

2445 **The Deputy Bailiff:** Thank you, Deputy Hadley.
Are there any other nominations? In that case, I put to you the candidature of Deputy Sherbourne as a member of the Housing Department. Those in favour; those against.

Members voted Pour.

2450 **The Deputy Bailiff:** I declare Deputy Sherbourne duly elected.

Procedural – Result of vote on Billet d'État I, Article III announced

The Deputy Bailiff: Members of the States, before we take the next item of business, I can declare the result of the election for a Member of the Health and Social Services Department.

2455 There were 24 votes in favour of Deputy Brouard and 21 votes in favour of Deputy Hadley and two blank papers.

I therefore declare Deputy Brouard elected as a Member of the Health and Social Services Department.
Deputy Greffier.

Billet d'État I

POLICY COUNCIL

V. Establishing the Constitutional Investigation Committee – Amended Propositions carried

Article V.

The States are asked to decide:

Whether, after consideration of the Report dated 2nd December, 2013, of the Policy Council, they are of the opinion:

1. To note that the Policy Council will report to the States with a request for approval for funding the expenditure that will be incurred by the Constitutional Investigation Committee in discharging its role in due course.

2. To elect four sitting Members of the States as members of the Constitutional Investigation Committee.

3. To elect two members of the Constitutional Investigation Committee who are independent of the States.

4. To resolve that the members of the Constitutional Investigation Committee who are not sitting members of the States will not be remunerated for attendance at meetings.

2460 **The Senior Deputy Greffier:** Billet d'État I, Article V, Policy Council, establishing the Constitutional Investigation Committee.

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

The Chief Minister (Deputy Harwood): Thank you, sir.

2465 The Propositions before the Assembly today follow on from the debate that took place in this Assembly in September last year, when the States Members will remember we agreed to set up what has been called a Constitutional Investigation Committee as a Special Committee, the membership of which would be myself, *ex officio* as Chief Minister, four sitting Members of the States elected by the States, one of whom the Committee shall elect as Vice-Chairman and two non-voting persons who are not sitting Members of
2470 the States elected by the States, and also to direct the Policy Council to report to the States with a request for approval for funding the expenses that will be incurred by the Constitutional Investigation Committee in discharging its roles.

Sir, the Report before you covers all those points. Firstly, in relation to the last item which is the point about funding, for the time being that the Policy Council at the moment... It says it:

'will report to the States with a request for approval for funding the expenditure that will be incurred by the Constitutional Investigation Committee in discharging its role in due course.'

2475 At the present time, we believe that the functioning of the Committee can be met from existing Policy Council resources. If and to the extent the new Committee wishes to undertake extensive research, then we will almost certainly need additional funding, in which case the Policy Council will come back to this Assembly with a request for funding in those circumstances.

2480 For the time being, it is understood and accepted that there is no additional funding required for immediate purposes.

The second aspect is the proposal to elect four sitting Members of the States of Guernsey as members of that Committee. I invited all States Members to put forward their names as expressions of interest in serving on the Committee. A number did. I am very grateful for those who did. The matter has been considered and I have four names who I would like to propose to be elected as sitting members of that
2485 Committee.

The Deputy Bailiff: Deputy Harwood, can we take the election separately, (**Deputy Harwood:** Indeed, sir.) and whatever debate there might be in Propositions 1 and 4 and then move to the elections.

2490 **The Chief Minister:** I will move on then to Proposition 4 which is that:

'...members of the Constitutional Investigation Committee who are not sitting members of the States will not be remunerated for attendance at meetings.'

I do not think there is much I can add, sir. There is no immediate request for funding and I am sure Deputy Lowe particularly will be pleased to note there is no proposal to remunerate the non-sitting members of the States on this Committee.

2495 **The Deputy Bailiff:** Deputy David Jones wishes to place an amendment, I understand it.

Amendment:

To insert a new Proposition 5 as follows:

'5. To direct that, as the mandate of the Constitutional Investigation Committee, in the context of reviewing Guernsey's relationships with government in the United Kingdom, includes initially, but not exclusively, considering the method of extension of Acts of UK Parliament to Guernsey, it would be appropriate in this context to consider, in particular, the case of legislation which extends television licensing arrangements to the Island and therefore when the Committee reports back with its recommendations to the States, these shall include setting out the feasibility, advantages and disadvantages of repealing such legislation.'

2500 **Deputy David Jones:** Sir, it is a very simple amendment. It is that as this newly formed Committee is going to be looking at constitutional issues, I believe that it should look at the issue of the transfer of legislation from the UK Government to the Bailiwicks of Guernsey and Jersey.

