

# STATES OF JERSEY

## OFFICIAL REPORT

**WEDNESDAY, 13th FEBRUARY 2019**

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[9:30]

**The Roll was called and the Dean led the Assembly in Prayer.**

## **COMMUNICATIONS BY THE PRESIDING OFFICER**

**The Deputy Greffier of the States (in the Chair):**

### **1.1 Filming by Commonwealth Parliamentary Association (C.P.A.), Jersey Branch**

Before we start, can I draw attention to the fact that in the gallery we have another cameraman, filming this time for CPA, Jersey Branch and P.P.C. (Privileges and Procedures Committee)? Although, one could imagine that it is to capture the auspicious moment where we have a woman in the Chair and a woman Greffier. **[Approbation]** Now we have to stop. **[Laughter]**

## **PUBLIC BUSINESS**

### **2. Future Hospital: rescindment of Gloucester Street as preferred site (P.5/2019) - as amended (P.5/2019 Amd.(3))**

**The Deputy Greffier of the States (in the Chair):**

We now move to the last item of business on the Order Paper, the Future Hospital: rescindment of Gloucester Street as the preferred site, P.5/2019, lodged by Deputy Labey of St. Helier. Members will recall that yesterday it was agreed that Deputy Labey would propose the matter, as amended by the amendment of the Minister for Treasury and Resources, and I therefore ask the Greffier to read the proposition as amended.

**The Assistant Greffier of the States:**

The States are asked to decide whether they are of opinion to rescind their Act, dated 1st December 2016, which approved in principle the use of the present Jersey General Hospital and certain extensions thereto as the site of the new Jersey General Hospital; (b) subject to paragraph (c) below, to rescind paragraphs (a), (c), (d)(i), (d)(ii), (f), (g) and (h) of their Act of 13th December 2017, P.107/2017 on the financing of the preferred scheme; and (c), to note, for the avoidance of doubt, that there may still be incurred, pursuant to P.107/2017, such expenses necessary, or expedient, for the purposes of winding up work undertaken to date under the preferred scheme.

#### **2.1 Deputy R. Labey of St. Helier:**

As you will know, because without your help we would not be having this debate today, I came straight to your Chambers on that January Monday after hearing the Minister for the Environment uphold the decision of the inspector not to grant planning permission for the Gloucester Street site. We are here today because we managed to lodge the proposition the following day. I thought it was a matter of such urgency that I was determined to do that, with your help. We took, at the time, the best advice that Treasury could give us and we were grateful for it and went to print. The Minister for Treasury and Resources and the Treasury Department have done a little bit more work for us and I am very happy to accept that amendment. Denied the chance of the Minister for Treasury and Resources to propose her amendment, but I am sure she can give the same speech later on in the debate, because it is important that we hear from her on the financial side of things. The report, such as it is, to the proposition was also hastily put together. In it, it reads as though I unfairly accused the Minister for Health and Social Services and the Minister for Infrastructure of intransigence, when in the aftermath of the planning decision - the planning refusal - they were simply repeating fact, which is that the Gloucester Street site remained the preferred option. I apologise for any wrong inference, or any embarrassment, or harm, caused to both Ministers, which leads me neatly into why

I believe it is imperative and urgent that we remove the status of preferred site from Gloucester Street and that we bury Gloucester Street, because we need to change the mindset so that we can move on and properly look, with energy and focus, at different sites. The more one searches for reasons why we have arrived at the place we are today, the more terrifying is the picture that emerges. There is probably unanimous agreement among us all that things could have gone better, that things have gone wrong, but it is worse. The whole process represents a catastrophic catalogue of failure and to be in denial of that is not going to help us move on, is not going to deliver the new hospital that we need. The delay from P.82/2012 is stark. On that December day, the Assembly voted to approve P.82 and the Assembly accepted that a new hospital was needed, the need for it, and decided to begin a 10-year plan to deliver the new hospital. Here we are, in 2019, without the proverbial spade in the ground. The nightmare continues. It is the worst-kept secret in Jersey, that clandestine meetings are going on, the slide rules are out, the plans are out: "They are moving a bit here, we are extending Kensington Place there, turning a corner here, demolishing half of Patriotic Street Car Park there." It has got to stop. I do not know what part of cease and desist these people do not understand, but it is time to let it go. It is time to move on. It is not just about it being the wrong site, it is about the whole project and the whole process which has gone wrong. The whole premise indeed is built on sand, both metaphorically and literally. The project team is producing a hospital design to fit the size of the Gloucester Street site, when what we need is a hospital that meets Jersey's clinical need. The fatal error was choosing the site before addressing the need and producing a proper design brief, the design brief, which still is not in a satisfactory fit-for-purpose state today. If you do not believe me, let us ask the Minister for Health and Social Services - I am not tormenting the Minister for Health and Social Services, it is a genuine request - let us ask the Minister for Health and Social Services to tell the Assembly, when he addresses it in this debate, about his meeting with pathology on Friday; pathology, the engine room of any hospital. I think it is fair to say they are up in arms. I think it is fair to say it was an uncomfortable meeting, if what I have been told is true.

[9:45]

It would be a corner-turning moment if the Minister for Health and Social Services was to represent the views of pathology in this debate; tell us why they are so unhappy, represent them honestly - the Minister is an honest and a good man - because they deserve that, they deserve to be listened to, they deserve to have their voice expressed. The biggest problem I see since 2014 is that Ministers for Health and Social Services have made the choice to back completely 100 per cent the project team, and in doing so, casting adrift the opposing views of all those clinicians in the hospital who were unhappy with how the plans were progressing. We saw it. Some of us asked some questions about it, but we did let it happen. We have got to put a stop to that. People wonder why there is a loss of confidence in the hospital project and they think: "It is that pesky team of people who keep sending us emails, who have done some research and have gone to France." I think they have been a wonderful thorn in the side and I commend them for it, but it is not that, it is the fact that every time somebody goes to hospital and asks their doctor or the nurse: "What do you think of the hospital plans in Gloucester Street?" they get an honest answer. The scale of disquiet in the hospital about these plans is unreasonable. We have to listen to them. Dr. Kassai, Dr. Kumar, Dr. Hima, Dr. Ng, brilliant men. Why would you not listen to them? Why would you not listen to these consultants? Do we think the bureaucrats, the hospital managers, Ministers for Health and Social Services, us, do you think all that group knows more about patient care than the consultants, someone like Dr. Hima, who has devoted his career to this Island, an incredible man, who I got to know very well? Incredible man from Sri Lanka: he holds Sri Lankan curry nights to earn money to fill a container full of the stuff that the offices are chucking out: old fax machines, old photocopiers, old computers. Fills up his sea container and sends it away, every year, to Sri Lanka. He once told me: "This Island does not know what poverty is about, if you saw where I come from in Sri Lanka." They are incredible. They flagged up the dangers of working on a building site for 10 years, the implications of that for patient care and for recruitment. When it is finally finished, the £466 million hospital, they still do not

believe they are going to have the space they need for the facilities they need, or the room to grow and expand. It is compromise after compromise. The Constable of Trinity cannot be here today, he is in Africa, but his speeches in the hospital debates, when he speaks, he really does make sense. It is not often, but when he does, he makes a lot of sense. I remember him saying: "If we are spending all this money, nearly £1 billion with the money that we will pay back in interest, should we not have a hospital that does not have compromises or so many compromises?" I have chapter and verse, if the Assembly wants it, on the story of the Renal Department, the Haematology Department and the Oncology Department. The haematologist is looking at the plans and saying: "Where is haematology?" "Haema what?" "Haematology." "Oh." "Well, where is it now?" "In a broom cupboard. Will that do?" "No, it will not do." "Oh, Dr. Hima, I am afraid you are going to have to hunker down with haematology. Well, you are oncology, it is haematology. There is some crossover. Does that mean you get twice the space? No, it means you get half the space." Haematology was forgotten. It is indicative of the failures in this process. Point 2 is that consultations with clinicians started after the decision had been taken to put the hospital on Gloucester Street, a site surrounded by 4 roads and residential units. If there had been a satisfactory, proper design brief, it would have been clear that the need in square metres far exceeded the ability of the Gloucester Street site to meet it. They were warned. They were told. They were advised by Concerto on 9th August 2016. I have to read this out, it is really important. Here are some of the findings from that report: "The current preferred option is a rebuilding on the existing site. We can find, however, no evidence-based justification for this, based on the qualitative, quantitative and financial analysis undertaken. At this juncture, this report cannot support that decision, nor the process behind it." Another point: "In essence, the project and thereby the specification for the hospital has put the physical solutions of the site before the clinical pathways." Exactly what I am talking about and it was all here for them in August 2016: "A key question is how the new facility can be made flexible, so that it can meet the needs of continually evolving healthcare provision and best practice. The design specification and approach are predicated on a model that may eventually restrict and limit services, rather than enable them. The project at this stage should not be politically driven. It should be driven by clinicians. It is essential there is clearer executive leadership of the programme. At the moment, the shared responsibility results in a programme with insufficient focus on delivery and risk. It is recommended that there is one overall programme director and the governance of the Future Hospital project has to change." Today I hope we will ditch Gloucester Street as the site, but it is not just about that. There needs to be a massive change in the governance of this project. I cannot believe that it is right to continue with it falling between the 2 stools of the Minister for Infrastructure and the Minister for Health and Social Services. We need a political supremo in charge, with energy, focus and drive and we need an operational supremo in charge, as well. What did they do with that Concerto report? Learn from it, listen to it, take action from it? No, they sent it back to Concerto and asked them to rewrite it. Typical. I wonder how often in this debate we will hear: "Let us just get on with it." We cannot get on with it because it does not have planning permission and it never will. The first application should never have seen the light of day. It was an affront. The second application - so desperate were they to get it in before the election - was a botched job. I have to pay tribute, though, to the officers of the Planning Department, who told Property Holdings that the first application was a non-starter, would never work, would never be accepted, and they worked very hard to try to get the second scheme to work - our best officers in the Planning Department, working extremely hard with everybody to try to get it to an acceptable stage - and yet still it was not acceptable to the planning inspector and to the Minister for the Environment. So, what do Members want to do? Gamble on a third application? I am not a gambling man, but I do not think we need to text Honest Nev to know that the odds are not in our favour. It would, by the way, from the plans they are talking about, have to come back to the Assembly for another approval, because it is different to what the preferred status proposition had as a footprint. Then, of course, we have got to go through the whole process again of the planning inquiry and what have you. We could very easily find ourselves here in one year's time, in exactly the same position, if we do not take some decisive action. I know Philip Stadden's

work. He is a pragmatist, not a purist. He is a realist, not a romantic. If he could have approved the hospital on this site, he would have approved it. The second refusal is a wake-up call. The Minister for the Environment was right to uphold the refusal in the law. In the law, he has to have a “very good” reason for not doing so. That reason does not exist. Was the public interest better served by approving it? No. Ask the public: no, it was not. The public interest lies in a better site. We are going to hear: “Oh, but the inspector says there is no standout alternative.” Time and time again ‘standout’ is being confused with feasible and economically preferable. There are more feasible and economically preferable sites and if there were not, I am absolutely certain that Philip Stadden would have approved Gloucester Street. Thanks to this Assembly, he visited alternative sites with a proposition that I brought to the Assembly in July, to have the terms of reference changed, so that he could acknowledge the existence of other sites. I was fought all the way by the 2 Ministers, but the Assembly got real and supported it and it was an important thing to do. The inspector says himself it was the right thing to do, the appropriate thing to do on such a big project. He did visit the site. I do not believe he could get on to one of them - there was a little bit of an issue - so he had a whistle-stop tour of the sites. What is he saying to us? What does the refusal to grant planning permission, in the Gloucester Street site, a second time say? It is saying: “Look properly at the other sites.” That is what we must do. Of course, 2 of the reasons were the harm to the historic environment. That is not going to change, is it? Those historic buildings are not going anywhere. People may feel the more important reason for turning it down was the unreasonable impact and the harm on neighbours, real people living in real homes in St. Helier, like we want them to. It is a tough one, unreasonable harm on neighbours. It is very often a reason for refusal of a planning application and the law is there to protect the people who were there first. What do I hear some people saying? “Oh, let us change the law. Let us change the law. We are in a state. We do not like the answers we are getting. Let us change the law, so that we can get the answers that we want.” That is the sort of thing that is done in banana republics and dictatorships. We are not in North Korea. That is not Kim Jong Un, it is Deputy Young, and we are not going to do it. Now, the Minister for the Environment, yesterday, in questions, did outline some measures which may be able to be brought in to make the thing a bit swifter, to speed things up. I hope we are able to do that, because we really need to, but I do believe that the answer, obviously, lies in another site: another bigger, more open site. Of course, in Jersey, you are never going to be somewhere without neighbours, there is always going to be neighbours; but with a bigger, more open site, the approach is as you get closer to the neighbours, go lower and try to get less close, try to put more distance between the development and keep it lower. That is the challenge. With a different site, I believe, we could meet that challenge. I do not want to go over too much old ground, because we need to move on and move forward, but that decision the Assembly made in 2016 I cannot help feeling was unsafe. I was not here for that debate and I read it on Hansard last week. It is pertinent to remind ourselves that the Assembly did not select the sites. There were no options of which site the Assembly would prefer. They did not choose the site, it was chosen, and we designated it as the preferred option in P.110/2016. But, some of the stuff that was fed to Members in that debate ... a sentence that springs out is that: “The development would provide a foundation for the regeneration of this part of St. Helier.” Harm to the historic environment, harm to neighbours does not represent - and never will - regeneration. It is going the other way. Then there is this: the report to P.110 was quite short on the views of clinicians - now we know why - but it said this: “Clinical directors and the wider consultant body, represented through the Medical Staff Committee, have given a pragmatic response to the preferred option. Their view recognised that building a separate site, with a turnkey solution, would minimise disruption to services in the transitional period. Issues specific to the preferred site, such as the potential for disruption caused by noise, dust and vibration during the construction phase, have been identified and all of these can be effectively mitigated. The Medical Director has summarised his colleagues’ views as acknowledging the need to proceed without further delay and while understanding the risks of building a new hospital adjacent to the existing one, the risks associated with doing nothing far outweigh these risks.” Doing nothing was never an option. We were always going to have a hospital,

so was the question put to the consultants: “Well, it is this or nothing” and that is reported here? It is absolute nonsense. On the figures, £40 million-plus has already been spent. That is what I mean by a catastrophic failure. Some of it would have been spent regardless. I think the figure is now £27 million that is just a write-off, end of; and, certainly, if we pursue the Gloucester Street site, that £27 million you can never get back. There is the potential, however, with a new site, with a build cost that is less, to possibly - with a good wind - recoup some of that £27 million.

[10:00]

But, it can only be done on a different site, not on the Gloucester Street site. Ten years is the timeline now accepted for the completion of the Gloucester Street site, if it continues and if it gets planning permission eventually, and 10 years for a new build. On the new build, we are saying 4½ years to build the thing, construct the thing once the spade is in the ground and 5½ years to get to that position. What if we could do it in 4½ years? We do it in 4½ years, we deliver the new hospital on a new site a year earlier than would the Gloucester Street option finish. What if we could do it in 3½ years? What if we got a spade in the ground by the end of this term of this Assembly, we deliver the hospital 2 years ahead of the Gloucester Street site? We can do it in 3½ years, can we not? We must be able to. The Minister for Infrastructure, I know, is armed with some script from his Director General. That is natural, of course and we all do it, and the Ministers, of course. I would urge him to throw it away, because we do not want to hear a defence of a department. We want to hear the Deputy represent the people who put him here. What does he think? What do you think his constituents think about this scheme? I think our population want a hospital with a Haematology Department; a hospital where pathology are happy, resourced and have room to expand; a hospital with a hydrotherapy pool; a place you visit with physical ill health. or mental ill health, both; a hospital with metre-thick concrete walls, ceilings and floors in some rooms, so that their mum or dad, in their most stressful time of their lives, do not have to travel to Southampton, alone and frightened, for cancer treatment, they can have it here. I know at 105,000 we do not really sustain that kind of equipment, but what if we did a deal with Guernsey? What if we took Guernsey radiology, oncology patients as well? That bumps it up. I am afraid no amount of what you say to the Minister for Infrastructure on the Director General’s notes is going to persuade me that we are really pursuing the wrong course. We have flogged this dead horse quite enough. We have to think about the people on Kensington Place. I do not know if the Deputies of 3 and 4 have been to see people, but the gentleman, for instance, from the Spice of Life, his life has been on complete hold now for many years, and other businesses. It is not fair. We have to put a stop to it. The site has to change; governance has to change. There will have to be change with the project team, I am afraid. It will take time, but we must strive for a change in public confidence too and we can do it. Some might say you cannot please all the consultants all of the time. Yes, we can. Yes, we will. There has to be a change in attitude and operation at the top level of the civil service, egos to one side. The Assembly must provide them clear political direction, as only a Parliament can do in a democracy, and on this issue, it is the Assembly’s way or the high way. I make the proposition. **[Approbation]**

**The Bailiff:**

Is the proposition seconded? **[Seconded]**

**Senator K.L. Moore:**

I would like to declare an interest in this debate. If I may, for the sake of transparency, I would just simply like to outline what that interest is, because it is rather minor. However, I have a tenant who is currently working as part of the project team on this site and I wanted to share that with the Assembly. The tenant was chosen by an agent and not myself. They have been in residence, I think, since July and I think the Assembly will acknowledge that my strongly-held views on this debate have not changed since the election time in May, which was prior to this financial interest. Thank you.

**The Bailiff:**

I am not sure that you have a financial interest in the outcome of this debate, Senator. It is good of you to declare it and that is an end to it.

**2.2 Future Hospital: rescindment of Gloucester Street as preferred site (P.5/2019) - third amendment (P.5/2019 Amd.(3))**

**The Bailiff:**

Very well. We now come to the amendment of the Connétable of St. Helier and I ask the Greffier to read the amendment.

**The Deputy Greffier of the States:**

Page 2, in the inserted paragraph (b), after the words “preferred scheme” insert the following words: “(b) (a) to agree that the new general hospital shall not be located at People’s Park, Lower Park, Victoria Park, Westmount Gardens or Parade Gardens in St. Helier.”

**2.2.1 Connétable A.S. Crowcroft of St. Helier:**

Perhaps I could also refer to an interest, which is neither personal or financial, but the Parish of St. Helier does, of course, own property in Westmount Road adjacent to the park, the former St. Helier House Residential Home and Westmount Day Nursery, which are clearly impacted by what happens to People’s Park. Some Members have approached me in the last day, or so, with 2 reasons why they may not be able to support this proposition and I would like to clear up one of them straight away. Members are concerned that this amendment would stop the development at Overdale as an alternative site for the hospital. I want to refer them to page 5 of my report, where I discuss Westmount Gardens and I point out that while Val André, which was open space given to the Parish by the States when the Jersey Electricity substation was created - it is of course a beautiful little valley - it is not directly impacted. If Overdale were to be developed - one would hope not - and I point out that the public maintains a right of way up to Overdale, so if the public wanted to create vehicular access to a new hospital at Overdale, it could and this amendment would not prevent that. In passing, I would note that, of course, the residents, my parishioners, who live at King George V Cottage Homes, clearly would be affected if vehicular access were to be taken up that hillside. I am sure Members will share with me a concern that they were not told that senior Members were planning this as a possible, or even a preferred, site before they read about it, or they heard about it in the news. I am sure, if he speaks, the Assistant Chief Minister, who said that, may wish to publicly apologise to those residents.

**Deputy M. Tadier of St. Brelade:**

Would the Connétable give way at this early stage? It may be worth seeking legal advice. I think it is inevitable that somebody will stand up during the course of the debate to ask the Solicitor General whether, or not, that assertion is true in a legal sense and the fact that the wording the Constable is proposing does not exclude the Overdale site and the fact that public access will still be able to be maintained under the Constable’s wording. It may well be that the Solicitor General needs time to think about that, as well, so I raise it early on, because it may well come up later in the debate.

**The Bailiff:**

The precise question, Deputy Tadier, is whether ...

**Deputy M. Tadier:**

It is essentially to ask whether anything in the Constable’s amendment precludes the access to the Overdale site, effectively preventing the plans being built.



### **The Bailiff:**

I think that is probably more a matter for the Presiding Officer, but we can hear from the Solicitor General later on. He can think about that, certainly. I personally cannot see that myself.

### **The Connétable of St. Helier:**

I am no lawyer, but even if this amendment did stop the development of Overdale, it would not take the States long to come back with a rescindment to take it off the list. I think that is a bit of a red herring, but I will be interested to hear what the Solicitor General thinks. Certainly, there is no intention from the Parish's point of view to stop, or restrict, the development of Overdale as a site. I would suggest that the Island Plan has a few things to say about it, but it is certainly not the Parish that is standing in the way, or seeking to. I need to ask the question really: am I wasting the Assembly's time in bringing this amendment? Should we not just be getting on with debating Deputy Labey's proposition? There is a little bit of approval with that, we have a short debate just to make that point, because when Deputy Labey first put his proposition down, I looked at it and I thought: "Do we need to protect People's Park?" "Not really". It is quite clear from the last time this came up that there is no appetite in the States to see People's Park developed and there is very little appetite out there. We had a very well-run community-driven campaign to stop it happening, so it is not realistic, it is not going to happen. I did not put an amendment in. Then I went to see an architect I know quite well, just to have a catch-up about St. Helier. On his desk, when I went into his office, was a diagram of People's Park, showing the new hospital sitting quite comfortably in the space. He asked me if I was aware of this picture and I dimly remembered seeing schemes for the park. He sort of tried to convince me this was the best site. I had some emails from members of the public, who also thought that I should think again about People's Park. They obviously do not have much grasp of political reality. But, it was talking to the architect that concerned me and I managed to turn him around, because by the end of our conversation, he said: "It is not for the buildings that we will be remembered, but for the quality of our open spaces." I absolutely agree with that and I believe that I probably had him on board. The other concern that made me put the amendment down was going back to the planning inspector's report and giving it a close reading. I have to confess, it was nearly Christmas. I had not read the planning inspector's report very carefully. I read the Minister's reasons for refusal, but not gone back to the text. When you look at the planning inspector's report - and I have reproduced it as an appendix to my amendment - you may share with me the feeling that it does raise the threat level to People's Park. It seems to me to open the door for People's Park to be considered. The inspector goes through - and this is on page 4 of the amendment - certain sites: St. Saviour: a fundamental conflict with the Island Plan, that is not going to happen. Overdale: interestingly, he says would create significant challenges with the Island Plan, that is like coming in fourth place. Warwick Farm: major challenges to the Island Plan, could only be considered if there was no sustainably located site available. Then he turns his attention to the Waterfront and People's Park and he says they are better than the other 3, because they are central. As I mentioned in question time yesterday - it is an oft-quoted detail and it is a problem for people who want to rule out Gloucester Street - that 40 per cent of people, who use the hospital, do so on foot at the moment, so any relocation of those facilities out of the town centre is going to increase car dependency. Correct me if I am wrong, but I thought we had signed up to a policy of making us less dependent on the motor car, getting us more active. Anyway, so having said that People's Park and the Waterfront are better in terms of sustainability, he then looks at both of them and he says the Waterfront raises significant Island Plan challenges; not easy. People's Park, the last one he refers to: "Along with all the others, raises Island Plan tensions and challenges." I do not know whether the dropping of the word "significant" is important, or not, but I also do not know whether him putting "along with all the others" makes the case weaker, or stronger. But, certainly, it does suggest to me that of the 5 alternatives that he reviewed, he seems to be coming down to say that People's Park is perhaps the best alternative site. That is why, Members, I put my amendment in, because it seems to me, as I say here, that this report, by this respected planning inspector, does leave the door open, that Ministers

may look at People's Park. I referred to 2 reasons why Members do not wish to support the amendment. Some Members have said to me they feel that People's Park should be left on the table as part of a fair process, looking at alternative sites.

[10:15]

I would remind them that we did that before and we came up with 3 and People's Park then was quite obviously the best place to put it, because there is nothing on it, you can start work tomorrow, there is plenty of space. I sound like an apologist now for people who would build a hospital on People's Park. I have never denied that it is the best site for the hospital, but it is not available, because it is a park. The point I need to try to make to Members, those Members who want to leave it on the table, is there is no point in leaving it on the table for review, because if the process is done properly and rationally, it will come out on top and then we will have a public campaign, we will have: "Save People's Park: the sequel" and all the stuff will happen that happened before. Now, some Members may think that is useful, gets the community engaged. Personally, I would rather the community were engaged in St. Helier's bid for Royal Horticultural Society Champion of Champions this year. We are trying to win the prize as the best environmental Parish, or place, in the British Isles and I would rather people got involved in that campaign [**Approbation**] and were not spending their time lying in front of bulldozers on People's Park. I just do not regard it as useful. I also feel that if the States does not back this amendment today, it will rather weaken all the pledges and all the promises that we have heard in recent years; that the States will load development in St. Helier, that St. Helier will take the bulk of housing and new development, because we want to protect the countryside and the coast. How are parishioners going to feel if States Members today say: "Well, that is all very well, we do want you to take thousands of new housing units, but at the same time we are not convinced that we cannot take your parks away from you as well." So, I am concerned that those Members who want to, in the name of transparency and fairness, leave it on the table. I am concerned that they are going to really destroy the confidence that I have tried to create in St. Helier that, yes, we will take the housing, we will take the development but please give our children spaces to play, give our elderly places to walk. My amendment, I think, goes into sufficient detail explaining why open space is important, and I am not going to go around that argument that I have made so often in the States about the need for open space. I have referred to several propositions in the course of the amendment. I do not refer to Plémont, which was a very interesting debate, or 2 debates, we had about Plémont and it earned me the wrath of some of the St. Helier Deputies. They could not understand why the Constable of St. Helier was standing up in this Assembly saying that we should spend millions of public money on buying and then knocking down a hotel on the north coast. It was a hotel of sorts, was it not? They thought that was a really bizarre thing for me to be doing. The argument I made then, and I make it now, is that we want the Island to be green and beautiful, we want the coastline to be unspoilt, not just for the people who live in the rural Parishes - not just for the Constable and Deputy of St. Ouen in respect of Plémont and their parishioners - but St. Helier people want to be able to visit a countryside, which is unspoilt. They want to be able to go to beaches, which are not compromised by development but the *quid pro quo* for St. Helier is that we have to be given space for our children. So, I would ask Members to think very carefully before they vote on this. I would also refer them to the Island Plan, which really should give us sufficient protection. Perhaps, the Island Plan Policy, SCO4, needs a bit of beefing up because, certainly, there was an application, which Deputy Labey knows very well, because he, like me, attempted to stop it, where green space in Green Street was protected and then removed by a developer; and the planning inspector - the same planning inspector - was able to use this policy to suggest that that green space could go. But, what the Island Plan says, and I quote: "It is important that the existing level of provision across all types of open space is protected from inappropriate development and loss. The protection of open space is particularly important in the built-up area, where competing development pressures are greatest. Indeed, its retention and enhancement is now all the more important in support of the regeneration of the Island's urban environment and the desire to promote urban living. Within

the context of the built-up area, open space - particularly that identified as visually important open space - may have no public access, or recreational utility, but may perform an important visual and environmental function.” I quote that for the benefit of people who keep saying to me: “Well, no one uses People’s Park and Lower Park is a dogs’ toilet.” This is what people say to me: “Why not build on them?” I think, of course, you can point out that these parks may not be intensively used all year around - perhaps it is just as well, because I would have all residents jumping up and down about that - but they can, of course, accommodate and they do accommodate, big Island festivals: Battle of Britain, Battle of Flowers, the Motor Festival, the Portuguese Food Festival, pop concerts. We have some exciting acts coming to People’s Park in the coming year, so, those of you who like pop concerts - it is not my thing - but that is the only place you can do it. You could not have a pop concert on the current hospital site if you knock the buildings down and put them on Parade Gardens, because it is surrounded by roads and residential living. So, do not be put off by the fact that these parks are sometimes quite empty. The actual policies, we are told that the Minister will protect existing open space provision and the loss of open space will not be permitted except where it can be demonstrated and there are 4 tests that the Minister has got: “Its loss will have no serious impact on the adequacy, quality and accessibility of the type of open space.” Well, clearly, it would fail at that hurdle. “Alternative replacement provision of the same, or better extent, quality and accessibility can be provided.” Well, I would argue it would fail at that hurdle. Three: “The proposal will be of greater community, or Island, benefit than the existing open space resource.” That is the one that worries me. That was the one that was used in La Collette and I do not think that is strong enough, because there are people who will argue that a hospital is more important than open space for St. Helier. Fourth: “Its loss would not seriously harm the character and appearance of the locality.” Well, clearly, People’s Park, in particular and Westmount Gardens are now listed as sites of special interest and any destruction of them would seriously harm their character. So, the Island Plan - apart, as I say, from that third provision - does offer protection. The public, the vast majority of the public, do not want to see People’s Park, or St. Helier’s woodland, developed. We want to continue to be able to accept as a Parish the burden of development, because it is sustainable and it keeps the rest of the Island lovely, not just for people who live in those Parishes - lucky them - not just for the tourists, but for St. Helier residents who want to be able to enjoy the rest of the Island. So, I would argue that there is no point in leaving these spaces on the table; let us look at the other sites without the distraction and all the other things that will flow from a sequel to save People’s Park and let us back the amendment. Thank you. **[Approbation]**

#### **The Bailiff:**

Is the amendment seconded? **[Seconded]** Now open for debate.

#### **2.2.2 Deputy S.G. Luce of St. Martin:**

I am going to be brief. People’s Park is the second largest town park after Howard Davis Park and is, more importantly in my view, the largest unobstructed open space in town. This park holds some of the Island’s largest public events, as the Constable has alluded to, many of which could not simply be moved to another location should the site be lost. Less importantly, maybe, but People’s Park is also a grade 3 listed place, having been recognised for its cultural and historical significance as one of the Island’s seaside parks. If we want to maintain the quality and availability of open space for our growing population, we need to be increasing, not decreasing, the overall amount of park space for town residents. Open green amenity space is vital. It is critical that park space is valued, not only for amenity, but ironically for health as well; also for environmental and economic benefits for St. Helier where the competition for space is particularly high. Pressures on open spaces in urban areas are enormous, but opportunities to increase the amount of green areas are very few and far between, to say the least. Once lost, these areas are very rarely replaced. If People’s Park was built on, then the cost to the public, tourism, the economy and the environment in the loss of one of its

largest public parks and premier town event space would be very real. I will be supporting the Constable's amendment. [Approbation]

### **2.2.3 Deputy L.B.E. Ash of St. Clement:**

What we are now going to need to get this hospital built is this Assembly to show some guts, to show some leadership; we are going to have to choose a site and we are going to have to go with it. When they flooded the valley, several years back now, there were 20,000 signatures against that, but the Assembly voted and went ahead and no one would now say that was the wrong decision, because they took the guts and they had the bottle, for want of a better word, to see it through. When the experts viewed these sites, they said that People's Park was the best site, but the Assembly did not go with that, did not even hold a vote in the end. They went with - and it was on the news the other day - public demonstrations. There were 50 people standing there, plus a well-orchestrated internet campaign, and it just dropped. Now, if we did use People's Park, we could then use the existing hospital, we could join it with Parade Gardens, have a proper park right in the middle of town. We could also use the granite buildings that are there in the existing hospital for an art gallery, for a museum, it could be a wonderful space. It could be a real addition to St. Helier. It is also the least flawed of all the projects. We saw it from the report; the Constable of St. Helier even said it. It is the least flawed. They are all flawed. We are also not going to be able to go with a popular site; that is gone. All the messing around that has happened over the last few years, every site is unpopular now. Whatever site we choose will not be popular with a large percentage of the population. It is up to us to take the hard decision, keep People's Park right on the map for a new hospital, and keep all options open.

### **2.2.4 Connétable C.H. Taylor of St. John:**

Today we are debating whether we should take the preferred site off the agenda and to relook at sites in general. We are not here today to debate the pros and cons of each individual site, because that information has not been put before us. This is a repeat of a discussion that I had with myself and a few colleagues before carrying out the Hospital Policy Board review. Should we have People's Park on that list? The result we came to was: yes, because we want to be open, transparent and evidence-based. So, let us today be precisely that: open, transparent and evidence-based. I think it was 2016 - yes, it was - when the Scrutiny Panel for the hospital site was visited by Concerto and for some extraordinary reason the taxi driver knew exactly who he had in the back of the car. Bringing them from the airport to Scrutiny, he drove past People's Park and he said: "That is where the hospital should be built." The consultant from Concerto said: "So, tell me, why is People's Park not a suitable site? It looks great to me." I said to him: "Well, if London was to build a hospital, they would not build it on Hyde Park" and he said: "Point taken" and there is that very strong point. But, I want to see sites selected on the evidence and sites removed on the evidence, not in a political debate in this forum. Let us take it forward, let us get the people to work on it and say: "Unfortunately - for whatever reason - People's Park is not a possible site" if that is the case. Let us say because of - dare I say it? - a stubborn Constable who refuses to let People's Park be transferred to the States for a new hospital is an obstacle that is too big to be overcome; we accept that evidence and we use that as part of the basis to say People's Park is not a site.

[10:30]

It was interesting to note that among the staff, who were surveyed at the General Hospital, that People's Park was the most popular site. As the Constable has alluded, there is much going for the site from a planning point of view. But, I hesitate when people bring in planning, because one thing is absolutely clear, and I defy anybody to find any site on this Island which is approved in the Island Plan, because it is not. This is the biggest problem we have: we are trying to build something that is not in the Island Plan. I would urge Members in the interests of being open, transparent and

evidence-based to oppose this amendment and let the proper process take place. I urge Members to oppose this amendment.

#### **2.2.5 Deputy R.J. Renouf of St. Ouen:**

If we are to pay heed to clinical views, then I believe that we should leave People's Park in as an option for consideration. I understand that many clinicians do favour People's Park as a site, they do not see Overdale as optimal for their very good clinical reasons: it is long and narrow, it has poor clinical adjacencies if built up there. The Waterfront is a possibility, but People's Park, for them, is also a very good option. If it is removed as an option, straightaway we would be taking a decision which is wholly political. We would drive a coach and horses through the concept of aligning what is political with clinical and with technical considerations. We have not heard the clinicians over People's Park and that is what we say we want to do: we want to bring them in and we need to bring them in and seek out their views and understand why, for them, some sites work better for others. They do not determine - no one group should determine - where we end up, but their views should be heard. They must be heard on People's Park, I submit, and we have not heard public opinion. I would want to hear what the public say and not a pressure group. We would not have been transparent if we take this decision today and support this amendment. So, I would urge Members: let People's Park be considered as a site. Let the evidence be presented, both for and against. We can have the sort of debate about the feel-good factors that the Connétable has mentioned: how important is it to keep it as a park? Or how important is it to deliver a hospital for our Island on an optimal site? Let us have that debate at a later stage, not today, let us decide after we have properly considered People's Park.

#### **2.2.6 Deputy K.C. Lewis of St. Saviour:**

Much of what I wanted to say has already been said, so I will not go over it. But, it just seems a little ludicrous that we want an open and transparent review, except for that bit, that bit, that bit and that bit of land. It just makes a mockery of the whole process. I fully appreciate what the Constable is trying to do, I would probably do the same if I was in his position, but in the process of being open, we must include all sites. I daresay if People's Park was ever chosen, the Constable will want to lie in front of the bulldozers - we will cross that bridge when we come to it - but, for now, I think all sites must be on the table. Thank you.

#### **2.2.7 Deputy S.J. Pinel of St. Clement:**

I have long been a supporter of a new hospital being built on the People's Park and I disagree with the Connétable, I think that anything is possible. I also understand the political issues and remember clearly the passion displayed by both the public and politicians in advance of the matter being debated on the last occasion. However, then the loss of the green space was perceived to be final, but with more consideration in the interim, the whole of Parade Gardens, as has been mentioned, could be extended over Parade Road. Upon demolition of the current site, with the exception of the granite block, could be one massive park, legally granted to the Parish of St. Helier with the granite block being a civic centre, art gallery, restaurant, café, accompanying facilities in the heart of residential St. Helier. I have checked with the Solicitor General that this is legally possible. There are endless reasons why People's Park should be considered, not least because a majority of the hospital staff consulted agreed and that there has been a change in public opinion since the last debate. The public want a new hospital and we undoubtedly need one. The fact that this is a general hospital necessitates a considerable size. This can be made less obtrusive by being built against the quarry face. The access, north, south, east and west, is excellent and would be within walking distance of the many staff who reside in St. Helier. An underground car park is perfectly achievable for patients' easy access. From People's Park, access to Overdale could be achieved and the many derelict buildings there could be reconstructed for longer-term patients in their stay and the continuation of the feasibility of a mental health unit there. Furthermore, with the agreement of St. Helier, a spade in

the ground could go relatively quickly, quickly relieving us of a potentially unacceptable delay. If Members recall, the last debate was pulled. It is even more reason now to have People's Park on a site appraisal list for consultation and full debate as to its suitability for a new hospital. I would ask Members to reject the Connétable's amendment. .

### **2.2.8 Deputy M. Tadier:**

What is the best, or most outlandish, site that anybody has heard for the new hospital? I bet it does not beat the one that I hear quite often at my Parish surgery. It is from a gentleman, who I would not describe as politically radical, I think he is within the parameters of your average voter, but for some reason he has got a bee in his bonnet about Government House. As I said, I do not think he is a radical - I think he is probably a Royalist and he is not a Republican - but for some reason, and I am glad, perhaps, that the Lieutenant Governor is not here necessarily to hear these words directly, he does not think we need a Governor over here. He says we have got a Bailiff, who does quite a good job, and those are his views and he says that we do not need Government House. He says it is far too big and that we could build a hospital on there. Of course, if you ask other Jersey people where they think the hospital should go, they will have their pet projects. Now, let us take it back one step. Some of us are relatively new to the Assembly, some of us have been here a little bit longer, and something that often comes up in the personal manifestos of people standing for election is that they want to protect green spaces, or that they will oppose inappropriate development, which is quite a good catch-all. It is not too committal, but it does tell the necessary that you do not want rampant development, certainly not in your Parish, certainly not in your constituency. In 2014, I had the following sentence in my manifesto, which said: "I will pledge to work with the Constable and new Deputies to maintain the unique beauty and community of our Parish and I will oppose inappropriate development and push for a sustainable population policy for the Island." That last bit, I think we are all still trying to figure out, but certainly I hope the first is true. Then in my later, most recent manifesto, I said that I will also champion environmental issues in the Parish and in the Island. Now, the first pledge I gave about looking after the Parish and its unique beauty and community, it would be completely hypocritical for me if I only applied that to St. Brelade and Les Quennevais, which I represent and which I grew up in, because I think that needs to be applied to the whole Island. It is quite right that the Constable said that when it came to the debate about Plémont, it was quite a divisive debate, one that engaged people, so it was good in that sense. We received many postcards about it and I was quite happy to vote alongside the Constable in that debate, because I thought it is important that no matter where you live in the Island that people have access to open spaces. Ironically, this debate is about healthcare. It is also about the health of our Island and we often fixate on the building in which sick people will be treated and hopefully nurtured back to health. It is not always the case. But we do not necessarily think about healthcare in the wider context, as in the prevention of health, the everyday enjoyment of the open spaces that you have and People's Park is a health-giving location already. You do not need to build anything on People's Park to make it an area which delivers health and healthcare, because people are doing that and using that and enjoying it every day. They are doing the same in the Millennium Park, which almost did not get built, because it gives them exercise, but it also gives them mental health and it gives them the feeling that they are in an open space which they can enjoy and socialise. Remember, they may well be living, most of their time, in very cramped accommodation, and I have certainly seen some cramped accommodation knocking around the doors of St. Helier No. 3 and 4 in recent weeks, so people need that space to get out. I see this very much as a debate which should be making progress, so there seem to be some very purist arguments being put forward saying that we need all the options to be on the table to go forward, but it does not seem to make any sense to me. It is quite a long time ago now since I was at school, but I remember in mathematics there was something which is called "trial and improvement", I have been reminded by my colleague, Deputy Alves, who was a mathematics teacher. When you are trying to find the right answer and you do not know what the answer is, you use this method which constantly gets you to a point where you can estimate what the right answer is and you do that

by excluding the wrong answers. The hospital is different, because we have been told that there is not a perfect site for the hospital and we know that the Island Plan, as it currently stands, is probably not going to allow any hospital to be built anywhere. So, first of all, it is quite clear that, at some point, the Island Plan needs to be changed. If it is to be changed in the course of the current Island Plan, it is for the Minister for the Environment to come back to this Assembly and change the Island Plan, primarily to build a new hospital, but there may be other things that need to be changed. It would be interesting to hear from him in a moment, hopefully. I hope that if he can vote in this vote, and he does not have to abstain for technical reasons, that he certainly should make a commitment one way, or the other, because I think that, like me, he values and champions the environment and he stood on a similar platform to protecting our open spaces. So, it seems logical that why on earth would we waste anybody's time by pursuing sites which are politically non-starters? As the Constable said, very clearly, it may well be a good site, or the best site, on paper, but the site simply is not available; it is not our land to build on and the people of St. Helier do not want it built there. It is their land and they do not want it built there. If we keep it on the table and it turns out that it is the recommended preferable site, what do we then have? Do we have a battle with St. Helier where a third of the population live? Do we have a compulsory purchase of a park, of one of the biggest parks? I am not just saying these comments in a personal capacity, I am saying them as one of the Ministers who has got responsibility for culture and for economic development in Jersey; that site is very well used. It is not just used to walk dogs, it not just used to go for strolls, we have circuses on there, we have pop concerts, we have had folk concerts there in the past: Folklore. I would like to think it is going to be used very well into the future. We have even had Liberation Day there and, for my part, it worked really well. It was a gamble which, I think, paid off. Obviously, not everybody likes change, but it gave access to people who would not normally have come to Liberation Square, and I think it was a very successful event. You cannot have that if you build a hospital on that site, so it is clearly a political non-starter. Even though I am not a St. Helier resident, I know that I will not support any hospital that involves building on green space, any hospital that includes building on the sites that have been listed by the Constable. I hope that the hospital is built within our term of office. I think everyone hopes that. It should, at least, be started within our term of office and the site is a political decision, ultimately. So, there is no perfect site. It is not as if you have got 4 cups in front of you and you have to decide which cup the ball is under. It does not work like that; there is not a pre-destined site which works. We have to come to that through consensus. So, the most important point is that whatever site is ultimately decided upon, has to have the backing of 25 Members of this Assembly, hopefully more.

[10:45]

So, ultimately, it needs to be acceptable to us and I think it is sensible, entirely sensible, to remove the non-starters from that process, so we can focus on the most viable sites, otherwise we are all wasting our time. The reason I asked that question early on - and I sympathise with the Constable because I know what it is like to have red herrings thrown at what should be perfectly straightforward debates, they often evolve and morph into debates which have nothing to do with the original - and that is why I wanted the question to be asked early on. So long as I can be satisfied that nothing is going to prevent the consideration for the Overdale site, or for, perhaps, the Waterfront Esplanade sites, then I am quite happy to remove any public parks and green spaces from the options that are being considered. It gives us progress today. Why would we have a debate today that does not forward us, does not move us on from where we already are?

**Deputy J.M. Maçon of St. Saviour:**

A point of clarification from the Member's speech. I am sure it was just a slip of the tongue but the Member talked about the "prevention of health", I think he meant the prevention of "ill health".

**Deputy M. Tadier:**

Yes, indeed; I may have got tongue-tied. The point I was making is that on the one hand, you have the hospital which treats ill health and it is great if we can prevent health. Prevent ill health; I did it again.

### **2.2.9 Deputy S.M. Wickenden of St. Helier:**

Ever since the Constable laid out this amendment, I have had one song running through my head, and the lyrics go: “They paved paradise and put up a parking lot, with a pink hotel, a boutique and a swinging hot spot. Don't it always seem to go, that you don't know what you've got ‘til it's gone; they paved paradise and put up a parking lot.” Now I am not saying that People's Park is paradise, but it is the best we have got in the area and it is used by Helvetia School. I was lucky enough, when we had the amazing Island Games that we put on a couple of years ago, to hand out the trophies for the BMXing that went there, and it was an amazing event. When you talked to the people that took part, what we had managed to do with that site, to be able to include that sport in our Island Games, our fantastic Island Games, was amazing. I look at the Common Strategic Policy, on page 18: “What will we achieve?” So, this is the document we have all agreed: “Improve access to open and green spaces for a variety of users which will improve the health and mental well-being, benefit early years development, educational achievement and attainment.” It is paving paradise really, meeting what we have accepted in our Common Strategic Policy. In the document on the comments of P.5/2019, the original, we are told that the current spend to date of this hospital debacle has been £45.6 million, but let us have a look at all the options, even though we know it is not politically viable and it is not in line with our policies and that there are so many challenges. How much more are we going to waste on unviable projects, on architect designs and consultants, on something that the Constable of St. John points out is not viable? It is not politically viable. I worry for St. Helier and what is going on right now. Recently, at the Planning Committee, we had a development being proposed and recommended for approval by the Planning Department for what would be possibly 138 residents: zero parking. We have got plans where we are trying to improve areas in Havre des Pas by creating slower speed limits and one-way systems, to improve the lives of the people that live in town, but that is being challenged by the departments and by the ministries. Is it going to get to the point where we are going to start putting up little blockades and, if you live in St. Helier, you cannot even leave, you cannot drive, and we do not want you in the country but we want you to have all our traffic and all the congestion and you can have all the air pollution; you do not have any green spaces. Is that really where we are getting to? Because, that is what it looks like the direction of travel is. Why are you trying to take the few green spaces we have got; there is already not enough. Let us stop wasting time looking at what we know are unviable options. Stop trying to take away the little that St. Helier has and pave paradise. I will be supporting this amendment and I think others should.

### **2.2.10 Senator S.Y. Mézec:**

I sat in this Assembly in the run-up to what was to be the last debate on this subject but, of course, it never ended up happening, because the proposition was pulled. I think it is amazing just how different the atmosphere is this time around. I think that shows what I think is the power of proper democratic engagement, when people, in the public, come together to stand up for what they believe. I do not believe that is something to disparage, and I asked the question: “What else would politicians get away with if we did not constantly have the prying eye of the public over our shoulders, to make sure we did not do the wrong thing from time to time?” So, I think that that was a good exercise in democratic engagement and I am disappointed to find ourselves going over the same old ground and asking myself and asking others where this will get us. It seems to me that there are only really 2 reasons to want to oppose the amendment brought by my Constable which is: the first, which is that he wants the hospital to go on People's Park, in which case I say that I strongly disagree with you but, fair enough, some people are obviously entitled to that other point of view. But, the other reason that seems to be cropping up for opposing this amendment that I just cannot quite get my head around, is this idea that we have to leave it on the list of sites to have a proper transparent process, so we



know what we are dealing with. Well, if that is the case, you are still entertaining the possibility that the hospital may end up on People's Park. I think that, really, we should be clear about this and make this a vote on: do you want the hospital on People's Park, or do you not want it on People's Park? There is nothing to be gained, whatsoever, by continuing to have it on the list, because it serves no purpose in comparing to the other more viable sites. It leads us down a path that will cause significant consternation, not just of the residents in the immediate vicinity, but for all of those who care about protecting and expanding upon open green space in St. Helier. But it will leave us in a position, I believe, where we will detract from a sensible debate on what the real viable sites are. That is the disappointment I had last time we went through this process where there was a list of sites that were put to us: People's Park was top of that list. Second was the Waterfront, which I maintain is still a viable site. Another option, of course, is Overdale and the Gloucester Street site, as well. Did anybody else notice how strange it was that when People's Park was taken off the list, the Waterfront site did not then become top of the list? We then reverted to Gloucester Street, which had not been spoken of in that context before. There were some, at the time, who thought that was incredibly strange and did not quite understand how we got to that position. I am still asking myself the question: is the fact that we are not going for the Waterfront because of the disruption that would cause to some of the plans there are for luxury apartments there? In which case, I say, if we are talking about the greater good here, then I think there are some clear questions to ask there. The fact is that if we provoke this campaign again on People's Park, we will end up in exactly the same place we were, there will be more demonstrations. Ultimately, the park is owned by the Parish and there would have to be a Parish Assembly at some point in this process. I am a supporter of Parish democracy, as I am sure most of us in this Assembly are. I wish anyone who wants to take that proposition to the Parish Assembly in St. Helier, good luck, because we will tell you what we think of you in the process of doing that. If we are to have a fully open and transparent process, why are we not considering every other site? What about private sector-owned land? Why is it only land that is owned by the public? We have the option of compulsory purchase; there are lots of areas in St. Helier that are built up, that we could purchase and we could knock down and build a hospital there. There are sites outside of St. Helier that you could, theoretically, have a decent hospital on. I think one that has been raised recently is St. Clement's Golf Club. That would be a great site for a hospital, would it not? If we are being objective about it, would it not? Of course, it would. I raised that as a prospect with some voters I was speaking to on Sunday evening, and the wife of the couple I was speaking to was mortified at the idea that it could be built at St. Clement's Golf Club, because that would mean her husband would spend more time at home. **[Laughter]** I do not mean to be too flippant in this debate, because I do think this is important. I think the Constable has to be commended here for being completely consistent all the way through. I thank him for the clarity he has provided on the issue of Val André, because that was a concern I had, and I think that that would disrupt a potential debate on how the hospital would work at Overdale, if that is where it is to go. Like the Waterfront, I could stomach it going to Overdale as well; I think that is a perfectly viable site. We are to enter a process, at the end of which we want to have a decent hospital that is fit for purpose for this Island for decades to come. That hospital cannot and will not go on People's Park. It will not go there, because the campaign will start again, we will end up in that divisive situation and I think the arguments will lose again. So, can we please dedicate our time to a constructive debate on what sort of hospital we want for the Island? Let us not take away that valuable green space from St. Helier that people in the area and visitors benefit from so much. We have had a very messy journey up until this point and I think the previous Minister for Health and Social Services made the right decision to take People's Park off the list. The reason he did that is because he knew he was going to lose and it was pointless picking a fight that you are going to lose. Let us pick fights that we can win and have a more constructive process and have real viable options that we can bring people along with us on, instead of reverting to the negativity that has plagued this whole issue up until this point. I wholeheartedly support the amendment from the Constable of St. Helier and I hope Members of this Assembly will back him.