I did have a long speech about it relating to issues like the transfer of the Broadcasting Act. I think that is superfluous. It would be for the Committee to decide on the level of depth it wants to go into that. I would ask that you support this small amendment from myself and Deputy Perrot just on that narrow point.

Thank you.

2505

The Deputy Bailiff: Deputy Perrot, do you formally second that amendment?

Deputy Perrot: I do, sir.

2510

The Deputy Bailiff: Is there any debate on the amendment? I do not see anyone rising.

The Chief Minister, or Deputy Harwood as the Chairman of the Committee *ex officio*, do you wish to speak on the amendment on behalf of the Committee?

2515

The Chief Minister: Well, merely to note, sir, that I think the terms of the amendment actually fall within the mandate of the Committee as approved by the States in September last year. It is identifying a particular item which it suggests the Committee should explore. I have no objection to the amendment, sir, and therefore I am perfectly happy to recommend that Members of the Assembly accept the amendment.

2520

The Deputy Bailiff: Deputy David Jones, do you wish to speak further in – ?

Deputy David Jones: I have nothing further to add to what I have already said, sir.

The Deputy Bailiff: Thank you very much.

2525

Members of the States we turn to the amendment proposed by Deputy David Jones, seconded by Deputy Perrot to insert a new Proposition 5. Those in favour; those against.

Members voted Pour.

2530

The Deputy Bailiff: I declare that carried.

I do not see anyone rising to speak in debate on Proposition 1, 4 or now inserted 5. Deputy Harwood, do you have anything further to say?

The Chief Minister: Nothing further to add to what I have already said.

2535

The Deputy Bailiff: Members of the States, I suggest that we take votes on Propositions 1, 4 and inserted Proposition 5. Those in favour; those against.

Members voted Pour.

2540

The Deputy Bailiff: I declare Propositions 1, 4 and 5 carried.

Now we will move to the election of four sitting Members of the States as members of the Constitutional Investigation Committee and I invite the Chairman of the Committee, Deputy Harwood, to say if he has any nominations.

2545 **The Chief Minister:** Thank you, sir.

I do have four nominations to put before this Assembly. The names are Deputies Perrot, Trott, Soulsby and Deputy Rob Jones.

2550 **The Deputy Bailiff:** Are those four nominations seconded?

Deputy Le Tocq: Yes, I will second those, sir.

The Deputy Bailiff: Seconded by Deputy Le Tocq. Are there any further nominations to this Committee?

2555 In that case, I will put the four nominations that have been made. That is Deputy Perrot, Deputy Trott, Deputy Soulsby and Deputy Robert Jones. All those in favour; those against.

Members voted Pour.

2560 **The Deputy Bailiff:** I declare those four Deputies elected to the Committee.

The next Proposition is to elect two members of the Constitutional Investigation Committee who are independent of the States. Chairman of the Committee, Deputy Harwood.

The Chief Minister: Thank you, sir.

2565 The two names that I wish to propose are as set out on page 14 of the Billet: Dr Elina Steinerte LLB, LL.M, PhD. There is a full CV description of her. I would also add that she is resident in Guernsey. She is also married to a Guernsey advocate, but please do not hold that against her.

2570 And also the name of Colonel Richard Graham LVO, MBE, who will be well known to Members of this Assembly, former Secretary and Aide-de-Camp to the Lieutenant Governor in Guernsey between 1998 and 2012.

Again, sir, we did advertise both on-Island and off-Island for expressions of interest. There were a number of people who did express an interest. The process: I did interview Dr Elina Steinerte and I consider she would make a very considerable contribution, particularly given her knowledge and experience of international treaties, treaty negotiations and treaty matters.

2575 Colonel Graham has a very good working knowledge of the constitutional relationship between the Bailiwick of Guernsey and the Crown, and also has been with the Privy Council in respect of Guernsey. I believe that both these candidates will make a very useful contribution to the deliberations of the Committee and I would recommend their election to the Members of this Assembly.

Thank you, sir.

2580 **The Deputy Bailiff:** Are those two nominations seconded?

Deputy David Jones: I would be happy to second them.

2585 **The Deputy Bailiff:** Thank you, Deputy David Jones seconding. Are there any other nominations?

In that case I will put the two nominations to you, Members of the States, that is Dr Elena Steinerte and Colonel Richard Graham. Those in favour; those against.

Members voted Pour.

2590 **The Deputy Bailiff:** I declare both of them elected as non-States Members on the Committee.

TREASURY AND RESOURCES DEPARTMENT

VI. Double Taxation Arrangements with the Republic of Poland – Proposition carried

Article VI.