### **2.2.11 Deputy T. Pointon of St. John:**

A lot of what I have to say today has been said already, but I am going to say it anyway, because there is nothing like iteration and I have not spent hours preparing a speech that I am not going to deliver, so here I go. I am going to speak against the amendment lodged by the Connétable of St. Helier, as I believe that a due process of site selection should be allowed before any site is taken off the table. I refer to Deputy Morel's amendment, in which he states: "The Council of Ministers to implement a new open and transparent process of site selection for the new Jersey General Hospital." I argue that transparency cannot be achieved if we take options off the table before the process of site selection begins. The Connétable rightly argues that People's Park is an important public amenity. As a counter to his argument, People's Park could just as easily become an important amenity that benefits the whole Island, on a daily basis, saving lives in the Emergency Department and providing extensive medical and surgical in-patient facilities. The trade-off for the Island, if this site were chosen, could be a legal commitment to provide a green site on the demolished existing hospital site. The potential, in this scenario, for the granite hospital listed buildings to become a focal point for a museum, community activities and tourism-related attractions are myriad. My personal view is that the People's Park, when evaluated, will be found wanting. If perchance it were given site credibility, there would be a subsequent debate and this Assembly would be able to bring reasons to the fore that prevent, or otherwise, the use of green public amenity. However, in this instance, the issue is broader than just St. Helier. It is a whole Island issue. People's Park, on the face of it, is the front runner in the sense that it is a level site and in theory a hospital could easily be built there expeditiously. However, it is likely that space would not allow the inclusion of other than the existing clinical provision to the exclusion of mental health. Given that we are now firmly committed to establishing mental health provision on the same campus as our physical health provision, People's Park may not, when evaluated, meet the criteria. Of greater concern to me is the broad all-encompassing nature of the amendment. It does not confine itself to People's Park and the adjacent Victoria Park, which may have some relevance to a proposed development, but it also relates to the Lower Park and Westmount Gardens, or Westmount Park.

[11:00]

I believe there is a potential here for Overdale Hospital as a development site to be blocked and I trust the Solicitor General is going to be able to reassure us that it is not. Item 5 of the Connétable's amendment refers to: "The remainder of St. Helier's parks and gardens are added to this amendment, in order to safeguard them from future development of a new hospital." I understand the sentiment, but what does the Connétable have to fear from a new hospital developed at Westmount Park? I have conducted an inspection of the area, to establish the nature of the terrain and it is an escarpment. I will give you the definition of an escarpment, which is defined as a "long, steep slope, especially one at the edge of a plateau, or separating areas of land at different heights". The top of this particular escarpment sits 50 metres above sea level. There would never be any consideration given to building on such a steep parcel of land. If the incline were a few more degrees towards the vertical, it would be a cliff. I fear that Westmount Park is a smokescreen to hide the effect of including Val André, a key to future direct access to Overdale. The site would become very difficult, if not impossible, to access should restrictions be imposed on Val André at this stage. In addition, any essential, but marginal encroachment on to adjacent land, could not be considered. If this amendment is successful it will not only rule out St. Helier parks, but is likely to effectively rule out Overdale, once again diminishing the pool of options available, a situation that last time resulted in the current disastrous site being selected. We need to be open-minded and creative about the pressing need to produce a new hospital for the people of this Island that will be good for the next 60 years. I urge Members to vote against this amendment, in order to allow that open and transparent site selection process to take place. .

### **2.2.12 Deputy J.A. Martin of St. Helier:**

These are one of the debates where, as a St. Helier Deputy, I always try and support my Constable. On Monday, when I met him on a different matter - we were discussing the improvements to Havre des Pas - I asked him why has he gone further than People's Park and I was very concerned. I can see where he is going to, as the Deputy of St. John says, protect every park, but these other places have not really been an issue. But again, instead of just taking maybe People's Park off the table, every bit of area around the hospital that may need to be considered, he wants to be off the table, as well. Now, for the avoidance of doubt, the Constable of St. Helier said yesterday on the radio that the Council of Ministers leaks better than a kitchen sieve, because this came straight from the Council of Ministers and we had put it back on the table. Absolutely not. I can tell the Constable what was discussed was the likelihood of where the hospital could go and what, if we took the People's Park off ... and I cannot do any better than Deputy Pinel, who has absolutely described what a fantastic - but it would have to be legally binding for me to even consider it - what a fantastic place we could have, a hospital that looked out onto Parade Gardens, including the old hospital when it gets knocked down. I know it is jam tomorrow, but we are talking about a building that will be £1 billion, we want it to last for 100 years, we want to get the best out of the building. I listened to Deputy Ash, who is saying we must hold our nerve. I was, for 2 Saturdays with the last campaigners, let us say, doing the petition, before we had these very online easy ones to do, outside WHSmith, outside the old - which was not there then, I do not think - BHS. But we were there, 2 Saturdays in a row, all morning, all afternoon. You would be surprised - yes, we got quite a few signatures - but you would be surprised how many people said: "Well, why not? Why not? It sounds like a perfect site." At that time I did not know - well I do not think they had been asked - the clinicians think it is perfect. Now, sometimes, you do have to - as a St. Helier Deputy I fight for most things that will keep St. Helier as open as possible - but sometimes I do not just have to think about me, I have to think about our vision. Now do we want this hospital? The Assembly heard Deputy Labey. Now, can we get this done quicker? Can we get it done on a clean site? Could it be People's Park? Could any of the other bits, if it is not on one site, be used, as long as we got the legally-binding option that we would be given back land, and it would be open space; it will be a park. Now, I am not looking at the Constable, because he probably thinks: "Oh, Deputy Martin has lost the plot, because when is anything ever guaranteed to St. Helier?" Well, the Deputy has checked with the Solicitor General, it can be done. That is the only way; I do not think I am going to support the Constable. I want this discussion. I want to not just make it about this part of St. Helier. It is also not only just for this part of St. Helier, it is this part of St. Helier against the rest of St. Helier, then against the Island. We are 9 miles by 5 miles, we have 100,000 people, who are in desperate need for a hospital. I have never supported the Gloucester Street site and, like Senator Mézec, I was: Waterfront. Again, that was money, people saying: "No, it cannot be on the Waterfront." But I am very loath to not support my Constable, because I know where he is trying to come from. We are waiting for legal advice from the Solicitor General on the little part down the bottom that would stop - could stop, sorry - Overdale being developed in a probably suitable way, because you need to get into the hospital, not go up that steep hill. But the Constable is trying to protect a lot of the forest. They have said forest, I do not know how many people are in it and it has probably got a lot of important wildlife, so there is part of the site being protected anyway under this amendment. So, I think today is a day where we decide: who are we here to represent? Just pocket parts of the Island or, we are told, the most overriding need, pressing for the health of our Island, and it is not walking about on People's Park, it is people needing to be in hospital with decent facilities, that can be managed and have the state-of-the-art treatment that they expect, that is what we need. So, I am sorry to the Constable, but today is not the day I can support him.

### **2.2.13 Connétable L. Norman of St. Clement:**

If I were the Constable of St. Helier, or a Deputy of St. Helier, or even a former Deputy of St. Helier, I would almost certainly be saying similar things to what the Deputies and the Constable have said this morning and bringing a similar amendment to the amendment that we are currently debating.

Now I nearly collapsed when I heard Senator Mézec mention St. Clement's recreation grounds in terms of this debate. I have to say, if that were on the list, I would undoubtedly be bringing a similar amendment, as I would do if the FB Fields were on the list. But, having said that, there is one site in St. Clement that I might have been persuaded to agree with for such a project, the hospital project, but, unfortunately, Andium are nearly completing 200 homes on that site **[Laughter]** so that is not going to happen. I am not the Constable of St. Helier and, therefore, like others who are not representatives of St. Helier, we can take a wider view. My view is that to remove what is unquestionably the best site for the hospital - even the Constable agrees with that - even before we have decided upon Deputy Labey's proposition to do that, before we have decided on Deputy Labey's proposition would, in my view, be grossly irresponsible. But, even more importantly, one of the criticisms during the debate on where the hospital should be has been that we have not listened to the staff at the hospital; we have not consulted with the staff at the hospital. Now, that may, or may not, be true - I suspect it is not - but it may, or may not, be true, but, certainly the Constable of St. John's panel did consult with the staff at the hospital and it is absolutely clear from the Constable of St. John's panel's report that the preferred site of the staff at the hospital is People's Park. So, what is the point? What is the point of such consultation, listening to the staff, engaging with the staff, and then just totally ignoring them? If we want to show just how little we think of the staff at the hospital, how little we value their views, then we will vote for the Constable of St. Helier's amendment. This is the best site for the hospital, let us at least consider it.

#### **2.2.14 Connétable M.K. Jackson of St. Brelade:**

Really, I am sympathetic to the Connétable, as the previous speaker mentioned. I am also sympathetic to the proposals of Deputy Pinel, but I am well aware of the machinations which a Parish, or the Parish of St. Helier, would have to go through with regard to the People's Park forming part of the new hospital site. I would be very interested in some guidance, possibly from the Solicitor General, because I think in terms of, I suppose, whether an acceptance, or a refusal, at a Parish Assembly would delay a proposal much - I suspect it would - perhaps he could enlighten us as to the legal process which would have to take place for the People's Park to be accepted, or to come into an acceptable development site from the public's point of view, because I feel it is an area that could take an awful lot longer than people probably could imagine.

#### **The Deputy Bailiff:**

Mr. Solicitor, is this something on which you can advise immediately, or do you need a little time to come back on that?

#### **Mr. M.H. Temple Q.C., H.M. Solicitor General:**

Just as regards the Constable of St. Brelade's question, I think the issue would be that any acquisition of the People's Park site for the purposes of a future hospital would need to take place by compulsory purchase, in order to remove certain covenants which affect that site. So, I think, while the views of the residents of St. Helier could certainly be expressed by way of a Parish Assembly; nevertheless, the practicality is that if they opposed the acquisition of People's Park, that opposition would, as a matter of practicality, be likely to also be expressed through opposition to the compulsory purchase procedure, so that is more likely to affect any timescale, as regards use of that site. In relation to the other questions that I have had in relation to the Constable of St. Helier's proposition concerning whether that rules out Overdale from consideration as the Future Hospital site as a matter of construction of his proposition, I do not think it does. As a matter of legal practicalities, as I understand it, the question is whether the inclusion of, in particular, Westmount Gardens and Lower Park as excluded sites from consideration for the Future Hospital means that Overdale is also excluded, I am still checking with my office in relation to that. As I understand it, the track that is referred to in the Constable's report in the Val André woodland, it is within a protected green space

area for the purposes of the Island Plan. That is a matter of planning policy, so that potentially could be changed.

[11:15]

But, nevertheless, I still just need to check further as to whether the inclusion of Westmount creates, in the Constable's proposition, some fundamental obstacle in legal terms to the development at Overdale, so I would just be grateful for a little bit longer on that question.

**The Deputy Bailiff:**

Well there are a number of Members still wishing to speak, Mr. Solicitor, so hopefully that will afford you sufficient opportunity.

**Senator L.J. Farnham:**

May I ask a point of clarification of the Solicitor General? He mentioned the word "covenants" and on discussions with the Constable, I understood there were no covenants on the areas included in the proposition. I wondered if there were covenants and if the Solicitor General knew what they were.

**The Deputy Bailiff:**

Is that something you can say now, Mr. Solicitor, or something else for the office?

**The Solicitor General:**

The covenants affect the People's Park site. I would just need to check a little bit further as to exactly what they are, but, certainly, in order to remove the covenants then the compulsory purchase is the procedure to do that.

**The Connétable of St. Helier:**

I know where the covenants are.

**The Deputy Bailiff:**

We will take this in order. At the moment, I think, we are still in the middle of the Connétable of St. Brelade's speech, but there are other questions for the Solicitor General arising presumably out of what he has just said. So, Connétable of St. John, do you have a question for the Solicitor General?

**The Connétable of St. John:**

Yes, I do. Could the Solicitor General confirm that the area of land that might obstruct, or is believed that could obstruct, the Overdale access from the inner road was land given to the Parish of St. Helier recently, as part of a sweetener, to enable the electricity substation to be built?

**The Solicitor General:**

I would need to check that.

**The Deputy Bailiff:**

Again, that is something that the Solicitor General will check.

**Deputy J.H. Young of St. Brelade:**

Sir, could I ask another clarification on what the S.G. (Solicitor General) said about the process?

**The Deputy Bailiff:**

Yes, but just a moment, Deputy, I was going to ask the Connétable of St. Helier, who had got to his feet, whether he had a question for the Solicitor General.

**The Connétable of St. Helier:**

Could the Solicitor General confirm that, as far as he knows, the only covenants that apply to People's Park relate to the area of parking around its perimeter?

**Deputy J.H. Young:**

The Solicitor General answered the question about the procedure for compulsory purchase and he mentioned the possibility, or the likelihood, that there would be opposition to that from the Parish. Could the Solicitor General just enlighten us, a little bit, about what the appeal processes are under compulsory purchase, and what the implications are of timescale, which I think was the underlying question of the Connétable of St. John?

**The Deputy Bailiff:**

I think I will invite the Solicitor General to come back with answers prior to the summing up by the Connétable of St. Helier and that way he will have the opportunity to find out what he needs to. Was there a supplemental question, Deputy of St. Ouen, that you were going to ...

**The Deputy of St. Ouen:**

No, sir.

**The Deputy Bailiff:**

Very well then, yes, we carry on. Connétable of St. Brelade?

**The Connétable of St. Brelade:**

I thank the Solicitor General for his remarks. I would also like to emphasise the point, which many Members will be aware of, the initial Gleeds report, which clearly pointed to People's Park as their preferred site, or recommended site. I think today's debate is useful, whichever way it goes, because the previous States never got to debating that, so this amendment today of the Constable of St. Helier is important and will give us guidance on where to go next. With that I shall be pleased to hear the continued debate.

**2.2.15 Connétable R.A. Buchanan of St. Ouen:**

Firstly, I do feel sorry for the Constable of St. Helier, because there is no doubt - and we have heard it today - that People's Park is an extremely good site for the Future Hospital. It ticks a lot of boxes, it has been the subject of the Gleeds report, which indicated that it was a preferred site. However, I think we need to understand what we would be losing if we lost People's Park, because combined with Lower Park it represents a unique site in this Island for staging major events, and having been one who has been involved in major events, we would lose something that we would never get back anywhere else. I know we have talked about turning the hospital into a park, but some of the events that get run on People's Park would not be able to be run there, simply because of the location and the access to parking on Victoria Avenue, and indeed access to the Lower People's Park. So, if we do surrender this to the hospital - and I accept there are some strong arguments for this around the House - we would lose something in this Island that would be unique, and we would lose the ability to stage a lot of events, that bring a lot of revenue into this Island and generate a lot of takings for shopkeepers, hotels, and other people who provide services to people who come to the Island to participate in events that are run off the People's Park. I am not just referring to the events that I am involved in, but also some of the pop concerts and some of the festivals that take place generate a lot of wealth for people in town, which would simply not be possible to generate, because you would not be able to stage those events in that location. Indeed, some of the events you would not be able to stage at all. Finally, and I am not going to be long, one of the things I do remember very clearly when I was much younger, which some of you will probably think is in pre-history - I am not deliberately looking at certain folks when I make this remark - we were promised ...

**The Deputy Bailiff:**

I think Connétable said he was not looking at anyone.

**The Connétable of St. Ouen:**

The Senator can, of course, interpret that whichever way she wants to. But I do remember, as a much younger man, when the Waterfront was originally built, that one of the intrinsic promises of building the Waterfront was that would be the location for the hospital. However, some while later, that seems to have disappeared into the mists of time in people's memory, which I feel is most unfortunate. What I would say to the Constable of St. Helier, and I know he has already made this point, I would ask him to reiterate his thoughts about the access to Overdale, because I am extremely concerned about the proposals that he has put forward that may, or may not, impinge on that. Indeed, I wait with great interest for the Solicitor General's advice on this point. However, on balance, and given my views about the value of People's Park, it is a unique treasure that this Island has and if we surrender it for the hospital - for all the good reasons that we have talked about - we will be losing something that we will never ever get back. I will be supporting the Constable of St. Helier; much to his surprise, I hasten to add.

**2.2.16 Deputy S.M. Ahier of St. Helier:**

The new hospital must not be built on People's Park. I had thought this matter settled. Regrettably, we seem destined, where the hospital is concerned, to debate the same issues *ad nauseam*. No sooner is an agreement reached, it is rejected. Sites are ruled out, only to resurface months, or years, later, and we are still no closer to building the fabled hospital than we were when the need for one was first identified 6 years ago. Back to the matter at hand. St. Helier is running out of green space. To consider sacrificing one of our last remaining public parks, to avoid building another hospital on the same site where a hospital is already located, is nothing short of an outrage. Let us briefly review the process by which People's Park would be acquired. The States do not own People's Park; it belongs to the Parish. There is no possibility, whatsoever, of the Parish consenting to sell the land to the States for its development. The States would, therefore, have to make a compulsory purchase which is a contingency still very infrequently resorted to. A demonstrable benefit to the public interest would be required to justify such a measure. An incentive, which has been offered up in the past, is that People's Park could easily be replaced were it to become the site of the Future Hospital. In other words, the existing Gloucester Street site would become the new People's Park. This is absolute nonsense. Prime real estate is not simply left as open space, no matter what promises have been made by previous Governments. It is far more likely that if the hospital were to be moved from Gloucester Street, the site would be developed into apartments, as the former Girl's College site has now been. Building the hospital on People's Park would, therefore, be a dangerous precedent. It would encourage developers to petition for greenfield sites, especially given the oft-publicised need for more housing. It would also erode the public's trust in the Government of Jersey to preserve their parks and open spaces. There is a presumption that the need to preserve People's Park is wholly sentimental. This is not the case. It would, in fact, be another dangerous step in the direction of overdevelopment, which St. Helier should and indeed must resist.

**2.2.17 Connétable R. Vibert of St. Peter:**

Within our Parish we have the Island's airport, and during my lifetime we have lost a Catholic Church, a Methodist Chapel, numerous farms, numerous houses and quite a number of Parish roads. However, the Parish has, on the whole, not opposed this because they understand it is for the greater need of the Islanders of Jersey that we have an airport that is of the best standard and safe to travel from. Likewise, in removing People's Park from the shortlist, we are removing one of the best sites for the Future Hospital and our Island's Islanders deserve the best hospital possible. The site should not have been removed from the shortlist by the previous Minister for Health, but we cannot undo that. For these reasons, I cannot support the Constable's amendment and urge other Members to follow likewise.

## **2.2.18 Senator L.J. Farnham:**

This is an interesting debate. I sense an element of a dilemma in the Assembly; notwithstanding that some Members have been very concise and definitive on their views, but I think the middle ground are thinking. The sort of dilemma I am having on this issue is around whether we keep all of the options on the table for the new process, which could encourage more procrastination and add time to it but, as they say, the enemy of a good plan is always the dream of a perfect plan. Or we remove some of the sites and focus our minds on what is left to expedite the process. The temptation is to get on with it and just move for the sake of moving fast, but we have to do this properly and we have to do it swiftly, as well. I am slightly nervous about the whole shaded area, notwithstanding the Constable's reassurances, which I accept. But I will be particularly interested to hear the S.G.'s responses, not only in relation to that and access and the impact on a potential hospital at Overdale, but also on some clarification around the covenants, which I am led to believe are not going to be an issue. The point I am trying to make is there is no point the Assembly making a decision to find out, at a later date, that covenants make what we have decided difficult, or impossible. Of course, the new open, inclusive process that we are going to follow, which is going to start, I hope, almost immediately after this debate, will include the staff. The Constable of St. Clement made an important speech. So, to exclude potential sites without knowing fully - and there is hearsay on what the hospital staff say - what they think, without including them in the process, I think might be slightly short-sighted. Having said all of that, I would be very reluctant to place a new hospital on People's Park because, like many other Members, I do value our green space in St. Helier. We do not have enough of it, we need more of it. I was very disappointed with the decision this Assembly made over Ann Court recently, because I think we lost another opportunity there to add more green spaces in St. Helier. So, it is a dilemma, but I look forward to the conclusion of the debate when we have all had a chance to make informed decisions.

## **2.2.19 Senator S.C. Ferguson:**

I am very disappointed with all this. I would like to get back onto topic. It is not a site selection debate that we should be having today. **[Approbation]** We should be deciding on the rescindment of our foolish - and I was there too, so I can hold my hands up - decision to build on Gloucester Street. Now, I have no problem with leaving People's Park out of the mix, nor the Lower Park. They are both needed for events such as the Air Display. Where are we going to park the helicopters, for heaven's sake? Or the Battle of Flowers and the Battle of Flowers Fun Fair, the Beer Festival - we have got to give people room to stagger around - the Motoring Festival, and other events. But, to include everything, in that corner of the Parish, seems a bit like overkill.

[11:30]

Now, I would inquire whether the Parish officials and the Roads Committee, or suchlike, have they been consulted? The Connétable may like to confirm this, because I have been told by some of the officials they knew nothing about this. I was intrigued by the comment that there is a public road maintained by the public up the Valley, because I cannot find it on any of the maps. I have not been around to tramp up and down yet, but no doubt I shall. The Constable laments the loss of green space at Havre des Pas with the La Collette flats, but this is why it is essential that all 4 agencies involved with property - Andium, Ports, S.o.J.D.C. (States of Jersey Development Company) and Jersey Property Holdings - must have an overarching asset management committee, as recommended by the C. and A.G. (Comptroller and Auditor General), to ensure that they comply with the Council of Ministers and the States strategy. They may think they are independent; they are accountable to the taxpayer and they need to remember this. Now, Senator Mézec has called for the vote to be on People's Park, or not People's Park. Well, if the Connétable had limited this amendment to People's Park and the Lower Park, I would have been inclined to support it, but given the sort of blunderbuss approach he has taken, let us name everything, no, I cannot support him.



### **2.2.20 Deputy M.R. Higgins of St. Helier:**

Many speakers - the Constable of St. Helier, Senator Mézec, Deputy Lewis - have put forward far better than I can the arguments that I would have used to argue the case against using the People's Park and in support of the proposition. So, I am not going to go over those; those cases have been made very well and very eloquently. Constable Norman mentioned listening to the staff of the hospital and he stated that they believe that People's Park is the best site. But has anyone drilled into why they believe it is the best site? I think if they did, they would find that it is fact they can walk to the People's Park site and to the hospital easier than any other site, whether it be Overdale, or somewhere else. They would have to use cars if it was Overdale. But they feel that People's Park is within short walking distance. To give you some evidence in support of my hypothesis is that we moved staff away from Westaway Court, opposite the hospital, to the Limes and many of those same medical people were unhappy with the move, because it meant they had to walk further to the General Hospital. My preferred site - as we all have our own preferred sites in mind - is the Waterfront. The Waterfront is also within a very easy walking distance of the proposed hospital, so if the hospital is built there I think they would say: "Yes, it is a good site, we are in support of that site" if what I am saying is correct and the ease of getting to work is important to them. It is also my understanding that the Waterfront was from the very beginning considered to be the best site for the hospital, and it was ruled out by the then Chief Minister and his inner Cabinet of Ministers on the grounds the site was too valuable, that we could build expensive apartment blocks there and bring in a lot of money. Who would get the money? The States of Jersey Development Company and, therefore, they get their increased bonuses? Or would it be private developers, who sell off the apartments, in many cases to people outside the Island, for a lot of money? Now, I think that to say that the clinicians want the People's Park and nowhere else is false. I do believe, yes, we need to consult them, but a hospital site on the Waterfront I think would tick all their boxes, as well. They want a new hospital, the site would be easier to develop than the existing site, which I have always been opposed to, and as I say, I shall support the people of my District and the people of St. Helier in trying to maintain our green spaces. I shall be arguing for the hospital site, and I know we are not dealing with that now. We need to rescind the existing one because it is totally inappropriate; it is trying to put a quart into a pint pot, using non-metric sort of measures. I think that we need to move on and I shall support the Constable on this particular proposition. I shall be voting for the rescindment of the Gloucester Street site and I hope we do away with these ideas of expensive apartments for non-locals and others who will make money out of them, and give the Islanders the hospital they need on the Waterfront.

### **2.2.21 Connétable J. Le Bailly of St. Mary:**

People were outraged, absolutely outraged, when the People's Park was removed from becoming a site for the new hospital. This is not just a St. Helier issue, it affects the whole Island. As we will be starting afresh on the hospital build, the People's Park should still be considered. Parks can be built far cheaper than a hospital in a different location. If the People's Park had been pursued at the outset, we would now have a new hospital. This is an important Island building, which will serve the whole Island; it needs to be sited on the most practical and cost-effective site. Whether, or not, that is the People's Park, it should be given the option to remain on the table as part of the selection process. I will not support the Constable of St. Helier's proposition, because it includes the People's Park. It is the People's Park, not just for St. Helier, but for the whole Island. If we can make that a building for the whole Island, then that is how it should be.

### **2.2.22 Deputy R.E. Huelin of St. Peter:**

You can but admire the Constable of St. Helier's tenacity in his determination that the hospital will not be built on any of his green spaces. In reality - and this is my personal opinion - I do not think People's Park will pass muster as it is too small, especially when you take into consideration mental health facilities that the Deputy of St. John told us about. However, and as proposed by Deputy Morel, which I hope will go through, we are going to have an open and transparent selection process

to make sure we have the best possible hospital; a hospital to support many generations to come. So, we most definitely cannot remove it from the process and restrict the options available. It was never debated last time, despite being the preferred site, as we have heard on many occasions today. If it is not given full consideration, we are potentially depriving the Island of the optimum location for our much-needed facility. We must remind ourselves today that this is not a site selection debate; we are not here to discuss the merits of either/or. If we go back to what we are trying to do, it is to decide whether we wish to rescind the Gloucester Street site as presented to the Assembly a couple of years ago. Let us face it, the cup is not exactly overflowing with suitable sites for such a major construction; therefore, how again can we close the door on any of them, until the site selection is finally and irrevocably completed. If the Constable's views are founded that People's Park will not pass the test and be selected, let it be put to the test and I am sure the Constable's fears will be alleviated as part of a process. The first thing I have heard from Senator Mézec's suggestion of St. Clement's Golf Club, which I think is a brilliant idea, only because I am a member of La Moye and we have got too many golf clubs on the Island. **[Laughter]** But, I like the idea only because it is just creative thinking. We must not restrict ourselves, as I think somebody said before, solely to the sites that are in States ownership. We must look further and wider to find the right idea. I have to say, a bit of personal interest here, I am not sure about Government House; some of you may know that my sister was Lady Governor 20 years ago and I do not want her old home being taken away from us all. Seriously, let us go back to it. The Constable does go on about the green lung of St. Helier, but sorry, People's Park or not, I am more concerned with the health of the 100,000 pairs of lungs in this Island.