The States are asked to decide:

Whether, after consideration of the Report dated 23rd October, 2013, of the Treasury and Resources Department, they are of the opinion to ratify the agreement made with the Republic of Poland, as appended to that Report, as required by section 172(1) of the Income Tax (Guernsey) Law, 1975, as amended.

The Senior Deputy Greffier: Article VI, Treasury and Resources Department, Double Taxation Arrangements with the Republic of Poland.

2595 **The Deputy Bailiff:** Deputy Kuttelwascher, will it be you speaking to these Propositions?

Deputy Kuttelwascher: Yes, sir, thank you.

2600 On 8th October last, the States of Guernsey and the Republic of Poland entered an agreement to instigate some double taxation provisions. These have to be ratified by this Assembly according to our Income Tax Law, and I ask the Members to support the Proposition on page 33, which will do just that. Thank you, sir.

2605 **The Deputy Bailiff:** As no-one is rising, there is no need for the Deputy Minister to reply to nothing. So on page 33, there is a single Proposition. Those in favour; those against.

Members voted Pour.

The Deputy Bailiff: I declare it duly carried.

PUBLIC SERVICES DEPARTMENT

VII. Waste Water Charges – Propositions carried

Article VII.

The States are asked to decide:

Whether, after consideration of the Report dated 11th November, 2013, of the Public Services Department, they are of the opinion to agree:

1. That any property with a private water supply (i.e. water supplied by any other source other than Guernsey Water) whether or not it is also provided with water supplied by Guernsey Water, as a matter of principle be liable to pay the standing charges and the variable charge, under the Wastewater Charges (Guernsey) Law, 2009, if that private water supply is so connected as to enter the public sewerage network, either directly through a drain or indirectly through a cesspit.

2. That standing charges and a variable charge be imposed on non-domestic properties with a private water supply, even if it is not supplied with water by Guernsey Water.

3. That the variable charge imposed on non-domestic properties with both a private water supply and a metered supply by Guernsey Water no longer be calculated solely on the volume of metered water supplied by Guernsey Water.

4. That a default flat quarterly charge be imposed on the properties referred to in paragraph 2 or 3 of these Propositions, with the rate set at such a level as to provide a strong incentive to the person paying the charge to request Guernsey Water to install a meter to measure the volume of the private water supply.

5. That following installation of such a meter, the variable charge imposed on the property be calculated in the same manner as for properties supplied with water solely through a metered supply by Guernsey Water. That is, a rate be applied to the aggregate volume of water supplied to the property from all sources.

6. That a non-domestic property with a metered private water supply be eligible for an abatement of the new variable charge based on the amount of water estimated to be discharged into the public sewerage network, in the same manner as a nondomestic property supplied with water solely through a metered supply by Guernsey Water.

7. That a grace period be provided for, as described in paragraph 16 of that report, before the new charges are brought into force.

8. To direct the preparation of such legislation as may be necessary to give effect to their above decisions.

2610 **The Senior Deputy Greffier:** Article VII, Public Services Department, Waste Water Charges.

The Deputy Bailiff: Deputy Luxon, the Minister of the Public Services Department to open the debate.

Deputy Luxon: Thank you, Deputy Bailiff.

2615 Sir, on pages 34 to 42 of our Billet, the Public Services Department sets out the proposal to amend the Waste Water Charge (Guernsey) Law, 2009 to ensure that commercial customers that currently enjoy a private water supply – i.e. water not supplied by Guernsey Water, such as through a borehole – pay an appropriate charge for disposing of waste water through the public sewerage network.

2620 Sir, it cost over £4.2 million to deal with the Island's waste water in 2012. This is operational expenditure and includes, amongst many other things, sewer and pumping station maintenance, sewer cleaning, electricity, and the electricity is a very significant cost. Taking that as an example, Guernsey Water uses electricity to pump water to Island properties for use, but also then to pump any used waste water that has entered the sewer system from Island properties across the Island to Belle Greve and out through the long sea outfall. This waste water may have originally entered properties from a public, 2625 Guernsey Water, or indeed private source. Therefore those properties with incoming private water supplies which expel water into the public sewer system should fairly contribute towards the cost of the waste water that enters the sewerage network, along with everybody else.

This proposed amendment to the waste water charges simply takes into account commercial – clearly, non-domestic customers – with private water supplies and is fair and equitable, putting these customers on a par with those who have water supplied by Guernsey Water and whose waste water does go down the drain. 2630

The States report proposes a £2,000 default waste water charge for these non-domestic properties, which are supplied in part or in full by a private supply.

The Department has no wish to levy what might be regarded as a high charge for a private supply. This default charge is merely a vehicle to robustly ensure that those commercial customers with such a private 2635 water supply do advise Guernsey Water of the situation in a timely manner. This in turn will allow a meter to be installed at the earliest opportunity to measure the incoming private supply and enable the appropriate charge to be levied.

A publicity campaign and three months' grace to install a meter will follow on, assuming that these proposals are approved.

2640 All the safeguards offered by the original Law remain in place. For example, if a commercial customer having a private water supply can demonstrate that less than 85% of the incoming water goes on to enter into the sewage network – typically a grower – an abatement can be applied for in the same way as is available to current commercial customers supplied with water by Guernsey Water.

2645 Sir, this is meant simply to be a fair extension of the Laws that were put in place back in 2009 and I would ask Members to support it.

Thank you.

The Deputy Bailiff: Once again, Deputy De Lisle.

2650 **Deputy De Lisle:** Sir, I did have some comments on this during the meetings of the Douzaine in the Forest and in St Pierre du Bois, where people are actually deriving water for their vineries from private sources and where, however, they are not actually discharging... Although they have got all the facilities in terms of toilets and sewer pits on the property, they are not discharging water into the sewage system. I just wonder what the situation is with respect to people that have facilities on the vineries but are not actually 2655 using them, yet they are pumping water for the vinery, but not using the sewer system, whether they are implicated by this.

Thank you, sir.

2660 **The Deputy Bailiff:** The Minister of the Public Services Department, Deputy Luxon, to reply to that point if you can.

2665 **Deputy Luxon:** Thank you Deputy Bailiff. In answer to Deputy De Lisle's question, although the vinery operator that he refers to may not have facilities that drain direct into the sewage network on site, of course if those cesspits are being picked up they are then emptied into the sewage system. So in that case they would be captured in that sense.

Having said that, sir, Guernsey Water management team are quite convinced that the vast majority of growers have already been captured within this arrangement. The commercial customers that we are thinking of are perhaps more like garages and things like that. So yes, they would be captured in that sense.

Thank you, sir.

2670

The Deputy Bailiff: Members of the States, on page 42 in the Billet, there are eight Propositions. Unless there is a request to take any of them separately, I was going to put them all to you together. So those in favour; those against.

2675 *Members voted Pour.*

The Deputy Bailiff: I declare the eight Propositions duly carried.

HOME DEPARTMENT

VIII. Introduction of a High Risk Drink Driver Scheme in Guernsey – Propositions carried

Article VIII.

The States are asked to decide:

Whether, after consideration of the Report dated 11th November, 2013, of the Home Department, they are of the opinion:

- 1. To approve the introduction of a High Risk Drink Driver Scheme in Guernsey.*
- 2. To direct the preparation of such legislation as may be necessary to give effect to their above decision.*

2680 **The Senior Deputy Greffier:** Article VIII, Home Department, introduction of a High Risk Drink Driver Scheme in Guernsey.

The Deputy Bailiff: Minister of the Department, Deputy Le Tocq, to open the debate.

Deputy Le Tocq: Thank you, sir.

2685 This scheme is the Home Department's response to the serious concerns raised by the Independent Medical Advisor to the Environment Department, who highlighted that, and I quote:

'... little consideration is presently given to the possibility that an individual may have an ongoing alcohol problem and therefore be at higher risk of re-offending.'

The scheme is intended to deal with drivers whose apparent dependency on alcohol presents a risk to road safety, and requires them to undergo a medical assessment in order to satisfy that they are fit to drive.

2690 The Home Department and Environment Department strongly believe that the introduction of this scheme will deliver a number of benefits. In particular, it will reduce the number of high risk drink drivers on the roads in Guernsey by enabling the Driver and Vehicle Licensing Section to assess those who have been identified as high risk before the re-issue of a driving licence.

2695 Secondly, it will provide another way when used in conjunction with other tools available to protect members of the community from drink drivers, and thirdly to underline the seriousness with which drink driving is treated.

Both Departments feel that these benefits will be of significant value to the local community.

The Department proposes that the cost of all medical tests and examinations, as well as the fee for the restoration of the driving licence, will be covered by the applicant. If the required fees are not paid, a driving licence will not be issued.

2700 Guernsey's drink driving legislation is naturally very similar to that of the UK. Convicted drink drivers are obliged, however, to retake their driving tests following a period of disqualification and the proposals within the Report would be in addition to the current sentencing guidelines.

If we are to be fully committed to protecting the local community and preventing drink driving, then this Department strongly recommends the implementation of this scheme.

2705 Thank you.

The Deputy Bailiff: Deputy David Jones, to be followed by Deputy Green.

Deputy David Jones: Thank you, Mr Deputy Bailiff.