#### **2.2.23 Deputy R.J. Ward of St. Helier:**

I have listened intently. I was not here in the last Assembly and the decision that has been made and the real debacle of the hospital we will talk about later on the current site. I will start by saying it is clear that there is not one standout site. That is clear. My concern was that this amendment limits the possible outcomes of where we could build in places like Overdale. However, I do not think that is the case now and I think there is a solution to that. At the same time, that we can protect really precious green spaces in St. Helier; and they are really precious in St. Helier. If you look about the process of transparency that has been used, okay, let us be really transparent then, so let us have a look at possible sites. Why not? If we are going to look at parks, open spaces which are accessible, there is Coronation Park, Howard Davis Park, Les Mielles Golf Club, Les Landes. In fact, any piece of land that you could find is a green space to build on if you take away the importance of those green spaces. If we are really going to be transparent what we are going to end up is back to square one and going through a ridiculous process again that does not get us anywhere in any time. If we are going to talk about leadership; we need some leadership to say: "Let us be realistic about it, the Waterfront and Overdale are 2 big sites that were probably going to happen." The leadership on the Waterfront was: "Let us sell it off and create homes that are probably for lock up and leave and will never be used by Island residents to live in, and at the same time limit the possibility of building a much-needed hospital there." So, do not throw the leadership card in; we lacked leadership in the last Assembly across the board, and I am sorry to say that. So, let us look realistically here. If we take these green sites away from the centre of St. Helier, it is yet another burden on St. Helier, another loss, with a promise - without any justification - to move that green space. I agree with Deputy Ahier, that space will very quickly become housing, expensive housing, because of the power of money speaking. So what we need to do is be realistic here. I will be supporting this amendment, because we do need to protect those spaces which are important, not just for St. Helier, I agree, but for the whole Island. But there are other options. We need to limit those options to some extent to be realistic, so that we get an outcome that will happen in the course of this Assembly's time, and perhaps even in the course of our lifetimes.

#### **2.2.24 Deputy K.F. Morel of St. Lawrence:**

As most Members, if they have read the Order Paper, will know, I have an amendment to be debated after this one, which is asking for a transparent process to take place; something that I think is incredibly important. Interestingly, the Council of Ministers have already asked for an amendment to my amendment, in order for them to be able to re-use data and basically maintain manageability to that site selection process, and I am quite happy with that. That, in itself, shows exactly what Deputy Ward has just said. A transparent site selection process does not open up every possible site from the beginning, because to do that we will be here in 15 years' time, still arguing, still talking about where to put this hospital. The site selection process that will follow, should the rescindment go ahead, will start at a point with a certain number of potential sites asked for. It probably will not include St. Clement's Golf Course because, for various reasons, people think that is not viable from the beginning. That, in itself, is a political decision made there by not including it. Government House, I think that is a fantastic idea - there is only one building on there, there are only a couple of people to move, unlike the 20 or 30 old age pensioners who live at George V Cottage Homes - so, to me that, perhaps, becomes a viable site. It has got good access, why would you not go there? But, guess what, that has never been on the site selection list because people politically made the decision that Government House, the site of Government House, is not an appropriate place to put a hospital, yet most of it is green space, most of it is open area. It is just one house to move. So, while I put forward my amendment to come and thrust the debate shortly; it is, in my view, completely within the realms of ... while pushing that amendment and wanting that amendment to say that People's Park is not viable. The reason People's Park is not viable is because it is not a site. People's Park is a protected space. People's Park is an area protected for the benefit and enjoyment of the public.

[11:45]

If we begin seeing parks as sites for infrastructure then we start down a dangerous route that will see these vital open spaces disappear. Les Landes is a wonderful open space; maybe we could put the hospital there. So, when I hear the Minister for Treasury and Resources and her faithful assistant talking about building on People's Park I know and I understand they are bringing a utilitarian view to it. But they are bringing that view without understanding the consideration of the 40,000 Islanders who live in St. Helier and beyond, who use that park. It has been mentioned and Constable Taylor said that London would not give up Hyde Park, New York would not give up Central Park, Paris would not give up the Bois de Boulogne, because they are vital and they are crucial. As the Canadian author Marty Robbin said: "Parks and playgrounds are the soul of a city." St. Helier is not quite yet a city, but I think it still stands. There is, in People's Park, other aspects, which I think are vitally important. There is a natural aspect to People's Park. It backs onto woodland. It is not, in itself, entirely an urban fabrication as we see in more modern parks, such as Millennium Park, which while it is vital, and I am really pleased Millennium Park has been created, it is an area for fun and socialising, but it is not an area of beauty. It has been planned, it is manicured, it has lawns. There is a natural aspect to People's Park, which you will not find in any other park in St. Helier. Sadly, as well, the argument for converting Gloucester Street into a park, as a replacement, is a red herring, precisely for those reasons. A park in Gloucester Street - and I agree with Deputy Ahier that that will be a fight in itself - if People's Park were to be used I have a funny feeling people would suddenly be talking about putting buildings there, instead of using it as a park. But, the argument for converting Gloucester Street into a park as a replacement, it is a red herring, but should it be created, that park in itself, will on 3 sides be enclosed by large, tall buildings. It will not have a natural aspect, it will be another manicured urban fabrication. There will always be those ruthless developers, or dyed-in-the-wool utilitarians, who see park space in terms of pounds and pence, or for the utilitarians they will see it as alternative uses for buildings. But, it is against these people that those of us who believe that parks and playgrounds are the soul of cities; it is against those people that we have to stand and say, "no". Why do you not look at the buildings out here and say: "We could knock them down." In fact, the Royal Square is a nice open space and this is just a building that can be removed, why do you look at grass and trees and see them differently? They provide a vital role in preventing

people ending up in those hospitals, which is an important point that has been made already. So, I say that it is against these people that we must stand and it is against these people that we must draw a line and say: “No, start the site selection process, make sure it is transparent and make sure it takes in viable sites from the beginning.” But People’s Park is not a viable site; People’s Park is a park. It was never intended for being used to build on.

**The Deputy Bailiff:**

Does any other Member want to speak on the amendment? Solicitor General, are you able to advise the Assembly?

**The Solicitor General:**

Yes. In relation to Senator Farnham’s question concerning the covenant on People’s Park, the answer is - as suggested by the Constable of St. Helier - yes, that covenant relates to parking around the perimeter of People’s Park. In relation to the Constable of St. John’s question concerning the land swap, the answer to that is yes, there was a parcel of land that was swapped and given to the Parish to be added to the park at Westmount and it was to be designated as parkland. In relation to the request from Deputy Young, concerning some more information in relation to the compulsory purchase procedure, well, it is always difficult to give precise timescales for legal proceedings, but on the assumption that ... the 1961 Compulsory Purchase Law sets out a process whereby land that is to be compulsorily purchased is valued. There is a process of a review, rather than an appeal, in relation to any contested valuation, and that process, I would estimate, if it is contested, would probably take about 12 months. I would add, though, that in relation to the covenants on People’s Park, there is also the possibility of a special law that could be passed by this Assembly to remove those covenants, in the same way that the Assembly did in relation to covenants at La Motte Street. That is an alternative way of proceeding in relation to those covenants. Lastly, in relation to access to Overdale and whether the inclusion of Westmount in the Constable’s proposition would create some sort of problem, in relation to the use of the site at Overdale for the Future Hospital, in terms of the legal position, I still have not got complete answers from my office on that particular question, but the indications are that the track that is referred to in the report to the Constable’s proposition is only 9 feet wide and it is accessible to a 4 by 4, but it may well be a problem in terms of access to Overdale. If that is the intended access to the Overdale site, then the inclusion of the Westmount site in the Constable’s proposition would potentially create an obstacle to consideration of the Overdale site as the site for the Future Hospital. I trust that assists.

**2.2.25 The Connétable of St. Helier:**

Am I glad that I brought this amendment? Interestingly, I had an email from a parishioner earlier in the week who said: “Good luck with the battle for People’s Park.” I felt like replying: “Well it is just the first salvo, depending on the result.” He went on: “It is incredible how people, who live their lives in the countryside, as many of the States Members do, seem to be quite happy to fill the very few, but vital, green spaces in St. Helier with buildings. St. Helier has always been prepared to accept the fact that to maintain the Island’s green and beautiful countryside and provide the bulk of the housing stock necessary to house the population, St. Helier must bear the brunt of this building programme. That has always been on the understanding that, in return for this sacrifice, adequate green space by way of parks will be provided.” He concludes: “If nothing else, it will flush out those who wish to see green spaces in St. Helier destroyed.” I think the amendment has done just that; it has flushed out a surprising number of speakers who really do want to see the new hospital go on People’s Park. So, I am not at all sorry for bringing this amendment, because if it is lost then I will know what work we have to do as a Parish next. I must say that Deputy Morel, in the last speech before the Solicitor General’s comments, really blew a great hole in the argument that many Members have relied upon about wanting all sites to be on the table. He, like Deputy Ward before him, said: “Well all sites are not on the table anyway, Government House is not on the table, St. Clement’s Golf

Club is not on the table, these were taken off, as political decisions somewhere earlier in the process.” So, what I am asking us to do today is to take St. Helier’s parks off the table for the same reason that Government House is not suitable. We simply would not go there and we should not ever have gone there in terms of these parks. Deputy Morel was also extremely eloquent - more eloquent than me - when he set out the need for parks and how parks are simply so central to the success of a community that nobody in their right mind would really think about building on them. I must say that however this debate goes, I am not seriously worried that People’s Park is going to be built on, because I do not think it is going to happen. Lower Park has not been mentioned - Lower Park is covenanted so that would be a bigger battle - I really do not believe that St. Helier’s parks are in jeopardy. What I wanted to do was to save the States the expense, the delay and the aggravation - because there is going to be a lot of that - the aggravation that the States is taking on if they decide to keep St. Helier’s parks on the table. I will do my best to allay the concerns of Parishioners; they sometimes ring me up and say: “Constable, why are you taking all this development?” I have to explain to them the principles of environmental sustainability. St. Helier takes the development to keep the rest of the Island beautiful. It has been quite disappointing how many Members have said: “Well, St. Helier needs to think about the rest of the Island; St. Peter has the airport, so St. Helier should take the hospital on its park.” As if St. Helier does not do so much for this Island. I have made detailed notes on all the speakers’ comments; some of them I found positively scary. The Minister for Treasury and Resources’ idea that we could build one massive park, goodness knows where we would play in the interval between the 2 things. We are talking about 5, possibly 10 years, without any access to space. But what really made me chuckle was this one massive park would include legal promises that it would never be taken away from the Parish. Well, excuse me if I mention the Bellozanne covenant. That was a legal promise that was taken away from the Parish some years later. So, I am sorry, but not only would this alternative park not work, but I do not believe that those guarantees will be worth the paper they are written on; not in 50 years’ time, not in 75 years’ time. There was lots of enjoyment in the debate; I almost thought Senator Ferguson was going to support us when she said: “Where are we going to park the helicopter?” That was helpful. I was surprised to hear from the Constable I sit next to, the Constable of St. Ouen, that he was going to support and I hoped it would be because I had stood up for Plémont and the open space there, which was not easy. But, no, it was because he is a closet petrol head and he likes to drive his motor car very fast up Westmount Road and park it on People’s Park once a year. I think Members have formed their views. I think the Deputy of St. Peter said I was trying to create a smokescreen, so that we would be stopping the Overdale development. I do not have a problem with the Overdale development. I think the Island Plan has a problem with it and I think the clinicians have a problem with it, but I do not. There is an access issue, of course, and certainly it was never my intention and I hope he was not impugning my integrity by suggesting that I had blown a smokescreen over the access issue. The Parish would not - so long as I am Constable - prevent access up to a new hospital at Overdale and Members have simply got to take that at face value. I said that in the report; as far as I am aware, the land that we have at Westmount does not prevent a major road going up next to it, because there is still plenty of space - if Members look at my diagram - there is plenty of space beside the area of parkland that the Parish administers. I think the key issue is Members who vote against this amendment are not saying they want a fair, transparent process. We have been told that all the possible sites are not on the list and they are not going to be on the list. My argument is nor should People’s Park, or St. Helier’s green spaces be on the list, because the Parish of St. Helier is doing so much to accommodate the Island’s residents and workers and visitors, and - as the Deputy of St. Martin said right at the beginning of this debate - there is not enough green space at the moment, so why would we be considering creating even less. I urge Members to support this amendment, so we can get on with the urgent task of finding a suitable site for our new hospital. I call for the *appel*.

[12:00]

**The Deputy Bailiff:**

The *appel* is called for. I invite Members to return to their seats. I ask the Greffier to open the voting.

<b>POUR: 24</b>		<b>CONTRE: 22</b>		<b>ABSTAIN: 0</b>
Senator K.L. Moore		Senator I.J. Gorst		
Senator S.W. Pallett		Senator L.J. Farnham		
Senator S.Y. Mézec		Senator S.C. Ferguson		
Connétable of St. Helier		Senator J.A.N. Le Fondré		
Connétable of St. Lawrence		Senator T.A. Vallois		
Connétable of St. Saviour		Connétable of St. Clement		
Connétable of St. Brelade		Connétable of St. John		
Connétable of St. Ouen		Connétable of St. Peter		
Connétable of St. Martin		Connétable of St. Mary		
Deputy G.P. Southern (H)		Deputy J.A. Martin (H)		
Deputy M. Tadier (B)		Deputy of Grouville		
Deputy M.R. Higgins (H)		Deputy K.C. Lewis (S)		
Deputy J.M. Maçon (S)		Deputy S.J. Pinel (C)		
Deputy of St. Martin		Deputy of St. Ouen		
Deputy R. Labey (H)		Deputy L.M.C. Doublet (S)		
Deputy S.M. Wickenden (H)		Deputy G.J. Truscott (B)		
Deputy of St. Mary		Deputy L.B. Ash (C)		
Deputy J.H. Young (B)		Deputy G.C.U. Guida (L)		
Deputy K.F. Morel (L)		Deputy of St. Peter		
Deputy M.R. Le Hegarat (H)		Deputy of Trinity		
Deputy S.M. Ahier (H)		Deputy of St. John		
Deputy J.H. Perchard (S)		Deputy K.G. Pamplin (S)		
Deputy R.J. Ward (H)				
Deputy C.S. Alves (H)				

### **2.3 Future Hospital: rescindment of Gloucester Street as preferred site (P.5/2019) – third amendment (P.5/2019 Amd.(3)) – second amendment, as amended (P.5/2019 Amd.(3)Amd.(2))**

#### **The Deputy Bailiff:**

Very well. There is now another amendment in the name of Deputy Morel of St. Lawrence. Deputy, there is also a proposed amendment to your amendment; did I understand from what you said earlier that you would accept that amendment?

#### **Deputy K.F. Morel:**

That is correct, yes.

#### **The Deputy Bailiff:**

Yes, so do Members agree that we can take Deputy Morel's amendment, as amended by the amendment of the Council of Ministers? [**Members: Yes**] Very well, in which case I would ask the Greffier to read the amendment as amended.

#### **The Deputy Greffier of the States:**

Page 2 - In the inserted paragraph (b), after the words "Preferred Scheme" insert the following - "to agree that the conclusions of any site selection process undertaken to date should be set aside and to request the Council of Ministers to implement a new, open and transparent process of site selection for the new Jersey General Hospital in order that the most suitable site location may be identified".

#### **2.3.1 Deputy K.F. Morel:**

I began my career - for want of a better word, it might be a very short 4-year career - as a Member of the States of Jersey not wanting to get close to the hospital debate. It was a debate I felt that I was not best placed to get involved in. There are other debates where I will. But, unfortunately, I had one view on the site and that was not People's Park and I have obviously expressed that just now. Other than that, I just want the Island to come together and to be able to understand that wherever is selected for the hospital, to be able to understand those reasons and to be able to feel that the way we got to that eventual site was done in a proper, fair, open, transparent manner. I kind of thought that is what would happen automatically if Deputy Labey's rescindment succeeds, but, unfortunately, when I was watching Channel TV a couple of weeks ago and I saw the Constable of St. John basically telling us we are going to do Overdale and we are going to decide it within a year and we are going to build there and we are going to knock down those old people's homes and we are going to build a road; that is when I stood up and said: "Hold on a second. That is not how you go about bringing the Island behind you. That is not how you go about making sure that when we finally make this decision it is done in a way that carries people with it." It was for that reason that I thought I have to exercise my small influence as a States Member and bring an amendment to Deputy Labey's proposition, just to try and ensure that if Deputy Labey's proposition is adopted, that what follows is a process that the Island can get behind. Because, if the Island does not get behind whatever process follows, we will be back here in 2 years' time and I do not want to see that. People have said this is Jersey's version of Brexit, and it is true. I have got quotes in my book here which are quotes from articles about Brexit, which work perfectly for this overall debate, and I may use them later just to remind you what they are. But we have got to end this cycle, so I ask the Assembly to support my proposition, as amended by the Council of Ministers - and I thank the Council for their support - because no matter what happens today, what results must be something the Island can get behind. So I ask you to support that because that is the only motivation behind my proposition. It is to ensure we have a transparent process, if the rescindment goes ahead, and that at the end of it, even though I am sure people will still say: "Site X, not site Y" but they will understand how we got to site X, or site Y and they can get behind it. So, I ask the Assembly to support my proposition.

### **The Deputy Bailiff:**

Is the amendment seconded? **[Seconded]**

### **2.3.2 Deputy G.C. Guida of St. Lawrence:**

I liked Deputy Morel's amendment very much 10 minutes ago. I thought it was extremely important and in the Ministry for the Environment we thought it was very important. The one thing that we thought had been a failure in the site selection was consultation as far as engaging the public from the beginning, making sure we listen to them, and making sure we took their remarks into account. Why this did not happen is because the few sites that were obvious selections, that should have been in the package, were withdrawn for obscure reasons and this Assembly, in the last 4 years, has probably not lost more of its link with the public than on this one issue. Yes, you could go into the Town Hall and have a look at a few drawings, but only the drawings we would want to show you. Yes, you could talk about a site, but only the site that had been argued in fairly small committees beforehand. Now we are asked to vote for an open and transparent process for the people after just having taken a decision for them. You just said yes, with all those sites available and there are very good reasons for and against each of them, and I do believe that People's Park is a bad idea for many reasons; aggravation probably being the first one. If it takes 10 years to persuade the Parish it is not going to happen. But we did we not leave it to the people? Why do we talk about consultation and why now are we even considering open and transparent process, when we have just closed it? I am sorry; what we should do now if we are working that way, there are only 2 sites left, let us have a big discussion and decide in the next half hour which of the 2 sites we should have, since it is obviously something we can do. Why did we not do it? Why did we not start with this instead of going: "Yes, make it into an open and transparent process but this and that, no." Now we have come up with

another amendment; no, not over there or not the Waterfront, or over there at the Waterfront, and we could have done everything here and been done in half an hour. Coming out of the building we will have exactly the same problem as the previous Assembly had. So I am sorry, it is lovely, it is a really interesting amendment and I think it was essential, and certainly in Environment we thought that this was the main problem, but you just killed it. You just killed it yourself.

**The Deputy Bailiff:**

Does any other Member wish to speak on the amendment? Then I call on Deputy Morel to reply.

**2.3.3 Deputy K.F. Morel:**

I understand the reasons behind Deputy Guida’s feelings on the subject, but I have explained my position on People’s Park beforehand, and that is that the park is not a site. It is not a building site, it is not there as a viable site; it was never an option precisely because of its nature as a park. So, because of that I have to disagree with Deputy Guida’s assertions. I am not going to drag this on, but I do hope that the Assembly can support myself and the Council of Ministers, who have accepted it, in wanting and putting down that there will be a transparent and an open process for those remaining sites - and there are plenty which do remain on the table.

**The Deputy Bailiff:**

The appel has been called for. I invite Members to return to their seats. I ask the Greffier to open the voting.

<b>POUR: 36</b>		<b>CONTRE: 5</b>		<b>ABSTAIN: 0</b>
Senator I.J. Gorst		Senator K.L. Moore		
Senator S.C. Ferguson		Deputy G.P. Southern (H)		
Senator J.A.N. Le Fondré		Deputy of Grouville		
Senator T.A. Vallois		Deputy S.J. Pinel (C)		
Senator S.W. Pallett		Deputy L.B. Ash (C)		
Senator S.Y. Mézec				
Connétable of St. Helier				
Connétable of St. Clement				
Connétable of St. Lawrence				
Connétable of St. Brelade				
Connétable of St. John				
Connétable of St. Mary				
Connétable of St. Ouen				
Connétable of St. Martin				
Deputy J.A. Martin (H)				
Deputy K.C. Lewis (S)				
Deputy M.R. Higgins (H)				
Deputy J.M. Maçon (S)				
Deputy of St. Martin				
Deputy of St. Ouen				
Deputy L.M.C. Doublet (S)				
Deputy R. Labey (H)				
Deputy S.M. Wickenden (H)				
Deputy G.J. Truscott (B)				
Deputy J.H. Young (B)				
Deputy K.F. Morel (L)				
Deputy G.C.U. Guida (L)				
Deputy of St. Peter				
Deputy of Trinity				
Deputy of St. John				



Deputy M.R. Le Hegarat (H)				
Deputy S.M. Ahier (H)				
Deputy J.H. Perchard (S)				
Deputy R.J. Ward (H)				
Deputy C.S. Alves (H)				
Deputy K.G. Pamplin (S)				

## **2.4 Future Hospital: rescindment of Gloucester Street as preferred site (P.5/2019) - as amended**

### **The Deputy Bailiff:**

We now return to the debate on the main proposition, as amended.

#### **2.4.1 The Deputy of St. Martin:**

On the 2 Tuesdays that this Assembly sat last month there were, coincidentally, important votes taking place in the House of Commons. I am sure that some of us went home from this place to watch, on television, the results of those crucial Brexit votes. Some Members will know that I have been assisting the Minister for External Relations with Brexit-related issues, and I have been grateful for the opportunity to use my knowledge of agriculture and fisheries, as well as logistics and freight to help where I can. I am also greatly indebted to the Chief Minister for allowing me to continue this vital and important work. I suspect that history may show that Brexit was the most significant European event to happen during my political career; and I am optimistic and trepidatious in equal measures as we approach, far too quickly, the end of next month. While some past Members would think back to Queen's Valley, others may think back to the incinerator. I think I will almost certainly regard the hospital as the most significant local infrastructure event to occur in my time in this Assembly. Why do I mention Brexit in this debate? The answer is because I see, if we are not careful, the whole Future Hospital issue becoming our very own version of Brexit. I am not going to dwell on the events in the House of Commons in recent weeks and months, but it is clear that finding a Brexit solution that can command a majority is proving nigh on impossible. There have been numerous options, but no majority for any single proposition; and that is what I really fear we are about to do here. We could be about to go back to the drawing board with numerous potential hospital sites, but no single option that can command a majority in this Assembly. Planning guidance is clear about building a hospital of the required size and scale that Jersey needs. None of the potential sites is likely to meet the requirements of the Island Plan. We all want a new hospital for Jersey; evidence suggests a good hospital can be built on the current site, but other sites have some merit and the decision is a political one. Wherever it is built, the need for Islanders to have a modern, effective hospital that will provide the best care in the best environment for generations to come has not changed. But we need to just get on and start building; we just cannot carry on going around in circles. In his amazingly short report, for such an important debate, Deputy Labey seeks clarity in political direction. What he will deliver, if he is successful today, is anything but clarity. Just like Brexit, where there is an unpopular proposition on the table, we also have a preferred site for our hospital. However, just like Brexit, we risk finding ourselves with many different alternatives, none of which we can agree on. If anyone thinks that by starting the site selection process all over again, we will suddenly discover a better option, the ideal site, then they are sadly mistaken. Just read the planning inspector's report. Each site comes, the inspector says, with its own set of significant adverse environmental effects and consequent tensions with the Island Plan. I have not, thus far, been involved with any of the debates and decisions about the hospital site, but I was very unhappy that Deputy Labey brought this proposition. The reason for my frustration is not necessarily planning, or building, or even the cost and our ability, at a whim, to write off £27 million.