2710 I am actually opposing this, and I am opposing it on a very simple principle. That the only people who should be allowed to remove the licence from a person are the courts – either a magistrate or a judge.

We seem to me, in my opinion, to be giving more and more powers to officials in Government offices to take punitive action against our citizens without the due process of law, and it is becoming more and more.

2715 We have got it in Environmental Health and all kinds of other officials now, who have real draconian powers, in my view, that are rightly and properly the business of our judicial system.

As I say, I am opposing on the grounds that it is only the courts that should ever have the right to remove the right of a person to drive a motor vehicle from that person, not an official who is unelected and unaccountable, in an office somewhere, who decides, 'Well, just on balance, I do not think we are going to re-issue that licence.' That is the business of our judicial system, not of Government officials.

2720 Thank you.

The Deputy Bailiff: Deputy Green.

2725 **Deputy Green:** Mr Deputy Bailiff, Members, I take Deputy Jones's point on that, but the reality, no doubt, when the legislation returns, will be that if the statutory official makes that kind of determination presumably there will be a right of appeal to a court.

But, anyway, I actually strongly support this policy letter. I consider this scheme is long overdue in Guernsey. Drink driving by those who have a serious alcohol dependency is not something that should be tolerated to any degree by our society. It is one of the worst forms of anti-social behaviour on our roads, and it is frankly remarkable that at present very little consideration is given to the fact that a driver may have an ongoing problem with alcohol, when they apply to get their licence re-issued.

2730 These drivers – and you will see from the Billet that there are quite a few of them, as the table on page 49 Appendix 1 shows – quite a few of these drivers are high risk and they are a risk to innocent road users when they are behind the wheel. If they are caught and they have their licence disqualified, this is only really a very short-term solution, because they will then be able to re-apply for a licence and off they go. But by insisting that a driver undergo a full medical assessment by a qualified doctor who will then have to decide if the person in front of them as they present has an alcohol misuse problem and is unfit to drive, I think that is a perfectly sensible proposition, and as I say I think this is long overdue.

2740 The research seems to show that nearly 50% of repeat drink drivers are alcohol dependent. So I think this scheme is long overdue and by passing this we will be targeting a layer of anti-social behaviour that we can well do without.

2745 I have got two questions for the Minister as well on a very related... well, it is the same topic in fact. Can I ask the Minister of the Home Department, is he prepared to consider other measures which can target so-called high risk people in this category? For example, the so-called alcohol ignition interlock scheme which can be used against those of high risk which is used in other jurisdictions. I know Australia and Canada have looked at that.

And on a similar scheme, will he consider the introduction of legislation to introduce so-called drink driving education orders, as part of the sentencing process, which would allow the court to impose statutory supervision for appropriate offenders in suitable cases?

2750 Thank you.

The Deputy Bailiff: Deputy Gollop, Deputy Domaille, Deputy Laurie Queripel.

2755 **Deputy Gollop:** Sir, I have got many reasons to support the approach being taken by the Home Department and Deputy Le Tocq.

For four years, I was President or Chairman of Living Streets, which by its very nature campaigns for more rigorous road safety, and draws attention to the many roads and lanes in Guernsey where there are pavements only on one side or none at all, and big vehicles particularly pose a risk.

2760 I also, as Disabled People's Champion, am concerned about any possibility of difficulties people with impairments or conditions can have, whether they have mobility issues or sight difficulties, and drink drivers used to be, and occasionally regrettably still are, a menace in both causing injuries and affecting those who are most vulnerable in society.

2765 And on a third level it is obvious that we should be encouraging any greater use of public transport where appropriate, but a new philosophy towards dealing with these situations, updating our legislation and practice.

2770 Where I do have a little bit of sympathy with Deputy Dave Jones in one respect is I think it is important as a society, both politically and through the statutory agencies, do not demonise people with alcohol problems. They are people too. In some cases they are suffering from physical or mental illnesses and I think we need a much greater approach through criminal justice and other means of rehabilitation. We are deficient in terms of anti-alcohol programmes as a society, and in terms of wet houses and treatments relative to other places. That is a much broader issue for all Departments to consider, but I think this sends out the right message that the Island is concerned about road safety and about the wrong people driving.

The Deputy Bailiff: Deputy Domaille.

2775 **Deputy Domaille:** Thank you, sir.

I just rise very briefly, Environment Department clearly fully supports the proposals, we consider them to be eminently sensible.

2780 It was just some comments that Deputy Jones made. Actually, we already have various protections in place to protect the general public against somebody having a medical problem whilst driving, primarily with PSV drivers clearly, and actually on occasion we do, as a Department, take someone's licence away. In fact I did that only this week. But the safeguards that are in place I think are more than adequate.