[12:15]

My overriding concern now, more important than anything else, is the health of our Islanders. My fear is that we will make a decision today that will have a serious effect on our ability to properly look after those people living in Jersey today. If we throw out plan A, where is plan B? The answer is there is not one; we will go back to the beginning. Having to find and agree the money, a lot more money, potentially spending at least another £27 million to find, amazingly, that the current site is still the least-worst option. We will go back to the beginning, looking for another contractor and that will not be easy. Ann Court, the airport development, the hospital, all major projects that were, or are, being reconsidered at the eleventh hour. It will not be long before every major contractor thinks very carefully before even considering if they want to work for the States of Jersey again. When I was part of government, I regularly told my officers that their biggest job was to save me from myself. All too often I came up on a Monday morning with bright ideas that I thought were exciting and constructive, only to realise, after taking officer advice, that I had not really thought things through properly. Officers are employed to provide impartial, professional advice and in my experience they do that without fear, or favour. We have had years of work, reams and reams of paper and many hours, days, of advice. Surely, we cannot just on a whim say that we know better today. Have Members really read the Gleeds report from cover to cover? Have Members read the inspector's reports? There is no magic solution here. Every site is compromised. There is no best site; there is only the least-worst site. There is not really a preferred site. The current chosen site is the one we are left with when we have to exclude all the others. For myself, I am now at the point where the site selection, the size of the building and the design of how that building looks are becoming less and less important. Why is that? It is because I look at the timeline and fear the worst. We read that the Chief Minister's own hospital project development board's estimated timescale for a new site - subject to an expedited approvals process and no delays - would see a new hospital operation by mid-2028. I am not going to even attempt to guess what an expedited approvals process means, or even if it would be legal, but developing the current scheme - the current scheme - has taken more than 6 years since the approval in 2012. How the project board can make their claims on the timeline is beyond anyone with any knowledge of this type of project. They are living in cloud cuckoo land and that is being kind and parliamentary. I have the greatest respect for the Chief Minister, but when he says: "In developing the new site selection process, we will work with States Members in workshops and in consultation with healthcare staff and other stakeholders to determine which sites should be appraised, seeking to focus on a small number of deliverable and supportable sites" I hear those words, but all I translate that into is delay, and further delay. Deputy Pamplin and his team delivered an excellent report and they say if the States decide to look at an alternative site, the future hospital could be delayed by 2½ years, in reality likely to be 10 years because Islanders will have to wait until the new hospital opens, rather than the phased approach envisaged in the current project. All these dates are now likely to be pushed back further by at least 6 months. I believe that even Deputy Pamplin is being overly optimistic with his timing. Let me be clear. I think we are playing with people's health while we kick the proverbial can down the road. This is what our independent building survey told us in 2015: "Physical condition of the hospital is operational, but major repair and replacement required for both building within 3 years and engineering elements within one year. Functional suitability is not satisfactory. Major change needed and unacceptable in its present condition. Space utilisation: buildings are fully occupied, areas overcrowded, overloaded and facilities generally overstretched. Quality is less than acceptable with parts providing very poor facility. Significant capital investment and replacement required. Fire, health and safety requirements: action required in the current planning period to comply with relevant guidance." All that information back in 2015 and what did we do? We got to work. We knew that if there was ever going to be a case of not being able to please all the people all the time then this was it, but we made a decision. We agreed a good plan, not a perfect plan, but a good plan, and we moved forward. We got organised. We found the funding. We found a design team. We found a contractor and we got stuck into building a hospital that the Island urgently needs, and now we are about to throw it all away and start again. We just cannot play with people's health while we mess about with petty

personal preferences. I hear currently the mantra of: “If the previous Government made the decision, then it must be changed.” Members might think that is a little tough. Well, making big decisions is not easy. It is easy to ask for more consultation, easy to ask for more meetings, easy to have more reviews, easy to engage with more public opinion, but it is tough to get on and make the decision. In case Members need reminding, that is why we are here, to make tough decisions. Why am I so angry with Deputy Labey’s proposition and the support it has received from the Chief Minister and Council? Here is why. Here are the reasons why I will not vote for delay and uncertainty, vote for starting again. I will not vote for starting again, because the main impact of starting again will be the lack of hospital side rooms, which are integral to the new hospital design, better infection control, increasingly exposing our ageing population to cross-infection from potential fatal esoteric infectious diseases. I will not vote for starting again, because failure to mitigate against this clear and present danger by the completion of our new hospital model within the next 5 years will prevent us dealing with predictable surges in patients with community-acquired infections, while simultaneously exposing vulnerable groups to the risk of hospital-acquired infections, a vicious cycle for superadded infections and poorer outcomes for the Island’s people and community. I will not vote for starting again, because rejecting the current hospital plan will mean that patient waiting times will deteriorate for both acute and elective admissions to our hospital from the community. In addition, exceeding admission capacity leads to overcrowding, delayed services from 999 calls and eventual discharges back to home. I will not vote for starting again, because in recent years evidence clearly indicates that hospitals that are overcrowded, or at capacity saturation levels, have higher levels of significant medical errors, complications and higher mortality. I will not vote for starting again, because a potentially saturated Island healthcare system has both quantitative and qualitative negative delays for the diagnosis of cancers and other long-term chronic diseases, as well as an increasing need to transfer patients off-Island, including those that are terminally ill, those requiring basic emergency surgery, maternity services, or other children’s services. Those are not just my words. Those are direct quotes from my Group Medical Director of Health and Community Services. The example of travelling off-Island is a good one to use. It is one I think that we can all understand. I ask Members to imagine we are all at the airport, waiting to board our plane to our new hospital. The plane does not look all that amazing, but inside it is state of the art. The flight crew are second to none and we know that our flight plan will definitely get us to our destination in time. Then someone says: “I have a better idea. I think I can find a plane that looks better” and before we know it we are looking up at the departures board and our flight has gone from “As scheduled” to “Cancelled.” We all know how that feels. So, we go back to the check-in desk and queue up with the others to get on another plane and there are lots of options, but our airline cannot decide which one to choose. However, eventually they make a decision. We get our tickets and return to the departure lounge, only to look up at the board and see the word “Delayed” against our flight and then we look out of the window and see thick fog, the Met. Office telling us there is little chance of the fog lifting for days. It is too late and we are in big trouble. What Deputy Labey and the Chief Minister are asking us to do today is to drive to the airport, pay to park our cars and check in as usual, when we know full well the weather is thick fog and there is no sign of it clearing. In any case, if the weather was fine there is no plane on the apron. What a nonsense. I will not be signing up for that. I urge Members to think: if you have read the Gleeds report, if you have read the planning inspector’s reports, if you have read the advice from our senior medical staff, our financial teams, our projects teams, if you have read the advice given to Deputy Young before he made his decision to set us down this path, if you have read all those, you will know that the current site is not a wonderful site to build a hospital, but it is the best one we have. Starting again is not going to find a better option. All it does is waste certainly tens, but most probably hundreds, of millions of pounds and years of time, time that many Islanders will not have. There are well and able-bodied people in our community, out there today, listening to this debate, people who do not know at this moment that they will need a hospital in 5, 7, 9 years’ time. In 10 years people will still be using the current hospital for their medical needs and it will be totally inadequate. If you vote with Deputy Labey today, then you are saying: “Yes, I do not care, I

am happy about that.” The uncertainty of Brexit in the U.K. (United Kingdom) is deflating business confidence in the Government and affecting jobs and the economy. The uncertainty of our hospital is deflating public confidence in us and affecting the health and well-being of our population. I ask Members to think on the mess that is Brexit and I say to them: do not sign the public up to years and years of delay, do not leave them at the airport with no plane to catch. I ask Members to have some vision and look ahead to the health requirements of our people. Most importantly, most vitally, it is those people we need to think about. I urge Members to reject this proposition.

#### **2.4.2 The Connétable of St. John:**

I would like to start by thanking Deputy Labey for bringing this proposition, because it hopefully can speed up matters. Were the Council of Ministers to bring a similar proposition, we would need a 6-week, not a 4-week, lodging period, so we have already gained ourselves 2 weeks in what is the urgency of getting a new hospital. We, as is summed up in the Scrutiny Panel’s report, have 2 options. Option 1 is to agree to plough on with the current site and option 2 is to look at alternative sites. Deputy Luce of St. Martin has just alluded to the possible delays and he stated he had queries over the timeline. If I can show Members: this was the chart. This was not the hospital policy board’s timeline, this came from the Future Hospital team. I would like to say, at this stage, that they are a very able, professional, dedicated and hard-working team and they should be congratulated for the work they have done. I think it is the political direction in which they have been pointed that is at fault, certainly not their work. In producing this timeline, it shows that both the current hospital and a different site could be produced, finished, within a 6-month period of each other.

[12:30]

However, this was prior to the Planning Department, or the Minister for the Environment, turning down the current site. So, what is going to have to happen to the current site? I have already heard talk that we will have to extend the footprint of the site. To do that, possibly we need to look at taking out Patriotic Street Car Park. That is 500 parking spaces. Where are they going to go? Possibly extending more compulsory purchases down Kensington Place, in order to increase the footprint. That is going to take time. There is then the issue, if we continue on the present site, of redesigning it, incorporating the extended footprint. That is going to take time. It is more likely that instead of 2 phases of build, it will be 3 phases of build. That will cause more delays. Then there is the risk it goes back to the Planning Department, possibly to be turned down again. The reason the building has been turned down on 2 occasions is it is too big a build on that footprint for that site. So, when we come back to the timeline, the top one being the current hospital site, you can move that to the left, in other words from the end of 2027, to probably the end of 2029, so there are going to be delays on the current site. If we were to look at an alternative site, yes, it will take longer between now and putting a spade in the ground, but then the build time can be reduced from something in the region of 6 or 7 years. Six or 7 years of disruption on the current site, disruption to the current patients, to the current staff, and future patients and future staff, whereas a 3-year build or a 3½-year build on another site is so much quicker. According to this, and admittedly it is now outdated, it is likely we will produce a new hospital in a shorter timeframe than continuing on the current site. Given the urgency and the cost of maintaining the current hospital, I think that is a very real and very positive step that we should be taking. There is also the issue of mental health. If we look at mental health, what exactly is it? It is a disease, for which we have not yet found a cure. Personally, my dear mother suffered from dementia and I have seen what a terrible disease this is. But, at the same time they are still aware of their surrounds, they are still aware of where they are. As a family, we looked at moving her from a large 8-bedroom house into a small, purpose-built, 2-bedroom, over-55 house in St. John’s Village, but home was home. My mother was aware of where she was and to have moved her would have been the most incorrect thing to do. This is why mental health must be incorporated with physical health, because then people feel that they are part of the community, they

are not being segregated to some nutters' home on the outreaches of the Island. By starting afresh, this gives us the opportunity to incorporate mental health ...

**The Deputy Bailiff:**

Connétable, on reflection I do not think “nutters' home” is in any sense a parliamentary expression so I would be grateful if you would ...

**The Connétable of St. John:**

I retract that. It was a slip of the tongue. I do apologise. We have an opportunity now, by selecting a new site, to incorporate mental health into our physical health hospital. We have also heard about contractors and how we have built up a team. I have been contacted by 3 contractors on the Continent. Like them, or not, it illustrates a point: there are others out there who want the job to build our hospital. So, we do not have to remain tied to those who are currently involved. I think out of loyalty we should obviously invite them to continue, but the door is open and I think we have a duty to the taxpayer to ensure a competitive tender for the supply of such a major hospital. During our period of the Hospital Policy Board, we visited Bristol and we looked over 2 hospitals there. There was a very loud message that came across to us. You can only build on the current site if you have the staff 100 per cent behind you. That is a very important factor. When we have our survey of the hospital staff, 85 per cent of those who work in the hospital, who responded to the survey, were against building on the current site. That, to me, is a very substantial problem that needs to be overcome if we were to continue on the current site. The staff in the hospital have not been brought along with the project and, as anybody will tell you, the staff in a hospital are the heart of any hospital. Without them, you have a building that is cold and useless. We must listen to our staff. We must bring them along with us and we are there to listen to them and to take up their concerns. I have heard: “Oh, we are throwing away £27 million, we have to write that off if we change site.” As in any business, there comes a point where you have to stop and say: “Where do we stop throwing good money after bad?” We are at that point now and we must make that decision: do we continue throwing more money at this project, or do we say enough is enough, let us start with a clean sheet of paper and look at alternative sites? It has also been said that the public are fed up, this is our Brexit. Yes, they are, but I think people are fed up with the debate on the current site. This was very ably shown at all the recent election hustings and at the recent election hustings, almost a year ago now, it was very clear that the population of this Island do not want the hospital built on the current site. I am aware that 2 Parishes had a show of hands and on both occasions it was an overwhelming majority against the current site. So, with the population against the current site, with the staff against the current site, I fail to see how we, as politicians, should continue with our fingers in our ears and say: “We have made the decision already, we are going to continue” when, clearly, we are here to represent those people and it is our duty to do so. To sum up, for the sake of the staff in the hospital, for the sake of I think expediency and a rapid result, we need to change site. We need to look at the other sites and get a hospital as quickly and as urgently as possible.

**2.4.3 Connétable K. Shenton-Stone of St. Martin:**

I will be brief and I will be supporting Deputy Labey's proposition. It is clear that no-one I have spoken to, who works at the hospital, whether they be consultants, nurses, doctors, porters, admin staff, think Gloucester Street is a viable site. Why are we not listening to them? Why are we still trying to knock a large round peg in a small square hole? Gloucester Street is not the site that we should be building on. It is true that every site is compromised and it is curious that the Waterfront is not at the forefront of options as I had thought that, historically, this was a site that was going to be earmarked for a hospital. I believe the Waterfront is an ideal site, but again curiously when I spoke to some people, who felt that they were experts on hospital sites, I was told that it could not possibly be built on the Waterfront because did I not realise that flooding could occur. I then pointed out that surely flooding would occur if luxury flats were built and was told no, that was completely

different. This argument is totally ridiculous. As an aside, if someone could explain to me why luxury flats would not suffer flooding but a general hospital would, I would be most grateful. I urge you to support the proposition and please let us find a site quickly and start building.

[12:42]

## **LUNCHEON ADJOURNMENT**

[14:16]

### **2.4.4 The Connétable of St. Mary:**

Deputy Labey has outlined a brilliant comprehensive and brilliant case for not building on the Gloucester Street site. I wish to add my support to his proposition. Over the past year or so any conversation has included people's opinion on the hospital. As Constable, I have been inundated by emails, letters, and the *J.E.P. (Jersey Evening Post)* has received endless correspondence on the matter. Majority viewpoints are that nobody wants the hospital on the present site. Have local people, the thousands of eligible voters, been consulted and listened to on this? No, they have not. Have the people, who occupy the building: consultants, doctors, nurses, patients, been consulted to on this? No, they have not. We are reliant on external experts, people who have no vote. Does our electorate, our population, not come into the process of choosing a site, or choosing what they want themselves? When building, or renovating, a property, it is normal to discuss requirements with the people living in it, it is also the owners who are in this case the taxpayers, in order to understand what is required. This clearly has not been the case, which is probably why we are in this stagnant stage. It is obvious that the public do not want the hospital built on the present site. It is not the desired location. That should be accepted and the process of selecting a new location should be commenced immediately. The hospital is the Island's most important building. Everyone will use it at some stage of their life. It should be on a suitable site. It should not necessarily have to conform to planning constraints, or policy. This building is paramount to the population. It is exceptional. It should be subject to exceptions. Those of us, who were elected to this Assembly 9 months ago, were put here by an electorate who wanted and demanded change. I vowed to do that on their behalf. In fact, my election promise was: "It is not what I want, it is what you want." I am striving to achieve that. I hope that Members in this Assembly will do likewise. It is obvious that the present site is wrong. It would be wrong to continue, knowing that. This important issue needs to be resolved. This can only be achieved by starting anew. We need to do that without any further delay.

### **2.4.5 The Connétable of St. Ouen:**

It has been said a number of times before, but the issue of the new hospital site in Jersey is probably one of the biggest faced by the Assembly in a generation. I sat on Constable Taylor's review panel and have seen most, if not all, of the evidence on this project so far. One key finding stands out for me and I quote: "The board is assured that the site selection process was sound. However, due to political reasons to drop the Waterfront site, the majority of board members are not assured that the available evidence in relation to the decision of the previous States Assembly supports the proposal that the new hospital be located on the existing site." Furthermore, from the evidence that I saw, it seems to suggest that, once People's Park was no longer a viable option, only Gloucester Street was considered and all other sites were dropped. My key points are: firstly we must make a final decision on the site quickly and definitively. We cannot afford to delay the building of a new hospital longer than is necessary. However, set against this, speed is not the only consideration, as I think we have found out so far. This is one of the most expensive projects undertaken by this Island. We must get it right as this will determine our future healthcare strategy for a generation and also for our children. So why rescind the current site? I come at this as coming into this Assembly as a new Member and having seen the decision as a man in the street. One has to take a common-sense view on this. Building the new hospital on the existing site, while continuing to run a working hospital on the same location, with the risk to patients from noise and dirt, and also needing to buy up surrounding

properties, including functioning businesses - and I do not think any of us will forget the pain and grief we went through with Les Quennevais School - and running a phased project, just seems to me, as a man on the street, the most complicated, risky and expensive, decision that could ever have been made. Remember the current site on Gloucester Street has already been rejected by Planning twice. This strongly suggests that the site may present difficulties, which may eventually be insurmountable. There is no guarantee that a third planning application is likely to be any more successful. The current process did not consult patients, or staff, significantly enough. The subsequent Hospital Board survey found that the staff were significantly against the Gloucester Street site. So, why has the planning application for Gloucester Street failed twice? Firstly, the dimensions of the building were deemed to be unacceptable. The footprint for the building is too small. This has already led to a split site with Westaway Court and there are now mutterings that we may have to use part of the car park. The board expressed considerable concern over the noise and pollution affecting residential areas around Gloucester Street and patients and staff in the existing hospital. They also expressed concern about the lack of engagement with the public, staff and patients, at the hospital. The public interest test needs to be more dominant in the approval process, to ensure the correct design and site is made. So, why would an alternative site proposal be more suitable? These are some of the reasons I suggest: firstly, there may well be less impact on surrounding buildings, people and traffic flows. It is possible that building on a greenfield site could be quicker and easier. Other shortlist options may offer a greater flexibility for design and layout and may avoid the need for a split site. The existing site has already been rejected by Planning twice. Do we really want to be standing here in a year's time with a third rejection on our hands, because, frankly, that would make us all look rather stupid in my view? There is a possible need to build and extend on to the Patriotic Street Car Park and the need to make further compulsory purchases, or change the design, potentially reducing its effectiveness as a hospital, as well as increasing the costs, which are already substantial. With Gloucester Street, we can only have a phased build, whereas other sites would allow building to take place in one phase. Of course, we cannot forget that once we have built the new hospital on Gloucester Street, we would need to demolish the old one and there would be more noisy pollution for residents and patients alike. We have heard some discussion about timescales and the conservative estimate of the Hospital board and indeed the updated Friday's A3 timeline would suggest that there would be no great differential in delivering a new hospital than there would be on delivering the existing site. Frankly, that includes us getting planning consent fairly quickly, which, in my mind, is pretty unlikely. There would also be no need for a phased build, this might be quicker, and designing and building on a blank canvas may mean a quicker approval process because, frankly, we could involve Planning before we started to put firm proposals to them. Of course, we have to ask ourselves what can be done in parallel rather than the sequential process that we have followed so far? So, in summary, while like most taxpayers I greatly lament the loss of the £27 million that would go if we rescind this site, I have to say we need to accept the inevitable. I listened very carefully to Deputy Luce's arguments and I have great sympathy with his views. However, in my mind, the one flaw in his argument is the fact that we do not have planning consent for the existing site and we cannot get on with something that we do not have planning consent for. So, therefore, I would strongly urge Members to get behind Deputy Labey's proposal and allow us to get on with doing the job properly at long last. **[Approbation]**

#### **2.4.6 The Deputy of St. Ouen:**

Members will know that I have supported the site approved by the previous Assembly in 2016 and we forget the questions now being asked, the doubts and the fears now being expressed; they were all evident in the previous Assembly. We suffered the same angst then, as we do now and I acknowledged, in promoting the approved site, that the solution is not perfect. But we made a decision based on years of research set out in numerous reports laid before the Assembly. Since my election as Minister for Health and Social Services, I have sought to uphold that decision, not because I think it is a perfect solution, but because it was supported by evidence, it could deliver hospital more quickly than other solutions, and it was supported by a democratic decision. But, at the last

hurdle almost - the planning decision - we come up against a stark reality; the reality is the Island has not planned for a new hospital. No scheme will pass and that has been remarked upon by the inspector, who devoted some paragraphs in his report to our lamentable lack of long-term planning. He says: "The Island Plan does not include any content to guide a large-scale and comprehensive new hospital development." We adopted the Island Plan almost 10 years ago and very soon afterwards we had debates on the future of healthcare in P.82 and we said: "We shall build a new hospital." But when we said that, the Island Plan was not far away, just been passed, sitting there like a monolith that says that any application, according to the planning inspector, he says would come with significant environmental effects and consequent tensions in the Island Plan. So, we drove forward and planned a new hospital and we appear not to have thought about amending the Island Plan. We knew it was going to be a big building, wherever it would go, we knew it would create some planning harm, wherever it would go. But, perhaps, we went ahead trusting that our Minister for the Environment would understand that we urgently need a new hospital. In the last Assembly we came up with the mantra that we oft repeated: "Planning is subservient to health." But, the trouble is no one rebooted that monolith, the Island Plan, with that mantra. It still stood and dominated the issue, which we now realise that we do not have a scheme and we cannot develop a scheme, which will pass the planning process. We have been straitjacketed by the Island Plan perhaps, or could we be as flexible as Houdini in a straitjacket? Is there a get-out clause? Yes, there is. We can build a hospital if the Minister the Environment can find there is sufficient justification in the public interest. I am disappointed the planning inspector passed that hot potato to the Minister for the Environment.

[14:30]

We asked the Inspector to make findings and recommendations and I consider that he could and should have addressed the public interest. But, he did not and it landed in the Minister's lap and he did not like, he has said, the job he has been given to do. He was told by the inspector that there was serious planning harm and, as a result, the Minister for the Environment feels unable to say that he can find sufficient justification and grant a permission. I understand the Minister's dilemma, except in one respect - and I was surprised and saddened by the Minister's comments, having considered what impact his determination may have on the delivery of a new hospital project - the Minister said: "Unfortunately, there appears to be no reliable evidence available that provides sufficient clarity." I had hoped with the papers that had been produced and the evidence given there was reliable evidence. But if the Minister for the Environment considers there was no reliable evidence available, he is indeed setting a very high bar in any application to pass the public interest test. Fair enough, some might say, but all site options will create significant planning harm and therefore any solution comes down as to whether there is sufficient justification in the public interest to override those Island Plan demands. Regrettably, it seems to me now that we cannot simply put our hope in another site selection process and bring that to another planning inquiry. We could spend millions of pounds doing that and still have no certainty, or assurance, over how the Minister for the Environment will consider the public interest. So, I have been faced with a real dilemma: must I move away from a solution, which could have begun delivering services in a new hospital from 2021 and have all its clinical areas complete by 2025, because putting in a third planning application appears untenable at this stage and I do not feel assured that we were able to give the Minister for the Environment a lawful way of ensuring the public interest test would be met. We are at risk if we simply put in further planning applications, without addressing that public interest issue. So, I need to be realistic and very regrettably I have come to the conclusion that it is right, at this time, we take a step back to ensure that we can reach a solution, which would satisfy that public interest test in the planning process. I acknowledge that stepping back and trying to engage, once again, would give, I hope, a wider reassurance. Now, I have to say that many people, including hospital staff members, have approached me to support the approved site, but they have rather left it to me to be the public voice for the approved site for reasons which I can, perhaps, come on to. But, I do have a concern that a great deal of misinformation has been spread about, leading to a loss of public confidence among



those who give us their opinion. The more misinformation is repeated, the more it insidiously gains a foothold and becomes accepted as fact. Unfortunately, that misinformation has sometimes been encouraged by Members of this Assembly, who have become afraid to stand by a difficult decision. So I can say to Deputy Labey that Senator Pallett, the Deputy of Trinity and I, had an excellent meeting with path. lab (Pathology Laboratory) staff last week, we really did. We may have spent 5 minutes talking about what they would like to have in a new hospital. It was not a difficult meeting at all, but someone has put a gloss on it and reported back to Deputy Labey and it has been used to make a political point. I can also say to Deputy Labey, I think it was mischievous of him to read only from a preliminary report from Concerto, its adviser having spent one day in the Island and failing to remind Members of its fully-comprehensive work that it thereafter put into assisting this Assembly, in reaching its decisions, validating the site selection process and the choice of the approved site. The suggestion that all staff are against the approved site is repeated constantly. One or 2 consultants come out and they say they represent all the others. They do not. The staff are divided, like any group of people in this Island. They should not be politicised by asserting that they support one side, or the other. Let us respect views, allow other views to be expressed. I am afraid I was appalled that the staff in the public inquiry, who were brave enough to attend and speak in support of the application, were barracked by opponents. All views need to be respected and there needs to be an acceptance, because there is no perfect solution, we are all struggling to find our way through this and get to the hospital that the Island so desperately needs. It is okay to express views that others of us might not share, because they have to be weighed in the balance; that is a valid contribution to the debate. We, as States Members, must take on an important role if this proposition is passed, even if not, to ensure that public debate is moderated and is based on a balanced view of evidence. So, I have been torn, I face a dilemma and I have great concerns about the running of the hospital in the next period and the risks to patient safety. It is, perhaps, regrettable but perhaps necessary. We go back and look again quickly at the sites, what are the risks and benefits and, importantly, how we can satisfy that public interest test. If this proposition is adopted, I undertake to work to find ways of involving the hospital staff in that reconsideration and I look forward to that, because they are valuable and informed stakeholders. I wish to play my part in ensuring we have a full public participation, based on the evidence that we can lay in front of the public and work out what might meet with that greater approval. We all know that sort of exercise will confirm there is no perfect site, but we are not searching for the perfect site; we are searching for a site that is more acceptable than the rest in its technical merit, its political deliverability and that can be considered in the public interest. That is a very high bar to reach. Let us remember that, despite the comments of some, there is no dream ticket and there is no quick solution, so let us be reasonable about how we go about this. Whatever we decide today, I hope I can look to fellow States Members to continue to support the case for a new general hospital and give strong support to whatever route is best, to ensure that it will be built before the current hospital becomes unsafe to use. I am afraid time really is pressing, because there are risks to patients and the staff who care for them. So, as the Minister for Health and Social Services, I have to navigate a difficult path; I always need to be assured that the current hospital buildings are safe for patients and at the same time I know how far short those buildings fall in providing standards that would be commonplace in most other jurisdictions. The Managing Director of Health and Community Services and the Group Medical Director have set out, for the Council of Ministers, what the clinical risks to patients would be resulting from a prolonged delay to the opening of a new hospital. If I may, I want to spend some time reflecting on those risks because, if this Assembly is to adopt this proposition, I do not want it said that the Minister for Health and Social Services did not warn Members of the risks we face. Staff in the hospital need to be able to isolate patients with infection risk. The 28-bed wards in the hospital Parade block have just 4 side rooms; that is 15 per cent of public beds. It compares with a minimum standard in the N.H.S. (National Health Service) of 50 per cent of beds. Members may remember that, in the U.K., there have been 2 major hospital failures in recent years. Official inquiry reports into those tragic failures described inpatient wards characterised by patients in shared 6-bed bays, their beds too close together,

too few single rooms and facilities at the end of their functional life. That strikes me as the description of wards in our current general hospital. The bacterial infections that can arise will affect mostly elderly patients and, in the case of those U.K. hospitals, many of them gave rise to the main cause of death of elderly patients. The Future Hospital Scrutiny Review Panel report last week highlighted risks and I found that an excellent report; there are clear risks, it says, and benefits to continuing. Those risks are very serious, they should not be ignored, or lightly discounted, by States Members, says the report. But a delay does not just impact on patient safety; it impacts on the kind of care we wish to provide, because that lack of side rooms means we cannot provide the basic dignity that patients should be able to expect when they are in our care. Beds that are one metre, or so, apart, separated by a flimsy curtain, do not deliver the level of confidentiality, or dignity, that I am sure we would expect for those in our care. End of life care, when family members and other loved ones should be able to visit at any time, is clearly hindered when a patient has to share their final hours with 5 other patients in close vicinity. Now, I do not wish to make these points to cause alarm, or distress. If we support Deputy Labey's amended proposition today, we need to undertake a careful and thorough planning to remain in the current hospital for, perhaps, at least the next 10 years. The current poor standards we have are a challenge to us and we must all strive and plan and fund the improved standards before we move into a new hospital. I was pleased, therefore, to note the Chief Minister recognises that he must commit to maintaining a good standard of care for patients. As to the structure of the buildings, Members will be acutely aware of the failures there and I know many Members have taken the opportunity to take a tour and have a look around the generally inaccessible parts of the building. In 2015, an assessment of the hospital building condition, known as a 6-facet survey, was completed and this provides an industry-standard means of assessing the building. It concluded that the current buildings are not fit for purpose and it is not possible to bring the current hospital up to a modern standard and, at the same time, keep it functioning effectively. That was recognised and in recent years £2.85 million has been made available each year as the minimum annual sum needed to ensure that the hospital complied with statutory and regulatory requirements, the bare minimum. That will not be sufficient for a 10-year programme and for greater detail Members may wish to refer to my answer to written question number 87 asked yesterday by Deputy Pamplin. But, that survey has just been updated and, not surprisingly, it indicates continuing and significant risks caused by the condition of the building and highlights the need for a large amount of capital to be spent just to ensure that we comply with current statutory and regulatory standards. So, we must put together a risk-based programme of work, so that the existing hospital can operate safely until we can move into a new hospital. This programme, assuming for the moment that Deputy Labey's proposition is adopted, will necessarily include work that was deferred on the basis, the assumption, that the buildings would be demolished under the current plans. If they are not to be, we need to bring forward the deferred work.

[14:45]

Now, the cost of all this is currently undergoing internal validation, but I am advised they indicate a capital programme for the next 10 years of at least £63 million - I repeat, £63 million - to comply with the statutory and regulatory requirements alone. How on earth we manage it I do not know yet, but I am not being alarmist, that is calculated by reputable Island-based professionals examining in detail the condition of each of the buildings on the Gloucester Street site. But even that does not include inflation costs, nor costs associated with decanting services to enable the work needed to go ahead. But, clearly, we will have to spend large amounts of money each year just to stand still and keep patients safe in the current hospital. We must understand that, if we need to carry out that programme of work, it will occur inside the current hospital, not on sites adjacent to it. Unavoidably, that is going to cause disturbance to patients and staff. We have heard much, in recent months, about the disturbance that would be caused when we construct a building on sites adjacent to the hospital, but this is going to be working inside the current hospital. So, even while I have been Minister, I have received many comments, complaints, about the noise and vibration that occurs from time to

time and particularly one large piece of work recently has been the replacement of a lift and, despite all possible mitigation measures, working with all those involved, this noise and vibration is unavoidable, because work is carried out within the structure in amongst the care environment. We must also remember that, if we do not continue with the current site, the hotels that we had wished to acquire may well be sold to other developers and they will be redeveloped, demolished first of all, and redeveloped and patients and staff will need to cope with that noise and disturbance. We will, of course, put in all mitigation measures that we can, but that may well be an occurrence also. So, I have said all this because I wish Members to know that, if they choose to vote in favour of Deputy Labey's proposition, it must be in the full knowledge of the considerable and necessary work to maintain minimum standards and the associated cost of all that work. I know the staff in the hospital and their colleagues in community services, with their usual dedication, hard work and creativity, will support patients and find ways to reduce this impact, as far as they can. They will look to this Assembly for help in that care and we must not dodge the issue. So, if this proposition is adopted, what work needs to be done? We need to work to agree and approve a new brief for the project, then we have to identify and appraise and approve a new site, develop and approve an outline business plan and a funding strategy and then develop a design and gain planning approval and then build the hospital and commission it. I have not seen any evidence that says we could do this in less than 10 years, but I really hope that we can for the good of Islanders. We must attempt to do so. It is said we must have an open and transparent process and, of course, I absolutely agree. But, if we are to have that I believe that no Member of this Assembly and especially no Member who sits around the Council of Ministers' table, should be promoting a particular site at this stage. We should wait until the evidence is collected, tested and validated; then we debate and we decide. To promote a site at this stage is the antithesis of transparency. I am moving towards the end of my longish speech and I offer apologies if it has been too long but, before I end, I do want to pay warm, well-deserved, tribute to a group of people who have worked tirelessly and devotedly for up to 7 years on the delivery of a new hospital for this Island. **[Approbation]** I speak of the Future Hospital Project Team, of course. They are public servants *par excellence*, they are courteous and always completely professional in their approach. They have acquired a great deal of knowledge, which they have always been willing to share with us impartially. Any questions, they have answered thoroughly and logically. They have demonstrated to politicians and Ministers a clear understanding of all the issues involved. Yet, regrettably, sadly, they have been vilified in the media, they have been told they are pursuing their own agenda, their resignations have been demanded and even some politicians shamefully have accused them of misleading and withholding information, but have then failed to justify their statements. When I was reading through Deputy Labey's proposition for the first time, there was a stark statement, which rather hit home to me, gave me a bit of a stab in the chest, the stark statement that: "The internal team consists of 9 people and the costs associated with making these people redundant and their notice periods is estimated at up to £400,000 in the event they cannot be redeployed, or employed on the project at a newly-identified site." We are proposing to stand down those people, not because of their behaviours, because they have only ever acted pursuant to States' decisions, or on the instructions of their political oversight group. They are being stood down because we politicians have lost heart in the work they have so diligently carried out for us. Can we look them in the eye and say: "Thank you"? Because we must do that and yet I am afraid they might justifiably feel left in the cold, as they have not been asked to attend, or advise, the Council of Ministers since the Minister for the Environment gave his decision and they have been left without the support and supervision of a political oversight group since this Government was formed 8 months ago. We should acknowledge their impartial and invaluable service and give them a deserved vote of thanks and we must ensure a future team is supported immediately by a political oversight group and I would ask Members of this Assembly to ensure that public discussion steers well clear of attacks on our public servants. **[Approbation]** Members, for us discussing the site of a new hospital, it is about policy, but it is quite possible that at some day, at any day, we will need a new hospital, we will be taken there and day in, day out Islanders need a new hospital in just that way. I

have been heartened to hear much about a willingness to start again, to move on, to work together, to be open and transparent and to learn from our mistakes. I completely endorse those sentiments and I look forward, if this proposition is carried, to working with like-minded people inside and outside of this Assembly to deliver what we want for our Island as quickly as we can: a new general hospital, delivering modern standards of care, meeting the demands of our increasingly ageing population. I hope Members have understood my dilemma, my concern for patient care and the commitments we need to make to running our hospital. I hope Members will understand why I feel I can support, now, Deputy Labey's proposition and I will continue to strive and increase my efforts to ensure that we can deliver this hospital for the Island. I thank Members for their consideration.

**[Approbation]**

#### **2.4.7 Senator J.A.N. Le Fondré:**

It has been an interesting day so far and we are now in the main part of the proposition. Do not forget the proposition is to rescind certain decisions of the previous Assembly and, in the main, the Council of Ministers are supportive of this proposition and I am just going to spend a little bit of time to outline the case. To cut to the chase, just over £40 million has been spent to date and the main outcome, as far as the public is concerned, is 2 planning applications, which have been rejected. In fact they have been rejected by 2 separate Ministers for the Environment, one of whom we have heard from today already. Now, not all of that has been lost, we may cover that later, we are in the territory of about £27 million. But, just to put a couple of things to rest, let us be very clear, this Council of Ministers has not delayed the hospital construction project. It did not commission the first scheme, which was rejected by the independent planning inspector at the time. It did not commission the second scheme, which was lodged just before the elections. We have not interfered in the planning process. We have not directed the Minister for the Environment what he should, or should not, do. The independent planning inspector was not appointed by this Council of Ministers. If we had interfered in the project, we would have been heavily criticised, no question, so the planning process has run its course. While that process was taking place, I put the board in place to have a look at things: 6 Members, a mixture of old and new, some with political experience, some with practical experience, of whom 5 agreed with each other and one did not at the time, and that is called democracy. It also means there are 6 exceptionally well-informed Members concerning the project. I was a little bit, I do not know about, disappointed, if that is the right word, about the Deputy of St. Martin's speech when he talked about throwing out plan A on a whim. Well, plan A has been thrown out twice and that is where we are. Or we could say plan A and plan B have both been rejected. So, the argument could be that decisions made in 2015 are the ones that have cost us, in net terms, around £27 million, which will have to be written off. But, what we have to talk about, as part of my speech later, is where we go from now. It has been alluded to a little bit, there are people in the Assembly, or there will be, who just want to get on with it. We have had enough delays, just do it. The problem is we cannot just do it and that is for a number of reasons. Again, number one, we do not have planning permission. Each application, thus far, has taken around a year each time. We therefore need to understand the reasons why and what can be done about it. That includes understanding what might be ways of meeting the public interest test and whether it is less strong on other sites, or not, or just different. The other thing, number 2, the previous Assembly voted for 2 propositions, which are the subject of this debate and those, broadly speaking, have tied us into knots. So, by way of example, the 2016 proposition approved the site location in accordance with a map. That map had, what is referred to as, the red line, which marked out the site and I am being simplistic, but, basically, the Assembly approved the footprint of the building. I emphasise, as ever, there is a difference between the strict legal position as to what Ministers can and cannot do and what is the political position. I did refer the relevant review panel to some initial thoughts received in correspondence before the elections, there is a view that should the project materially exceed, i.e. go outside the red line significantly, it might not be in accordance with the decision of the Assembly at that time. It would, therefore, mean that a proposition might have to be brought back to the Assembly

and that is delay. But, that is where Deputy Russell Labey's proposition avoids this, because it does not preclude us coming back to Gloucester Street, should that be necessary, but, if we had to, it would be unencumbered by previous States decisions. It would be a clear position from which to move forward. So, at this stage, this is not about what site is best, it is about recognising that we have had 2 planning applications rejected and how we move forward. So, by way of example, in terms of some of the issues we may face in the future, officers have already been mooting expanding the site, including possibly taking out Patriotic Street Car Park, I think the Constable of St. John referred to that this morning, in its entirety. That is as a possible extension to the scheme. Now, I would say I think that could cause even more issues around delay relative to even now.

[15:00]

The other thing I think we have to remember is the public and I do share quite a lot of the frustrations expressed by various sections of our community. Frankly, it is with a certain sense of irony that I say the next few words; the definition of madness is doing the same thing over and over and expecting a different result. I think that was the phrase that the former Senator Green used to use, standing not too far away from where I am now. The current site location on Gloucester Street has already been rejected by Planning twice and Members must surely acknowledge that strongly suggests that there is something wrong with the site, as presently constituted. So, having spent £40 million and not achieved a planning permission, is the public really going to countenance going back for a third bite of the cherry without even remotely having reconsidered whether, in the light of a different approach, alternatives do exist. That is saying that we need to do these things differently and this proposition, in my view, is the start of that process. Then we have the staff and what is very clear is that, for whatever reasons, staff engagement has not worked. When over 80 per cent - and this is in relation to the survey that the board put in place, and that is just under 600 staff - of those who responded did not support the present site, we have an issue. It is not 10, or 20. It is just under 600, if my maths is correct. To give one quote: "The current site is just not suitable. The disruption to staff and patients is too much to bear." So, while the response rate, as I said, is small relative to the entire health staff, i.e not just the hospital, it is recognised as being very clear and sound. What is also clear - which I do want to make reference to - is under the previous regime, disciplinary action was taken under certain circumstances when a dissenting opinion had been voiced. So, firstly, I want to thank the new regime for beginning to address that as a culture. It was previously completely unacceptable and, secondly, to thank those staff, who did take part in the survey and certainly I do value the views expressed. Also, it is on both sides, absolutely, and the Minister for Health and Social Services is correct, but I do thank those clinicians, who have taken the brave decision to express their professional concerns on both sides of the argument and to do so publicly. This is about getting things right moving forward positively, swiftly, but properly and we are committed, as a Council of Ministers, to providing a new hospital. We are committed to implementing that within the shortest practical term. Now, there have been some remarks - and I am afraid I am going to spend a couple of minutes on this - about: "Where is the evidence?" Well, at the risk of repeating myself, the fact that we do not have a planning permission should speak for itself. It is not a figment of my imagination. I want to spend a couple of minutes on the planning inspector's report. Do not forget these are independent remarks, from someone who has considered all of the evidence placed in front of him and I think it is helpful, because it is a long document, depending on the interest of members whether they have gone through it, or just read a couple of pages: "There were will be tangible negative impacts, notably in Kensington Place, Newgate Street, Patriotic Street and when viewed from approaches from the west. Some of these impacts will be dramatic and adverse." Possibly an important point. "There remain questions over whether a truly successful detailed design can emerge." I think that is applicable to the whole site: "These also arise from a primary design, which pushes somewhat beyond the urban design comfort zone." I am obviously summarising as I go through: "The proposal breached the relevant policies, which were listed. These breaches would normally lead to refusal of planning permission. The impacts on heritage, in this instance, are harmful

and unacceptable in planning terms. The proposal would, of course, also cause permanent harm to the settings of various listed buildings. Each of the instances have identified harm and represent a breach of policy. These policies breaches weigh against the proposal.” Possibly more interesting. “Residential properties [and they were listed] will suffer notable reductions in daylight and, in some cases, these effects will be exceptionally severe. Essentially, they would be unreasonable. This weighs against the proposal. My eighth finding, also one I think important, concerns demolition and construction impacts. If permitted, this major demolition and construction project would result in widespread and protracted impacts on neighbouring homes, businesses, the existing hospital itself, the local road network and wider area. They are not matters that are political to the determination of an outline planning application. However, they are clearly matters that the applicant and the wider States Government must recognise. However, there are realistic alternatives that could deliver the hospital and avoid most of the construction related impacts but, as we know, each would come with different adverse environmental impacts, effects and consequences.” To continue, the inspector goes: “These are impacts that the Island Plan directs will not be allowed. Also weighing heavily against the proposal, we get repeat significant harmful impacts on the amenities in numerous residential properties. These impacts are unreasonable and, again, the Island Plan directs that the development should not be permitted. These impacts, in my view, are a product of the site being not quite large enough to comfortably accommodate the proposed scheme and, again, the relevant policies instruct that the development should not be allowed. A consequence of implementing the proposal will be significant to protracted impacts associated with demolition and construction. This is an important matter to recognise. I do not regard it as pivotal to this planning determination.” So, there is a difference between noise and disruption generally on the impact from a planning perspective, but the inspector is saying that it is a wider concern around a planning concern: “The adverse impacts and effects are significant and demonstrable and are matters that are fundamental to the Island Plan and, indeed, the law. Put simply, the plan says that developments that have the adverse effects I have identified will not be permitted. As a result, a logical planning conclusion guides the decision maker to refuse planning permission.” I will go into this a bit more with the details. Interestingly enough and which I thought was interesting in terms of approach, there is a thing called the vertical sky component, which seems to be the amount of daylight, or sky, you get and the inspector notes: “The applicant explains that consideration should also be given to the level of V.S.C. (vertical sky component) residents might reasonably expect to enjoy and points out that a number of streets currently enjoy a relatively open aspect and that some of the affected households are currently enjoying more daylight than is normal for such known concepts.” Essentially, the argument is that because they are getting more daylight than they should normally get in that area, it is not a problem to take it away. The inspector does carry on: “I am not convinced by these arguments.” Then he goes on to the noise and disturbance again and this is in the main body of the report: “I have received a significant body of representations concerning the effects of demolition and construction of the hospital itself. These are clearly genuinely held concerns and include views of health workers and doctors about the implications of maintaining effective healthcare services, working conditions and a quality patient environment in the immediate proximity of a large-scale construction project.” The point he makes is that planning conditions could be imposed, to ensure that demolition and construction activities are properly managed. However, even with these management regimes and measures in place, there will be negative impacts and disruption throughout the implementation period. The other thing which is, again, picking up on an earlier comment, but it puts it a bit more bluntly, I think: “First, it is important to recognise that the submitted scheme has no obvious future physical expansion potential to accommodate significant additional floor space.” He reiterates: “My assessment is that, in planning terms, there is no one standout alternative site option that would be clearly superior in planning terms. However, there are a number of realistic alternative site options that could physically accommodate the new hospital. Clearly, each of these would avoid, or at least radically reduce, the adversity of demolition and construction impacts, including the disruption to the existing hospital. There is no perfect site, but there are alternatives that could deliver the hospital

project with different environmental effects and consequences.” I am getting to the end of his report. It was quite long, but I think it is worth reiterating these, because if Members have not read it, there are a lot of points which are worth making. He does make the point that, I think, we are probably all realising: “The planning issues and implications concerning the development of a new hospital in Jersey are some of the most complex and difficult the Island is likely to face. The issues really do represent a once in a generation moment and the consequences are profound and far-reaching. Planning is just one part [albeit a very important one, in my view] of that once in a generation decision.” So, then he goes on to the key findings: “Absolutely the first finding is the need for the new hospital. It is supported by evidence and it is widely accepted.” I would hope there would be no dissent from that in this Assembly: “Notwithstanding the positive aspects of the design, the proposal would breach the relevant policies, which were listed. These breaches would normally lead to a refusal of planning permission.” It talks about heritage: “The proposals involve material breaches of planning policies, which seek to protect Jersey’s heritage from harm. These impacts are harmful and unacceptable in planning terms. These policy breaches weigh against the proposal and would normally lead to its refusal.” Amenities and neighbouring properties: “The proposal has breached certain policies and this would normally lead to a refusal of planning permission.” Again, the eighth finding, demolition and construction: “I assess that, if permitted and implemented, this major demolition and construction project would result in widespread and protracted impacts on neighbouring homes, business, road network and the wider area.” The eleventh finding, I think, again, we said it: “There is no obvious alternative site, but there is no perfect site but there are alternative options capable of accommodating a new hospital. Each would bring a different set of adverse environmental impact effects and conflict to the Island Plan.” I think the point is, as has been referenced before, with Les Quennevais, we anticipated and we put provisions into the Island Plan to make sure that could be accommodated and when we are looking at process, that might be something we need to keep at the back of our minds: “In conclusion, the setting impacts would be severe. These are impacts that the Island Plan directs will not be allowed. There are significant harmful impacts on amenities and numerous neighbouring residential properties. These are unreasonable and the Island Plan directs that the development should not be permitted. These impacts are, in my view, a product of the fact that the site is not quite large enough and, again, the relevant policies instruct the development should not be allowed. A consequence of implementing the proposal will be significant and protracted impacts associated with demolition and construction. This is an important matter to recognise.” That is a theme that goes all the way through the report, I would suggest. Well, it certainly appears on a number of occasions and we must not lose sight of that. “Put simply, the plan says that developments that would result in the adverse effects that I have identified will not be permitted. As a result, the logical planning conclusion is planning permission should be refused due to the significant planning harm that will be caused.” He then reiterates: “Despite the progress [which is saying it is an improvement], significant planning harm would still result and, as we know, the recommendation was that it should be refused.” Bluntly, not much of that makes good reading and it demonstrates the issues in front of us. Now, I have been a sceptic of the scheme on the present site and I can now remember it is mainly because, in the past, it was a cheaper option and, in the past, it was around £20 million by going on to a different site. I will say my perspective on all that has changed. It was partially as a result of the work of the board, because what happens if changing sites does cost us more money? Let us put it this way around. As we have heard, and I think it is an evidential position, because it is from an independent inspector: “Noise and dust and disturbance will be a factor of the work if on the present site. The patients in the hospital do not have any choice. Whether they are being born, are recovering from an operation, or if they are sick and dying, they will be there and they will be enduring the significant noise and the vibration and disruption for all of their stay and, potentially, that disruption will continue for many years.” I just want to talk a little bit about timescales and it is just to be clear - and I am sure Deputy Pamplin, hopefully, will agree with me - there was never an issue around 2038 as a potential delay. In terms of the information I have had so far, any project can still be completed before 2030 and that is in the

context of the present dates which, on the data I was given, were the end of 2027, beginning of 2028, or mid-2028. Those are the dates before the rejection of the planning application. I think, again, it is worthwhile just reminding Members. Some will, hopefully, have picked it up from what the Connétable of St. John was saying, which is that little diagram that is in the comments from both Scrutiny and from myself, as well. That particular timeline was granted to me by the Future Hospital team back in October and it covers 2 scenarios. It covers the present site on the top half and a notional new site at the bottom and so, on this schedule, the present site had a 9-year programme of demolition and construction. It was a phased delivery period. The Minister for Health and Social Services has referred to it which would have meant the delivery of some parts during that period, earlier. The timeline for a different site was a 4-year build programme, but delivering at the end and that was always the dilemma that the Minister for Health and Social Services and the Minister for Infrastructure were grappling with. That allowed around a 5, 5½-year period to select the site, get planning, outline business case approval, procure and then start delivery and it is a very sequential process that people have allowed for. Now, there are various estimates as to how long site selection and planning approval can allow for.

[15:15]

Much of that time seems to be built into the time schedule that the future planning hospital team put together. So, if we were able to do procurement differently, for example, in parallel to the process run sequentially, then we could shorten the timeframe. The present site is now going to be delayed for at least a year, to 2 years, depending on the level of public engagement; how long it takes to get a planning application in place and the staff engagement. We are already, therefore, somewhere into 2029. As has been referred to, a couple of us did and were advised a revised timeline had been updated, but that still seems to show that any new site will not finish later than the existing site and the timeframe, at present, looks to be before 2030. Anyway, how do we move forward? This Council of Ministers has committed to a new hospital. We have committed to implementing that within the shortest practical time. We will be establishing how to improve the political approval process and depending upon the outcome today, everyone will be receiving an email later today, or tomorrow, to arrange some meetings in the week commencing 4th March. That is the starter for us, moving forwards. We also need to consider the planning process. For example, the interactions of the Island Plan. What scope is there to improve that approval process? There have been discussions that have already started on that front, but both the political and planning processes may well need the formal direct involvement of this Assembly. We will have to see where that goes. As I said, finally, there is the procurement process. If they can be done in parallel, rather than in sequence, there may be scope to make that process more efficient and to reduce time. I am starting to sum up. I think the observation I would make and it was made to me by one of the main people I have met in my time in office to date. It was a visitor to the Island and they made an observation and they did not want to comment on the politics on a very large project, but they put it like this. They had been happily married for a very long time. The closest he and his wife ever came to getting divorced was when they decided to do some major works on an old house they had bought, but while they were living in it. I think that almost sums part of the problem we have been facing up. Political engagement will start immediately. Staff and public engagement will be a priority. We will issue a detailed programme of timings and works once the political engagement has commenced, but by supporting Deputy Labey's proposition, we can start that work today. This is about doing things differently; swiftly, but properly. Continuing to do things the same way is not an option. We cannot afford to have the same results. We cannot afford to go back to the same site, without having at least considered a different approach elsewhere. We must not be hidebound. We must recognise that over the last few years this project has not progressed to where it should be. Our objectives have got to be to deliver a new hospital, as quickly as possible and as economically as is consistent with the sort of hospital we want to have. This is about delivering an excellent facility, a well thought out facility and one in which the public and staff can be proud of. That is our commitment, as the Council of



Ministers and that is my commitment to you, as Chief Minister. For all of the reasons I hope I have outlined, I do urge you all to be supporting Deputy Russell Labey in his proposition.