In this case of course it will be the courts that will put in place the mechanisms in deciding which of the drivers that have been convicted of drink driving are actually high risk drivers, and there will be a mechanism that will go in and that will follow through.

2785 But there is nothing unusual at all in the Environment Department using a medical adviser to advise them as to whether or not someone is medically fit or proper to drive a vehicle.

Thank you, sir.

The Deputy Bailiff: Deputy Laurie Queripel, then Deputy Stewart.

2790 **Deputy Laurie Queripel:** Thank you, sir.

I cannot quite summon up or project the outrage that Deputy Jones seems to on these occasions but I am increasingly concerned by what might be termed 'government by statute' that has the effect of bypassing political and judicial processes. These officials via legislation are significantly empowered, and I have never been convinced as to how these officials are overseen or how or to whom they are accountable. It has never been satisfactorily explained to me.

2795 Who sir, is able to judge the decisions they take, able to judge that they are appropriate and proportionate decisions? Because the decisions they do take can potentially have such a profound effect upon people's lives. Sir, these officials to me, anyway, seem to occupy a sort of grey area and I wonder if Deputy Le Tocq could address these concerns, sir.

Thank you.

The Deputy Bailiff: Deputy Stewart.

2805 **Deputy Stewart:** Just briefly, this Report does focus on alcohol. However, in this modern world, I just really wondered how these rules will apply to people that are on other drugs, which also affect your ability to drive a car and will affect your reactions, such as ecstasy, cannabis, cocaine and of course the designer drugs? Is there any intention that these will be included in the scheme or brought into the scheme at a later date?

2810 **The Deputy Bailiff:** Deputy Brehaut, followed by Deputy Storey.

Deputy Brehaut: Thank you, sir.

2815 Just briefly again, what I hope this does is we have in our community a number of what I think are called these days 'functioning alcoholics' – people who are very sick, people with the disease, people who cannot help themselves but drink, but seem to get through remarkably well until they are in certain environments such as driving.

2820 Now, it seems to make good sense to have a process in place that filters these people out before they get to this court stage, and we have had situations in the past that have made me feel very uneasy, when we have locked up drink drivers – we, the court, sir – have locked up drink drivers for periods of time that have made me feel quite uncomfortable. In one case I remember with a woman I believe who was stopped at school with a child in the car, of course it was wrong but I could not also help feel that the punishment, the prison term also was disproportionate, notwithstanding the obvious risks.

2825 So I hope if I understand this process correctly, we can get referral and people off the roads, before we have these cases appearing in the courts constantly.

Thank you.

The Deputy Bailiff: Deputy Storey, followed by Deputy James.

2830 **Deputy Storey:** Thank you, sir.

I have sympathy with the points made by Deputy Jones and Deputy Stewart and in fact, I was going to raise the point about drugs. But the point that concerns me and I think is not clear to me reading this proposal, is in paragraph 1.3, it says it:

'... is intended to deal with drivers whose apparent dependency on alcohol presents a risk to road safety.'

2835 Now, 'apparent' seems to me rather vague, and I wonder, who is the person who is going to make this decision and make presumably a recommendation to the court? Or is this not going to be a matter to be processed through the courts, but is a matter to be decided by somebody without appeal? There is nothing in this report that suggests the criteria which might be used how the person is going to be judged to be apparently, 'apparently', dependent upon alcohol and a risk to road safety.

2840 So I have every sympathy with the objectives of this proposed legislation but I think the phraseology in the proposal is rather wide-ranging sir, and I would prefer if, before I voted on this, the Minister could explain how he sees this working.

The Deputy Bailiff: Deputy James, to be followed by Alderney Representative Jean.

2845 **Deputy James:** Thank you, sir.

I would like to support the words of Deputy Green, by arguing this scheme is way, way long overdue...
[Inaudible]

The Deputy Bailiff: Deputy James, could I just encourage you to put your microphone on, please?

2850

Deputy James: I do apologise, sorry, sir.

I think it is important for Members to really understand that people with dependency problems all too often have no insight into their dependency and even more devastating is close family members will not acknowledge that their husbands, their wives, their sons, their daughters likewise have alcohol dependent problems.

2855 Deputy Brehaut is quite right in highlighting the fact there are quite a number of high functioning people that are alcohol dependent. And I think it is a responsibility for each and every one of us to address these problems.

2860 Certainly when I came to Guernsey 36, 37, 38 years ago, drinking and driving was part of the culture, and thank heavens, the pendulum has swung radically on that, and by and large a majority of our population have a very, very responsible attitude towards drink driving, and do not do that, and I would applaud that.