#### **2.4.8 Connétable D.W. Mezbourian of St. Lawrence:**

I had not prepared anything on this today, but it seems to me that this is a drama that has been many years in production, which today we have had another performance of. It is a drama that, in my mind, has shown us 2 leading men. Deputy Labey, the thespian, the consummate performer. He brings drama. He tells us it is imperative and urgent to remove the preferred site. He tells us that the nightmare continues. He speaks of the scale of disquiet among hospital staff. He is alliterative. He speaks of a catastrophic catalogue of failure. He delivers those lines in an authoritative tone. He requires our attention and he has it. I wrote down quite a lot of what he said. Then we come to the words of our Minister for Health and Social Services, none of which I recorded. So, why is that? It is because I was listening attentively to what he had to say. He was quietly delivering a reasoned, knowledgeable speech in the tones of the lawyer that he is. I wrote down my thoughts on his delivery, if not on the content. I wrote down: "Calm, considered, reasoned, reflective, informative." It was everything that I wanted to hear from our Minister for Health and Social Services. What was interesting is, he has changed his mind. He has changed his stance on what he thinks is the correct site for our new hospital and he gave us the reasons for it. He has reflected long and hard. He has looked, again, at all the evidence and he has continued to engage. I applaud him for coming to that decision because it is never easy to say: "I have changed my mind." **[Approbation]** I applaud him, particularly because it is what I have done; because I, too, have changed my mind. A number of us here today, in the last Assembly, voted for our preferred site as Gloucester Street. We were not to know that there would be 2 planning refusals. No way would I have voted for Gloucester Street had I known that that was going to be the case. We voted for it, because we were told that it was the best site and we had been to many presentations and we had read hundreds, if not, thousands of words. We had spoken to consultants. I must admit that the consultants, who were brought to speak to States Members, were all of the view that the hospital should be rebuilt on the Gloucester Street site. At that time, I had not spoken to a consultant who disagreed with that, but, since then, I have done. I have engaged with nurses at the hospital and with consultants, who have spoken about their disquiet at the fact that they would be required to care for patients, literally, within what would be a building site. We have also had the very many pieces of correspondence in the *J.E.P.* and, of course, we have got to read that and on social media. We have had representatives at the Comité des Connétables and we listened to people. So, anybody who wants to come and speak to us and put your views, you are more than welcome. We listened to those voices, who opposed the preferred site and we questioned them and we welcomed the paper that they gave to us. So, I am like the Minister for Health and Social Services. I have changed my mind on what we have on the table in front of us. The Minister for Health and Social Services rightly has drawn to our attention the medical risks that may be associated with delay and we cannot overlook those and it would have been wrong of him, as our Minister for Health and Social Services, to not do that. He was absolutely correct. It was similar to what Deputy Luce did, when he spoke earlier this morning. He listed, again, a number of reasons why he will not be supporting the delay and, effectively, it is about patient care. It is about the care that we give, or that is delivered on our behalf, to the public of this Island. I think the Chief Minister just said that the patients, at our general hospital, if we build on the current site, would have no choice but to be in that hospital and the staff would have no choice but to deliver their care within that site. On reflection, that cannot be right. If this proposition is adopted and our thespian sums up, I am sure he will do his best to win everybody around, if he does not already have our votes and our support. If this proposition is adopted, we will have to rely on the Council of Ministers, the Council of Ministers that we elected, to progress this and the Chief Minister, when he spoke a moment ago, touched briefly on that process. One thing that struck me this morning, when Deputy Labey spoke, was that he said: "We need a political supremo to lead us" and we probably do. We need somebody to stand up and fight for this and deliver this and someone who will carry us all with them, but not

only us within this Assembly, but the general public, because that is what has been lacking, as we have heard from a number of speakers today. We do not act in isolation within this Assembly, because we are acting on behalf of everyone who resides in this Island. The decisions we make here, as we well know, impact upon everybody. The 100-plus thousand. I think we have a political supremo, who can lead on this and, in my view, that is our Minister for Health and Social Services and he is the person who should be delivering this, who should be leading on this and his authoritative words earlier, the way in which he delivered his views to us, have made me decide that he is the right person. He is the Minister for Health and Social Services. We elected him. We elected him to do a job on our behalf and on behalf of the Island. What is a supremo? I did not have time to look up the meaning of it, but it seems to me that it is that person. It is that quiet person, who listens to others, who is knowledgeable and who is prepared to change their stance, if necessary. Having heard him today, that is our Minister for Health and Social Services who, to me, is the right person to be leading on this. I think it is clear that I have also changed my mind. I am supporting Deputy Labey's proposition and I do hope that other Members will give consideration to supporting it too and I must say I applaud our Minister for Health and Social Services for his ability to stand up and admit that he has changed his mind on such an important matter. You have to lead by example and he certainly has done. **[Approbation]**

#### **2.4.9 Deputy K.C. Lewis:**

Into the lion's den. **[Laughter]** Well, Members will be delighted that our Minister for Health and Social Services said much of what I was going to say, so I will cut my speech down by about 10 minutes. We need a new hospital as soon as possible and few people will argue about the need. When I became Minister for Infrastructure, I took over the responsibility for progressing the wishes of the Assembly, as agreed in December 2016 and December 2017.

[15:30]

The preferred site's location was Gloucester Street and the funding was approved. A planning application had been submitted for consideration. My job, as I saw it when I took over in June last year, was to push on with the project, as instructed by the Assembly and that is what I have been doing, in association with my client, the Minister for Health and Social Services. Last month, we came really close to reaching the important milestone of getting planning approval. Getting it right is really important. That is why you have such a stringent planning regulation. The test, under the Island Plan, sets a high bar, even with a consensus view from Members that planning should be subservient to healthcare. That bar must still be overcome. The proposition by Deputy Labey is looking for a better site that would deliver a new hospital. But, what does that mean? There is a huge variety of opinion on the best site, both in the Assembly and among the general public. The criteria for reaching their opinion is also varied. There is no stand out, better, site. The Constable of St. Helier thought it was People's Park and promptly asked the Assembly to take it out of contention. So, how do we measure better? Would it not be a good idea to use Gloucester Street at least as a benchmark? My reading of the proposition and the legal advice we have received, is that if it is agreed, as a proposition, we go back to the point where we were in December 2016, before Gloucester Street was the preferred and then the approved location, as adopted by the Assembly. The Gloucester Street site is, therefore, not off the table. Its designation under the Island Plan has not changed. Its ability to provide a new hospital for the Island has not diminished. If the proposition is approved and site selection is revisited, then we should compare alternate sites to what can be achieved at Gloucester Street. As I said before, we need a new hospital as soon as possible. The longer we dither the greater the need for a new hospital. The situation does not get better, it gets significantly worse. As our ageing population grows, there will be greater pressure placed on the existing facilities. People will continue to be treated in 6-bedded wards, without the privacy and dignity they deserve. Urgent and necessary reforms to our healthcare system will continue to be hampered by the lack of fit-for-purpose facilities. I feel the political responsibility for providing these facilities. I am

conscious of the urgency and the need. The last thing I want for the people of Jersey is delay. If this is the path that Members wish to take, then they must do so with their eyes wide open. We know the current hospital is struggling in a number of areas. We have commissioned a 6-facet survey to understand how we can support the hospital through the next 10 years. The initial report shows we will need more than £60 million of investment over that period. The States provide less than £3 million a year to address the most urgent of these. This sum does not even scratch the surface. At the end of that period, all that maintenance investment will be written off, but we cannot risk under-investing in our services. We must be clear here and now, we must make a commitment to supporting the hospital until a replacement is delivered and that will cost a significant amount of money. Let us not be fooled by thinking we can do this on the cheap. You cannot build a 60,000 [square metre] hospital, a new one, to N.H.S. standard, with all the attendant fees, enabling works and other costs for £90 million, or even £200 million. We can ask the people who build them in the U.K. The consortium we had on board, J3, have a wealth of experience and understanding and that is crucial for successfully delivering such a large and complex project. Will they wait around while we spend years getting planning approval on another site, if indeed we can? If we lose them, how easy will it be to put another team together? How will they view Jersey as a client able to get projects off the ground? Members have to think very carefully about the impact of their decision today. There are a lot of implications and I hope Members have thought through the whole thing before they vote today. It is a huge responsibility. We have a hard-working professional and dedicated project team, who have brought forward proposals for developments on the current site, often in very difficult circumstances. Bringing forward a large-scale project, in a small Island, with limited space, is no simple task. We have been here before, recently, with the new school at Les Quennevais and with the police station before that. It is normal for large-scale buildings, in both public and private sector, to require several attempts to reach an acceptable position so that planning approval may be granted. I will mention briefly our French cousins, who have been mentioned, as they could do it much cheaper. I believe the tender was open and no tenders were put forward. It is a different standard. French hospitals are built to a different standard and we have to build to National Health standard. The French are very good, we used them for building the Energy from Waste plant, but I believe no candidate was put forward. If Members want to look at overspend, you just have to Google 'Children's Hospital, Dublin', which I believe is a record in overspends, they are now up to €1.4 billion and it is still not finished yet. That is €1.4 billion. So, in conclusion, my natural inclination is to vote against the Deputy's position, but I also listened to Members and I understand the mood of the Assembly. There seems to be an appetite to do some work in a short time to determine whether any of the other sites are indeed better. I can live with this. An assurance that the current site remains a site of consideration would be expected. The advice I have received, legal advice, is by adopting the proposition, the site simply loses its preferred status. The funding proposed in the Minister for Treasury and Resources amendment, to wind down the current site. is sufficient to also consider what we need to do to mitigate and address the shortcomings of the planning position on the current site. We should use the time we spend looking at other sites wisely, so that if, with due consideration, we return to the current site, we are ready. I am not being intransigent, as I said before ... is it panto time already? But I work, as directed by this Assembly. If the Assembly directs me otherwise, then that is the course I will follow. Perhaps most importantly, throughout the next steps on this project, wherever it goes, we commit to provide the necessary support and resources to ensure our hospital services continue to be safe for all. We are told that it is likely to be 10 years before we provide any new facilities, should we develop a new hospital on an alternate site. That is not in the lifetime of this Government, nor that of the next. What this debate ably demonstrates is we cannot bind the hands of future Assemblies. We must do what we need to do, with the forthcoming Government Plan, to put health and the acute services at the very top of our agenda and send a clear and unequivocal message to future governments. If I can get those assurances, I am able to support the Deputy's proposition.

#### **2.4.10 Deputy L.B.E. Ash:**

As Deputy Lewis just said, this morning we saw almost universal approval for where the best site is. Then, for a number of reasons, we voted against it, which I think shows the size of the task we are going to have in front of us when, as I expect, Gloucester Street is delisted as the preferred option. Another example of that sort of muddled thinking we are going to have to get through was again showed in this morning's debate with the consultants. We need the consultants. Everybody feels the consultants have to have a say. Having looked through their qualifications, I do not see that any of them are chartered surveyors, or structural engineers, although we were told one of them makes a great curry. That is great. I do not think we have asked the owners of the Raj Moni, or any of the Indian restaurants what they feel. It is an irrelevance. But then, later on, of course, we went to where we were told - People's Park - that is where the consultants do want to go, but they were irrelevant then because they just want to go to People's Park because it is an easy walk. We cannot have it both ways here and this is the way we are always looking at it. Someone once said that this is our Brexit and to an extent it is. It is more like a "Carry on Brexit". If that is the case, the Deputy of St. Peter has played an excellent Boris Johnson, the Constable of St. John is like a rustic, agricultural, Nigel Farage. If the Dean was here he could probably ask whether Donald Tusk has any plans for them. Away from our cadre of hospital planning experts, that are growing by the day in this Island, many of the public now laugh about this whole situation, as we saw when the news went around. When the planning inspector said it was not a goer, they went around and said to them and anybody who watched the news: "Have you heard that the planning has been turned down for the hospital in Gloucester Street." To which the woman gave a massive laugh and goes: "Well, that is a surprise, is it not?" She found it very amusing. It has become almost a joke. Someone said to me the other day: "I am really not that worried about the hospital, I am more worried about Pitcher & Le Quesne, because I am much more likely to use them than I ever am a new hospital." But, strangely - and it is a strange thing when you come to using humour - sometimes people lose that sense of humour, because when you tell them the hilarious punchline, a very good punchline, that we lost £27 million on this, they lose that sense of humour completely. I do not blame them, because, as I put in my manifesto and it is worth reading - I did not have the manifesto of Reform size - I think this is quite salient: "£23 million spent and climbing on a new hospital. In 2022 do you want this to be another £23 million spent and not a brick laid? Your money, your vote." What we forget in here, at times, it is taxpayers' money we have just wasted. When we had all this backslapping, which we did, and let us face it, from certain Members in here: "Oh, we have rejected the hospital plan, is it not great?" It may, or may not, be great, but it was not a great day for this Assembly, it was a very sad day for this Assembly that we have gone down that route and lost £27 million in doing it. Let us accept that. It is also why I voted against Deputy Morel's proposition this morning, because I felt that sends us back on the merry-go-round. We cannot get back on the merry-go-round. The one thing I would stress to the Assembly today: we have to make a decision, we have to go with the decision, we have to show the mettle that we must have to see that decision through. We cannot be back here in 2 years' time, having spent another £27 million and say: "It did not meet planning approval, what a shame." That would be criminal negligence and it must not continue. I will, however, be backing this proposition because, as the Chief Minister said earlier, to go round and round, back again, expecting a different result, is a definition of madness.

#### **2.4.11 Deputy M. Tadier:**

If it is "Carry on Brexit", or probably, "Carry on Hospital" then perhaps Deputy Ash is the well-loved Bernard Bresslaw. Maybe there would be Senator Ferguson as Hattie Jacques and the Minister for Health and Social Services is Kenneth Williams. I am tempted to say: "Ooh, Matron" after that, in a high-pitched voice, but I will not. It is not really a laughing matter and I just want to put this back into the context and ask why and how did we get here. The choice of the hospital site is a political decision. It sounds like there has been some kind of deal done in the last few days and we have just

heard that the Minister for Health and Social Services is backing this. We have heard some reluctant support from the Minister for Infrastructure.

[15:45]

I would not want us to be under any illusion, because I think if we support the proposition today, even in its amended form, what we are saying is that we do not want the Gloucester Street site and I think that is the right thing to do. I think the Minister for Infrastructure should take that into account. I certainly remember sitting in this Assembly, with the previous Minister for Health and Social Services and sitting through the presentations in the last Assembly under the other Administration and we were quite clearly told that the best sites were the Esplanade and People's Park. As my colleague, Senator Mézec, said, People's Park was taken off the table, because it was not politically viable. We have been through that debate. We were told, at the time, that the current site was the worst option. We were told that; I remember that. Then, suddenly, we are in a situation where the current site is the best option and I have already said this, I said this when we debated it previously. I think that should be remembered, because I think that is the problem: that the trust, a long time ago, has been lost both in this Assembly ... or it should have been lost in this Assembly and certainly by the public. So, it is quite understandable that the reaction of comic stoicism that Deputy Ash encountered from his constituent, or from the person he was talking to, when she laughed and said was that not a surprise that the application had been rejected, was one of, I would say, stoic resignation, because she knew that it was foolish to even submit plans which do not necessarily have public support, or which are not going to work in the first place. I ask the question again: when are we going to amend the Island Plan - it has to be done within this term - to allow for exceptional buildings like the hospital? It should have been done already, but it certainly needs to be done very soon. There was talk about a champion for the hospital. We should not be in a situation where we need a champion for the hospital and where we have to choose who that is and whether it is the Minister for Health and Social Services, or someone else. What should happen - and hopefully this episode is going to act as a lesson for the future - we are told, are we not, that party politics does not work in Jersey, and I will allow for some eye rolling, because I am afraid I do have to say this. I think it is part of the systemic problem we have in Jersey: party politics does not work, the Island is too small. Well, independent politics has done us just fine, has it not, over the last decade? Where it has got us to the point where we get a gaggle of Ministers and for the first time - what is quite interesting - in 70 years we have had a change of Administration. We know what the previous Administration was like and we know why the best sites were taken off the table. It was not because of the public interest, it was because of private interest. It was because we had a site down at the Waterfront, for example, which was the best site, which could have been put to use for the public interest, which is very central, which is accessible by north, by east and by west; you do not have that issue with the tunnel, you do not have the issue with putting it on a hill, you do not have the question of putting it out of town, but no, that site is too valuable. We could not possibly give a site so valuable to public interest and to public use. That has to go for luxury flats, to be enjoyed by the privileged few, even though it is administered by an arm's length company, which we own on behalf of the public. That is the problem. It is because this whole process has been flawed and it has been one of greed being put over the public interest. I think that has finally been recognised. So, when we have people telling us: "There are going to be delays here" the delays are because of this flawed process that has taken place up to now. Now, I am not saying it should go down on the Waterfront necessarily. I am not a hospital expert, which unfortunately makes me stand out from the other 99,999 people in Jersey, who are hospital and planning experts - I say that tongue in cheek - I know that we have some very good people, who have looked and worked at the hospital, not just inside the States and working for the States, but in civic society as well. I do find it slightly strange when we are told do not blame this team who have been working on it. I think that is right, we have to blame the failed politicians of the past, who could not get to grips with this. But you have to ask why work has been going on in a vacuum, where there has been no States decision. We know that there is this on the table, but yet

work has carried on, sites have continued to be bought. I am more interested in looking to the future. I see this very much as a question of not throwing good money after bad. Ultimately, we may have bought some properties around the hospital site, but they are not lost. They are still, now, in public ownership and it may well be that, in the future, they can be used. So, I do not think I need to say anything more on that. I think it is good that this debate has transpired and gone towards a point of more consensus, and more power to Deputy Labey's elbow on this one.

#### **2.4.12 The Connétable of St. Brelade:**

States Members have, subsequent to their election, been barraged with multitudinous reasons why our Future Hospital should not be built where the previous States Assembly democratically voted to build it: on, or around, this existing site in Gloucester Street. We have heard lots of personal opinion, some well-researched, some completely misinformed. However, I know that those, who have got in touch, are passionate about getting the hospital project right, as we all are, not only for ourselves, our children and grandchildren. I was pleased, as I had a grandson born there on Saturday and I do hope that we see the hospital before too long. **[Approbation]** My interest and experience is in the siting and building of the structure and I can draw from the process of constructing the energy recovery facility at La Collette. Interestingly, there are remarkable similarities with the scenario we are dealing with today. A much-discussed project eventually sited, by a narrow vote, at La Collette - incidentally, I voted for it to be at Bellozanne - and a contract signed in the dying days of 2008's Assembly. Elections, new Members, a rescindment motion by the former Deputy of St. Mary, involving a 3-hour speech - thank you, Deputy, for being succinct **[Laughter]** - the motion was lost on that occasion, but then there was controversy with planning regarding the design. The original, curved roof, proposal was overturned by the Minister for Planning of the day, who insisted on his preferred architect's design, at a cost of additional millions, I might add; and thus it was constructed by a joint French/Jersey enterprise in 3 years, slightly over budget as a result of issues in the Treasury regarding hedging. I perhaps would ask the Treasury to take note of that. I ask whether we have learnt anything from this and I think it is fair to say that political interference, in these sorts of projects, is far from helpful. This was equally demonstrated in Guernsey, where political interference has stifled the construction of a waste plant in the last few years. I am well aware that a hospital is a far more complex structure, but the principles of the building development are much the same and I do not have the confidence that in supporting this proposition we will ever see a new hospital inside a reasonable timescale. I do not doubt that the process leading to today's debate could be described as a pantomime by some and it is abundantly clear that consultation has been wanting. We need to overcome that. There is much discussion to be had, with those who run the hospital. If there is a need for a change in haematology provision, or pathology areas, as referred to earlier, let us talk about it directly with those involved, so as there can be an understanding of all that is required. I was pleased to hear the Minister for Health and Social Services indicating that discussions have taken place. One of the greatest risks, which seems to have been overlooked, is that in 2022 we will, once again, be having elections and further delays at this stage could simply put us straight back to square one, given a new swathe of States Members with potential rescindment motions in mind. I am not overly precious with regard to the siting of the new hospital, but having read the original Gleeds report and removing their recommendations for the People's Park, it seems to me blindingly obvious that any further analysis will take us back to Gloucester Street, or the Waterfront. Overdale, it seems to me, is simply not sufficiently accessible, but the Waterfront, I feel, needs further investigation. I believe the continued operation of the existing hospital is fundamental to the decision we make today and while there are costs associated with a phased development, there are savings to be made by avoiding the need to duplicate expensive **power centres**. I am told the present systems in the hospital are only good for another 3 years and this really concerns me. The table produced by the Minister for Health and Social Services in answer to a written question outlines the potential costs, which are massive: some £32 million from day one, I seem to have identified from that. Turning to the Chief Minister's comments, I am pleased that he has indicated that he will launch straight into a programme

of engagement with interested parties. This is essential. I believe the ministerial oversight team should comprise the Minister for Infrastructure, the Minister for Health and Social Services, the Minister for the Environment and, of course, with representation from the Treasury. These are the key people in the development of a project of this nature. I strongly believe that the project board concept has not worked. It was too loose and unstructured and, in my view, I would suggest that our existing Scrutiny process should be utilised better, to monitor and challenge the process. Deputy Pamplin's report was, I think, short and concise and did exactly what it proves. A properly resourced Scrutiny Panel will be a real asset to a development of this nature, as there will inevitably be ongoing challenges of a clinical, mechanical and, no doubt, political nature to deal with. I would respectfully suggest that there must be no more vacillation on these matters and that the Chief Minister should direct his Ministers and officers to get on with the job in hand and construct the new hospital on an approved site, without any further delay. I really struggle with reconciling wasting millions of pounds and will have difficulty in looking people in the eye and justifying it. I would conclude by saying that I object to the Future Hospital team being used as scapegoats for political procrastination and indecision. These are professional people, giving well-researched and considered advice on the basis of their initial instructions from their political leaders. For my part, I congratulate them on their resilience to date, as there are many that would not have put up with the unprofessional approach taken by some politicians and members of the public since the election. There seems to be a view, from some, that you can simply ring up "Bob the Builder" and ask him to put up a hospital. They have demonstrated they are wholly naïve to the processes involved in developing a large government project. I would urge those involved to listen to qualified professionals and not simply be led by the nose by the latest social media posting. There have been some excellent speeches today and I look forward to hearing Deputy Labey's summing up. I would ask him, in so doing, that in the light of the amendments passed today whether he would accept Gloucester Street as an option, should it be recommended.

**Deputy K.C. Lewis:**

May I have a point of clarification, Sir, from the Solicitor General?

**The Deputy Bailiff:**

You have a question for the Solicitor General? Yes, very well, what is your question?

**Deputy K.C. Lewis:**

It is just a point I made earlier. Should Deputy Labey's proposition be carried, what would be the status of the existing general hospital? I think some Members are of the opinion that a line is drawn through the general hospital, but my reading of it is it just loses its preferred status and that it is still on the table as an option. Could that be clarified?

**The Deputy Bailiff:**

I am not sure that is a matter for the Solicitor General. I think that is a matter for me, in interpreting the ... it seems to me to be entirely clear that all it does is remove the preferred status and it exists as a site for consideration in the future together with any other site.

**Deputy K.C. Lewis:**

I am obliged.

#### **2.4.13 Deputy G.J. Truscott of St. Brelade:**

I have remained pretty silent on the hospital debate really for a number of years. I am on the Planning Committee and I always thought that, at some point, it might come to us, as a committee, to determine and in some ways I wish it had, because I do not feel that under the circumstances - and I cannot speak for my other members, but certainly from my point of view - it would have failed on a number of issues. So, on that basis, I have remained pretty silent. But there does come a time where I feel I

have to stand up, because I am getting rather annoyed by the whole thing. I will be supporting Deputy Labey this afternoon. It is time to draw a line here. He summed it up this morning: we are flogging a dead horse. How long is one expected to flog a dead horse? I am a Jerseyman and £28 million, when this Island needs money going forward ... we are facing deficits in 2020 of £20 million to £30 million per year going onwards and to be in a position of burning money the way that we have on this project, it is just scandalous, quite frankly. It is time that we, as an Assembly, took hold of this project and deliver.