The only one issue that I would like to flag up on this and that is on page 45. It is 3.3 and it says that the scheme covers people in the following categories:

'Those disqualified twice within a ten year period for a drink drive offence.'

2865 But whilst to me on the surface of that, I think that that is probably right and proper, I am still very, very concerned about those people that are in fact disqualified first time around when it is known by all and sundry that they have an alcohol dependent problem. My worry about that is why do we have to wait for a second offence?

2870 I say to the Home Minister, I have not got the answer necessarily off the top of my head for that, but there are those people in our community, people, members of our family, people that we work with, that we know they have an alcohol problem and on occasions we know they drive.

Sir, I would just ask you to bear that in mind as an area of concern.

But I do applaud it. I echo Deputy Green's comments; this is welcome and long overdue.

Thank you.

2875 **The Deputy Bailiff:** Alderney Representative Jean.

Alderney Representative Jean: Thank you, sir.

2880 I think that Deputy Dave Jones may well be on to something here, because what is interesting to me is in the Appendix and the tables produced here is the fact that these figures are dropping annually. In other words, policing is very successful, and they seem to have got it down to 84 arrested here and at high risk 27. I mean, if you look down the table it is continually dropping each year, which seems to me to show that the actual policing has been very successful.

2885 I am not going to be able to remain to vote for this because we are due on a plane unfortunately back to Alderney but I do think this table, this set of tables here is most interesting, and if I was able to stay to vote, I would certainly be voting against. On these tables, I think it is well enough handled.

The Deputy Bailiff: Deputy Trott.

Deputy Trott: Sir, thank you.

2890 Very briefly, I do not know whether I would have risen to raise this point in isolation, but because the debate has taken longer than many would have expected, could I ask a question about Appendix 1 as well,

because I have been surprised on reflection about one in five average drink drivers who are arrested do not end up getting charged. I have been trying to understand why that might be. I would have thought that if one was arrested on the roadside by a policeman, one blew into a breathalyser, and if it recorded that one was over the top, is it a case of by the time one gets to the Prison, the recording on the more sophisticated machine has dropped to such an extent that the person is no longer intoxicated as defined by law? It just seems to me that one in five arrests not resulting in a charge seemed higher than one would expect in all reasonableness.

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

Deputy Le Tocq: Thank you, Mr Deputy Bailiff.

First of all, just to pick up on Deputy Jones's points which he made around the Policy Council table, so I was expecting the points that he raised. The only way a licence can be removed is through the courts, and that will stay like it is. It is the courts who decide to remove a licence. This is actually not essentially about removing a licence; it is about re-granting a licence. So it is the same as applying for a licence in the first instance, in that way. The courts are not involved in that process. It is providing, if you like, the proper information available particularly for those that are clearly at risk, because they have been identified by the courts as having a problem with drink and driving, with drinking and driving. As a result, I understand where his arguments are coming from, but the fact is I do not believe that this is providing extra powers to people that do not already have them. It is providing extra information and it is certainly informing those who grant the licence system in the first place – that is not the courts – to have the assurance that they need in order that our roads are safe and I think we would want that sort of system to continue.

Deputy Chris Green asked about right of appeal. Yes, naturally, there will be a right of appeal and that is to be expected. I completely agree with him regarding targeting. This is what this is about, and it is important that when we are looking to public safety, that we do so.

Just to refer to the issues that Alderney Representative Jean raised before he left the Assembly, the numbers are going down, but there are still a quite significant number of high risk drivers on our roads, and it is good the number are going down for all sorts of reasons, but that does not mean that we ignore the problem that is there, because they could increase again, and then we would not have necessarily all the tools available to us. So, this is about targeting that.

Deputy Green, going back to his questions, he asks two other points that were raised through the points in a form of questions really, about the alcohol interlock scheme, first of all. Yes, I know that that is in operation in certain places. It has been test run in the UK as well and trials have shown that there can be quite a significant effect on recidivism as a result of that. It is something that we would duly consider, I think in due course. This is a first step and we will see how this works but, no, we have not written those sort of things off.

He has asked about legislation to link into drink driving education orders. Potentially, that could be the case. Obviously this particular proposal before us will be recommending a scheme that will be in operation to educate. Again, I think it is a matter of one step at a time, and we will monitor it and see what the effects are before introducing any further steps.

Deputy Gollop was largely supportive but made some reference to support of Deputy Jones's concerns I would say it is all a question of balance, and here we are trying to be proportionate to personal freedoms on the one hand, but also public safety. No doubt there will be people who may well have been rehabilitated and may get caught up in this to some degree. But I would rather err on that side, when we are dealing with the balance of public safety and road safety and potential deaths on the road. If it was me, I would err on the side of caution and I think that is exactly what this is purporting to do.

Deputy Domaille was supportive and I thank him for that.

Deputy Laurie Queripel talked about 'government by statute'. I could not quite understand what he was getting at, but I would refer him to my first comment which is to do with the fact that it is the court that actually revokes a licence, not the Driving and Licensing Section of the Environment Department or indeed the Police. It is the courts that decide that, and that will remain the case. But in dealing with the problem of situations like drink driving that we have in our community it is about team effort and so we have all sorts of people involved in this. Law enforcement obviously the court has a part to play, obviously the Licensing Department has a part to play in this and obviously, our Drugs and Alcohol Strategy also has a part to play in this, in conjunction with health professionals as well. So, this is about team working and I think it will be another tool for the team in that respect.

Deputy Stewart raised the point of monitoring and I respond by saying we will certainly monitor ways in which drugs could be included. I am aware of the fact that some drugs have a greater effect than others and can be recognised in order to bring some sort of prosecution, but others are not. That is certainly something that we will keep a close eye on in the future.

It is very clear that we have a small section but a section of our society that have a real problem with alcohol and this is what we are targeting at the moment.

2955 I thank Deputy Brehaut for his support. He talks about issues that are largely outside of this particular remit, but I thank him for his support in that.

Deputy Storey asked about the phrase ‘apparent dependency’. You can obviously read things afterwards into something, depending on the context in that. ‘Apparent’ to me means evidence based, it is visible, so you can see that there is a pattern of behaviour that is going on here and that is I think evident by the sorts of categories that we mentioned, and that Deputy James referred to here.

2960 Again, it is based on what the court decides, as to whether a licence is revoked, so we are talking about what happens afterwards. That is all based on again medical advice, as well, being involved in that, and we are doubling that up here by saying that we want to be absolutely certain that before a licence is re-issued that that person is genuinely free from those sort of dependencies.

2965 Deputy James, I have referred to, I think I have answered that question. Why wait for the second offence? It is a good point, but I think it would be difficult for us to justify that at this particular juncture. I think we have to do what is reasonable and balanced, as I said before, and I believe these proposals are.

2970 Deputy Trott asked some questions that I scribbled down and cannot read now, but that probably will not make any difference. *(Laughter)* All I can say is, well, we will certainly investigate it. *(Laughter)* I think he was referring to the fact of the arrests and those who are eventually prosecuted, there seems to be disparity between the two. I cannot answer that question at the moment. So, I will certainly investigate it and inform him in due course.

Sir, I ask this Assembly to support these proposals.

2975 **The Deputy Bailiff:** Members of the States, there are two Propositions on page 51 on the Billet. I will put then to you *au voix*. Those in favour; those against.

Members voted Pour.

The Deputy Bailiff: I declare the Propositions duly carried.

**Procedural –
Sitting adjourned until 12th February**

2980 **The Deputy Bailiff:** Members of the States, it is 53 or so minutes to go until the end of today’s meeting. Is it your wish that we continue debate by starting the debate on the Billet d’État No. II, which is the Public Services Department implementation of the Waste Strategy matter, or is it your wish that we now adjourn and convene again on a date to be decided? Those in favour of deferring...

2985 Well, Minister, would that pose any problems for the Department?

Deputy Luxon: We would be very happy to proceed, sir, but I do understand there is an hour of formal business to go. But, we are very happy to start.

2990 **The Deputy Bailiff:** Mr Procureur, you are itching to press your button. *(Laughter)*

The Procureur: I feel almost impertinent, sir, but you seem to be hesitant in what to do. You have got to put a Proposition to them, and I suggest the Proposition is to proceed or not to proceed, but to be very clear about it.

2995 **The Deputy Bailiff:** Well yes, I was aware that I was going to bring a Proposition, but I was thinking whether I would now, in the light of that. But I will still put the Proposition to you, Members of the States, that we adjourn this meeting now, rather than start the Waste Strategy debate. Those in favour; those against.

3000 *Some Members vote Pour, others voted Contre.*

The Deputy Bailiff: Close, but I think I recognise that it is the will of the majority not to start the Waste debate. My estimate is that it was unlikely to be concluded today, *(Laughter)* and therefore we would have been adjourning part heard and that might be less satisfactory.

3005

Members of the States, under the Rule about adjournment, because we have suspended the sitting of the States tomorrow, the normal course would be to adjourn to a week on Wednesday, two weeks yesterday, which will be 12th February.

I do not see anyone suggesting anything differently, so we will adjourn until 12th February. We will now close this meeting.

The Assembly adjourned at 4.40 p.m.