[16:00]

We were talking Brexit earlier on and Deputy Ash mentioned we have our very own backstop. We have Gloucester Street. It may be the best of the worst of the sites that are out there. With 4½ years' experience on the Planning Committee, we have determined hundreds of properties and large developments locally and I can say that there is not one site out there that is ideal, far from it. I could go through a few of the issues quite happily here and now. I did tour Overdale over the weekend with the Chief Minister. We toured the site and I can see that there are major issues. One: access. Without a shadow, access is a major problem. We have been determining a number of developments in the area, on Tower Road, the back of the Lotus House there, there are hundreds of properties going up over the next few years and that is very close to where the proposed entry to the hospital is going to be. You have got George V Cottages there; they are not ideal, I believe they are not particularly well insulated but, nevertheless, they are treasured by the people that live in those properties. There is a nature reserve running up through that valley there. While I was walking around the estate with the Chief Minister, we had a bird of prey literally come in being chased by seagulls and did a bit of a turn and flew out. So, it is a nature reserve and something that could be a problem when it comes to getting the site approved. Massing on the headland is another issue. There are so many planning issues up there, you have got the green backdrop, you have got the green zone policies, you have got environment, just to mention a few before we even start. Access to the site is going to be extremely difficult. You have got Tower Road, you have got Old Saint John's Road, you have got Westmount; so difficult for people to get there. So, that would be one of the reasons, even before we start, that illustrate that the site is possibly not suitable. There were a number of statistics in the last debate that we had in the previous Assembly and they are quite interesting statistics. We have lost a possible walk-in hospital today, in People's Park, but over 800 staff arrive before 9.00 a.m. every working day; 15,417 hospital procedures are carried out at the hospital every year; there are 181,860 outpatient appointments, just over 900 emergency ambulance responses, 38,770 A. and E. (Accident and Emergency) visits. There are 1,252 staff, 40 per cent of the staff live in St. Helier, a third of the users arrive on foot. The only way a lot of people would be able to get to Westmount is either by a shuttle bus - which I do believe will have to be provided - or by car. Not a great thing when the government's policy is to look at the transport policy *et cetera*, so, anyway, that is just that one. Just going to the Waterfront - and I am not here to determine the sites, but I am just here really to present the issues and plainly the problems that could face any plans going forward for these developments - it is a 6-lane highway, north-east, that pedestrians would have to cross to get to the new hospital. There would be the issue of massing and scaling on the Waterfront. Its relationship to Elizabeth Castle, strangely enough, would be an issue that would come up in planning. There is the issue, also, of car parking for the people that would arrive in a car; they would have to go below the hospital, if that is to be the only place to put cars. There would possibly be an issue of flooding, also. When I first joined the Government, which I was the Assistant Minister in the previous Assembly, I did join - and it was late I might add in the whole process - the ministerial oversight group for the hospital. The very first point I made, when I arrived on the scene, was why are we not building at St. Saviour's Hospital? The perfect place; it is out, it is expansive, it would be ideal, one would have thought. But, again, hindsight is a wonderful thing and when you really consider it we have got a third of the population living in St. Helier. The only hills to it are going to be St. Saviour's Hill, you have got Wellington Hill and Mont Millais. There is a pinch point, a bottleneck, up at Five Oaks. Can you



imagine somebody having a heart attack in St. Helier, for example, at about 3.00 p.m., 3.30 p.m., on a school day, trying to get up those 3 hills going via Five Oaks to get to St. Saviour's. I think that would be quite a challenge for any ambulance driver, quite frankly. I do believe we could possibly put the people in jeopardy, who are in the back of that van. I welcome this move to just step back, examine what is in front of us; and it is going to have to be a clinical analysis of what is available. I think we need to get in, get to a conclusion and then put this to the Assembly. We cannot afford to carry on like this, we are becoming a laughing stock, quite frankly and I think that is very regrettable. There has always been a good intention here, we want to deliver, believe me, we want to deliver a fit for purpose hospital for the people of Jersey; and why would we not, at the end of the day? There was a clip on the radio the other day regarding Gloucester Street and I did originally vote for Gloucester Street. Like my colleague, the Constable of St. Lawrence, I have changed my mind. It is simply the site is not big enough. When it fell at its first planning determination that really should have been a red light to continue, because, plainly, the site is not going to be big enough. I did hear on the radio, yesterday, the previous Minister for Health and Social Services selling it effectively to the Assembly, where he was lamenting on the fact that there is going to be room on the campus to expand in the future. For me that sold it; we are going to have a really fit-for-purpose hospital with future expansion. Well, that went out the window day one when the Minister for the Environment failed the plans going forward. That really should have been the red light. So, for me, I am supporting, as I say, Deputy Labey of St. Helier; I think it is the most sensible thing to do. I am so pleased to see that the Minister for Health and Social Services ... it is not a U turn, I think he has just seen the light at the end of the day and common sense is going to prevail here, which, I think, is imperative. But, as I say, we have got to get on with this. We need somebody to take control; totally agree with that and just deliver what we all set out to do, which is a fit for purpose hospital for the people of Jersey.

#### **3.4.14 Deputy K.F. Morel:**

Some very interesting speeches today, have been fascinating to listen to. I am not going to keep people long. I tend not to keep people long, but I do like to speak. I said earlier that I had tried to keep my distance from this debate, up and until I saw a Channel TV report basically trying to railroad through Overdale as an option, in some sort of propaganda message; and that made me then want to put my amendment in to try and ensure an appropriate and transparent process takes place. I am very pleased that we won that amendment. Equally too and as I said, I have had my cake and eaten it today, because I am also very pleased that People's Park was taken off the table as an option and the reason for that I gave earlier. So, in that sense, I feel my work here has been done. I still am unsure how I will vote today and the reasons for that are not so much about the pros and cons of one site over another site, but they are about understanding that if we change course from Gloucester Street, in my head - and I invite you into my mind, for a second - Gloucester Street will be delivered if we carry on that path. We will have a hospital at Gloucester Street, it will be delivered, we have spent a lot of money on it and that will happen. On the other side, we have much more uncertainty, because we do not know what will be delivered, we do not know if it can be delivered and, in that sense, we are asking for a great deal of trust in the current Government. It is at the point of trust where I find things get a bit more difficult. This is the difficulty I have, because, from the beginning, since I became a Member of this Assembly, I have had people lobbying hard and I am talking about Members of this Assembly - I strongly say here I am not talking about members of the public - I have had Members of this Assembly lobby hard for moving away from Gloucester Street. Interestingly, I have had nobody lobbying for Gloucester Street. The first thing I saw from an official perspective was a Policy Development Board put together and that Policy Development Board was apparently tasked with reviewing the previous decision, but it was quite clear that that Policy Development Board was biased in its makeup. We heard earlier about how it was a democratic process; that was not correct. The majority on that Policy Development Board had said that they were against it and if they did not admit it when they had their meeting they had admitted it previously in elections and

they had admitted it elsewhere. My trust again when I think: “Can this Council of Ministers deliver a hospital on a different site in a timeframe which is reasonable?” was again called into question when people lobbying for this, one accused a previous Minister of financial impropriety and offered no evidence whatsoever for that. I was beyond shocked when that happened, because that was not an evidence-based piece of information; that was just scurrilous rumour and slander. Another lobbyist called for, and named, particular officers that they wished to be sacked once this proposal was passed. Again, I ask, why is somebody, who is claiming to be offering evidence for a change away from Gloucester Street, just asking for people to be sacked? Others, more than one, lobbied extensively via me, but also directly with the Future Hospital Scrutiny Panel, to try to get Scrutiny to pay for a site feasibility study, a completely unworthy request, completely wrong and it is not the job of Scrutiny to do the job of the Executive. So, again, I ask why would people, who are so clearly wanting, they say, to base their decisions on evidence, asking us to abuse process and abuse the proper division of Government and ask Scrutiny to pay for a site feasibility study? Another said, when I said that I was concerned about the timeframes if we were to change course: “Well, we need to take it out of officers’ hands and put it in politicians’ hands, this process, once Deputy Labey’s proposition is passed.” Again, I was aghast, I was kind of: “Okay, so you are not now talking about having a process, you are just talking about railroading something through.” Indeed today, even Deputy Labey, someone I hold in the highest regard, according to the Minister for Health and Social Services, he quoted extremely selectively from reports earlier, which was disappointing, but not terrible in the same way that others were. On top of that, then, we had reports on television trying to play Overdale as the one and only possible option. All of this really makes me question the quality of the evidence that people in this Assembly, who are lobbying to move away from Gloucester Street, have been putting before me. Because, I ask, if you have to rely on that level of argument, then what is your argument at all? I have no doubt that Deputy Labey’s proposition will pass today; of that I am in no doubt, whatsoever. So, I ask the Chief Minister and I ask the Council of Ministers ... and I must admit I agree, wholeheartedly, with the Constable of St. Lawrence and her suggestion that the Minister for Health and Social Services be made political leader on this project, because I also agree that his calm, more rational approach is what is needed in this case. I do implore the Council of Ministers and the Chief Minister to ensure that proper process is followed, that no attempts to railroad any site is made and that the quality of discussion and the quality of lobbying be taken out of the gutter and lifted on to a proper level, that is more befitting of Members of this Assembly. I have stood up, not to argue for any one side, but to tell people off. I apologise for that, but I felt it was necessary.

[16:15]

### **3.4.15 The Deputy of St. Peter:**

I hope you all take on board what I say and do not perceive it to be over-biased. This speech is solely about rescinding Gloucester Street as a site. It is not about how we got here, how the consultants and medics were not consulted, the well-documented avoidable disruption to patients, staff and neighbours, it is not about recommended alternatives. It is also being suggested that I mentioned a meeting that the Constable of St. John and I had with pathology - which I would like to say we were advised to make this not formal evidence for reasons that are quite well known - but I would like to say that that meeting totally concurred with Russell Labey’s version - sorry, Deputy Labey’s version - of events. It has also been suggested that I mention evidence, that I have picked up an email - it was not formally submitted, I have to accept - more latterly from the Polish equivalent of the Department for Trade and Industry, who have scanned all the government tender sites across Europe, the procurement sites, to no avail. They have come across nothing from anything to do with the Jersey Hospital. No, I will just keep it simple. The report by Mr. Philip Staddon, dated 2nd January 2018, on the initial planning application for the hospital, recommended turning down planning permission and I quote: “Based on the evidence before me, I recommend that Minister refuses to grant planning permission for the application proposal, due to the serious negative impacts it would

have on townscape, visual amenities, heritage assets and residential amenities.” Fast forward one year and £20 million of, in my opinion, unnecessarily spent money and Mr. Staddon’s report, dated 10th December, published in January, recommended refusal, this time under 3 separate headings: heritage, residential amenity, design townscape and visual impacts. Exactly the same reasons as before. Now, I admire Mr. Staddon, because he could have just cut and pasted his previous summary but, no, he stressed it in his latest summary under these 3 discrete headings. Do you think he is giving us a clue? I suggest that he is saying, very clearly, that the hospital is not suited to go on this site. In fact, he extended that conclusion. Put simply, the application site area is far too small to accommodate, successfully, the amount of floor space proposed. Those who are questioning whether it will go on this site have to listen to that evidence. That is what we asked for. I have heard it said by many today and in the past, we cannot squeeze a quart into a pint pot. Now, the only fact that the Hospital Policy Board, which I sat on, unanimously agreed about was mental health. I quote from our report: “Should the States decide to seek an alternative site then the board also contend that other health services, such as mental health, should be considered as part of any subsequent site selection.” Something, I know, that Deputy Pamplin is fully supportive of. The evidence is clear; health is health, regardless of whether it is physical, or mental. The recognition and evidence behind this continues to grow apace; therefore, it is imperative for the future health of the Island that this is taken into serious consideration. I am sure you recall the previous Minister for Health and Social Services said in March/April last year that a new mental health facility will be built on Overdale for the sum of £45 million. It was an admission then and is even more relevant today: there is no room on the current proposed site to accommodate this essential service. Health is health and all services, as there is much evidence to support, must be adjacent. Now, as we know, 82 per cent of our hard-working, committed, health professionals do not want it on the proposed site. If the Future Hospital team had asked them at the outset, which I suggest would have been best practice, they would have been told that the space allocated to each consultant and medical discipline was too small to accommodate the increase in demand expected by our ageing population. In fact, some said the space will be too small before the hospital is completed. The medical practitioners have known all along that it is too small. We must now seize the opportunity to ask them. We, therefore, have 3 options: we can spend another £20 million and try again for a similar sized hospital on the site that is subject to this debate, ignoring clear evidence from Mr. Staddon and ignoring the clear advice of medical help; we can submit an application that would satisfy planning requirements, but would be too small and totally unsuitable for our health needs today, let alone the future; or, we can support Deputy Labey’s proposition and get on with selecting an appropriate site and sort this mess out once and for all.

#### **2.4.16 The Deputy of St. John:**

One of the reasons I entered politics was to be able to influence policy and, in particular, new hospital policy. I never imagined that I would be standing in the big House, if that is parliamentary correct, making a pivotal speech about the virtue of not building on the current hospital site. I am not a seasoned politician and I have only just come to the realisation that I, on behalf of my Parish, can influence the Island’s direction of travel, for the good. During the election, many people expressed concerns over the use of the current site, the overarching view being anywhere but Gloucester Street. It is increasingly apparent that, in spite of all the efforts being made to decant services into the community, demographical changes are going to place a greater burden on hospital treatment facilities, as the years progress. It is clear that, without an increase in primary and community care services, hospital services will be overwhelmed. Even with primary care and community expansion there will continue to be increased pressure on patient services and the current proposal does not have capacity to allow expansion. My experience at the general hospital and in previous senior United Kingdom health service roles informed me that the current site is not adequate and, during the development as proposed, will constitute a risk to patients, visitors and staff. I accept that building on an existing site is not a new concept and such developments have been possible in the United Kingdom, but the examples shown to us have been much larger and more flexible than Gloucester

Street. I have to thank Senator Moore for circulating the YouTube time lapse account of the Liverpool Hospital build on the existing site of Liverpool Royal Infirmary. The clip illustrates exactly what I have described, the build site is much more flexible. My research, on the web, reveals a campus of 100,000 square metres, including the existing hospital. The current Gloucester Street site, at maximum, is only 20,000 square metres, a huge difference and it means that the development will continue in proximity, the close proximity, to existing services. Viewed as a 3D image, published on the Liverpool website, the current Liverpool Royal Infirmary is some 100 metres away from the new project, reducing significantly any of the effects of redevelopment: dust, vibration and demolition initiated infection. There is no capacity on the Gloucester Street site to relocate patients and staff away from that dust, vibration and demolition-initiated infection. Wards and departments, that have to be sealed to exclude dust and infective spores, would be unbearable in summer because of the obsolete nature of the existing buildings. There is no air conditioning. The disruption will not just be momentary, but will be present over many years. For the Future Hospital team to suggest that they can replicate onsite demolition and build in the same manner as that possible on much larger sites in the U.K., is disingenuous at the very least. The existing site is limited, even with the compulsory purchase of adjacent buildings. A major theme to emerge from analysis of mainland projects, is that there should be capacity for future clinical expansion of approximately 1 per cent per year. Consider, if clinicians decided that a new space intensive facility is needed, such as radiotherapy, that would involve building bunkers at, or below, ground level. The current site would not be able to accommodate that development, there is no capacity to extend the footprint. It is interesting that the current project, dubbed the Future Hospital Project, will not be able to expand to take care of these future demands. The only direction to go will be up, further disrupting the town skyline. The Minister for the Environment has already made it clear that going up will be out of the question. Mental health facilities have been excluded from the development conversation, specifically because there is no room on the current site. The plan mooted by the previous Administration was to locate new mental health provision at a separate site, already named at Overdale. Current clinical thinking, established in other jurisdictions over many years, is that outpatient and inpatient mental health provision should be co-located with physical healthcare facilities. Are we to continue ostracising people, who are afflicted with an illness of the mind, or do we just heal them? It is my belief that in the context of where to build we should be putting patients and staff first, closely followed by a commitment to future improvement in our Island's general healthcare provision, reassuring our society that we mean business where a response to ill health is concerned. When I joined the Hospital Policy Board and I discovered that the Future Hospital project had a mandate to ensure that the new development would meet the needs of the Island for the next 60 years - I, of course, will be long gone but, by that time, my grandchildren and great-grandchildren will be the ageing future users. My concern is that the current site will only be future-proofed for 15 to 20 years, simply because of size limitations. We have a duty to explore all avenues in the context of this project, to ensure we get the best deal for hospital users and the wider Island community; that community being the body of people, who stump up the money needed to progress the development. The Liverpool development on 100,000 square metres of available campus, will produce a 646-bed hospital, 40 intensive care beds, a state-of-the art A. and E. and all the supporting services required for a target price of £350 million; that is twice the size for nearly half the money. Currently, for under 300 beds we are looking at £466 million; there must be something better out there. Recently, a group of local concerned individuals put the Hospital Policy Board in touch with hospital developers in France, who had been able to construct a 300-bed hospital, the size we are considering for under £100 million. Given the considerable financial disparity between the Jersey project, the Liverpool project and the French project, I would suggest that a significant re-evaluation of the current development's direction should be considered. Our duty to be frugal with taxpayers' money should drive the way forward. My opinion is that the proposed build on the current site will be a health and safety disaster. In addition, there will be no Future Hospital, only a future liability, as the

limitations of existing plans prove to be inadequate when future needs are identified. I would ask Members of the Assembly to please vote for this rescindment.

#### **2.4.17 Deputy K.G. Pamplin:**

I will be voting with Deputy Labey's proposition to rescind the previous States decision; my points on that I will come to.

[16:30]

First, I wish to dedicate all I am about to say to our hard-working, professional staff, working in our local health service; our nurses, doctors, consultants and all clinical personnel and volunteers have, over recent year, often gone above and beyond, sometimes in situations it just simply should not be in. I refer to the medical facilities in the state we expect them to care for our loved ones, continuing issues with recruitment, pay disputes and this divisive situation. We have seen people's opinions being dragged out and we have Islander versus Islander, consultant versus consultant and Islander versus consultant and this is regrettable. We have to bring us all together now, as we have seen in the U.K. lately what happens when things are not based on facts can cause so much division. Let us start repairing what is needed and match our hard-working, professional colleagues at the hospital's dedication to all of us. But, first, I stand today in support of the work of the Scrutiny Review Panel, which I was chair and its findings, which some are calling the Pamplin report and there was me trying to move on from my previous roles in life, but if the shoe fits. But, I also stand as myself and my fundamental beliefs that go to the core of this situation we find ourselves in today. Firstly, as I have discovered in my first 8 months as a Member, a lot of this role is about taking Islanders on our journey and what this role is really like; how our system really works and how good communication is based on good facts and, as I have thought, this is a work in progress and I know others are doing their part to change this. For me, the denial of facts runs counter to democracy. In fact, it could be its undoing, which is why we have to protect and fight for a number of things, like accountability, scrutiny and truth. This, with the aim of restoring faith in Islanders, that this is not just a place disconnected from the realities of Island life. What more motivation do we need? I remember the work done by Senator Vallois and our dearly-missed colleague, the late Deputy Richard Rondel, on their Scrutiny Panel's work into a grant of money provided for a person to make a feature film on the Island. It was an extraordinary piece of Scrutiny work and it struck a chord with me then what is possible. I have now come to truly appreciate this with my own experience. Scrutiny is the most important third voice of this Assembly. This, once again, needs reinforcing. It is not, as some would argue, opposition to fill some sort of void, as Senator Ferguson mentioned yesterday. As we discovered with our review into mental health, this gives us such an important bond with Islanders, who want answers and things looked into that really matter to them, so much that we can all make the Island a better place; they need it and, in fact, they demand it. It does not have to be as confusing, or as feared, as I have seen witnessed, or talked to me about. If you come with an honest way of working to find facts and evidence to speak freely with, then Scrutiny will do the same. The combined efforts result in truth and the best outcomes for the Island. Very quickly it was obvious and then confirmed by the new Chief Minister, when he confirmed to an oral question to me, I asked of him in this Assembly, that he will be seeking to see this debate in the Assembly. Our panel had to provide a report on all the facts and evidence right from the very start up to this very moment. We got to work to mirror what was going on and thank goodness we did, as following the Minister for the Environment's refusal of the planning application led to an even quicker proposition, lodged by Deputy Labey and here we are today. There is no need for Scrutiny to delay things today. We gave everyone the chance and the timeframe since last June, the last 8 months, to ensure they could provide us with the evidence and not found in the front page of the *J.E.P.* or to watch the television to get that information first. In our time and, as our report shows, we asked for private and public hearings, read through all the many reports and findings, while alongside scrutinising the current events of the Future Hospital team and the new Government's approach to doing things since the election. I do not need to go into detail

here; our report's findings speak for themselves. I respect all my new colleagues and the members of the public, who have reached out to me since, especially when some of our findings make difficult reading. I draw attention to the Assistant Chief Minister and my absolute respect for Constable Taylor reaching out to meet me in person to discuss and talk about things. Nothing is personal and that, to me, is what makes someone a person. My door is always open to anyone, or you can slide into my D.M.s (direct messages) anytime. Communication is my beating heart. In terms of the delay, I wish to repeat what I have said to Members in our emails of late and there have been many; nowhere in the panel's report does it mention the date 2038. Nowhere in the report does it suggest that the hospital would be delayed into the 2030s. Though, I think it is fair to say if we do not make an informed decision based on the clinical evidence and this time make a sound decision, then when will it be? What this experience has proved to me is the same problem the world faces; it is right here at home on our own doorstep. It is something I have been saying over and over again. One of the biggest challenges that we have to our democracy is the degree to which we do not share a common baseline of facts. Illustrated in another way, everyone is entitled to their own opinion, but not to their own facts. The rise of social media has especially exasperated this issue and political reference to our Future Hospital debate has been referred to by other Members. We have to guard against the tendency for social media, or traditional media, to become truly a platform for spectacle, outrage and disinformation. It can bring people together, it can connect us with real people, who deserve us because we know we deserve them; it works both ways, of course. But do not use fear to combat fear; that is never the answer. You could also apply that logic to some statements I have heard in the last 8 months in this Assembly from time to time. Our Scrutiny report was based on the evidence that those who we asked to present to us and those who decided to offer us and then in some cases not offer us. You say something is planned, but not provide the plan, good luck with that. If you have, like myself, had to put together business plans that affect people's lives, you know how important getting it right is. In conclusion, I stand by the Scrutiny report and, even more important, is that Scrutiny - as the Constable of St. Brelade alluded to earlier - is a place to replicate the political oversight needed to see through this project. I am also pleased, and also to show my respect shown to me by Senator Moore for taking on board my thoughts, suggestions and feedback and I will be more than willing to offer my support to this future Scrutiny Panel, as my chairmanship falls away of the Future Hospital Review Panel. Taking off my Scrutiny hat, I confirm, again, that I will be voting with Deputy Labey's proposition and I will confirm why very briefly. The process has failed; 2 planning applications have been rejected. The site selection process, as we reported, was questionable. There has been weak political oversight at first, rectified following the C. and A.G.'s report but soon has become confusing and has fallen away again. The public lost faith in us and those in charge of the project. For all of us, this delay and our taxpayers' money went up on an already delicate situation. While this has been going on, it is not just the general hospital that needs replacing and fixing for the years to come and, frankly, some of our other not-fit-for-purpose buildings that I have witnessed now since being a States Member. I talk of La Chasse, parts of Overdale and, lastly, Orchard House. Let me say this now and in hesitation of my next Scrutiny report with my colleagues on the Health and Social Services Panel, we should be utterly ashamed of this. The neglecting of thinking that all we do is just build another building and not include mental health as part of the project, I cannot and will not look past. Also, as Members would have seen in my written question to the Minister for Health and Social Services, which he alluded to in his speech earlier, yesterday we found out there is millions of pounds needed to simply bring our facilities that our dedicated and hard-working nurses, doctors, porters and all the staff work in to a simple standard of need. I know we are talking about a new general hospital but, in reality, it is just so much more. As Members know, my passion is healthcare and mental health, as reported many times. Our health system is over-complex and fragmented. For years we have known about this, for years plans have been discussed, plans put in place, debates had, but here we still are, treating our health system separately. It is one health system or not at all. As Deputy Labey mentioned in his opening speech, P.82 is not yet fully in place. There was a separate mental health strategy and our report again is coming out on

that and I will leave you with 3 guesses of what we are about to tell you. Our separate Future Hospital project, again treated separately, tells you why we are here today. We need an overall approach to healthcare that wraps around the needs of the patient. We also need to make health more accessible for primary intervention and, once and for all, a joined-up health system that talks to each other and creates a simple, simplified pathway of care for the patients. However, there are finally signs of progress and hope. Last winter, 2017, from January to March, 20 operations were cancelled at the general hospital because of bed shortages and in recent years there has been ward closures because of winter vomiting outbreaks. But, recent changes, including the ones overseen by the general hospital group director, who has now been with us nearly a year, plus the change of engagement towards the health-based charities, has been noticed. But now is not the time to be complacent. Again, as we saw reported, mental health referrals for our young Islanders is on the rise and dementia is not something coming in years, it is here now. How this ties in with the proposition and why I am voting with it is, for me, the plans just have not really realised all that I have just talked about. I respect anybody who works in the public sector and thank you to everyone who has done their best, but we cannot afford another third application to come forward and not secure the fate of our clinical staff and Islanders, who do not see the facts; they need to. Without facts there is no basis for co-operation. It is perceived by many that today's politicians seem to reject the very concept of object truth or, as one Islander told me the other day: "What is the point, Kevin? Those people just make stuff up and they just get their way." This should trouble us all. Another key point and elephant in the room is that, as the Minister for the Environment himself suggested and as others have today, the independent planning inspector clearly also said it, none of the sites presented to him that he saw come without risk and tensions to the Island Plan. Is that really the best we can do? With no obvious clean site to just build on tomorrow, we need help to protect the Island Plan, but not allow a project to go so far down the line to be rejected because the Island Plan will stop it anyway. Now we have got to work harder and we have got to have to be smarter. We have got to learn from the mistakes of the past; a phrase I have heard many times in this Assembly. Really? Okay then, let us do that now, right now, not just before an election, or another report has shown us another failing of the past, or the public are not trusting us, the people who get paid to do the right job either and anger binds us not to work together. We need now those with the ministerial government responsibilities to get this right and to ensure there is a robust, strong political oversight group, the support of a new Future Hospital team to deliver one of the most fragmented health systems bringing it together, a hospital driven by the client of the project, health. We need a business plan to the very deep of how we can move this now way overdue issue and not what it might cost, but what it will cost. How will it be done quickly, fully explained and not rushed? The impact to whenever the final site may be and wherever it is, but carefully engage with the public and anyone in the environment of the final site must be treated with care, for those whose lives will be affected by a new hospital being built on their doorstep; faith needs to be restored. Us non-Government Assembly Members need to do our part too; step up to provide the strongest Scrutiny Panel possible, engage with our Islanders and ask questions and demand the answers through question times. We cannot wait another 3 years for all of this. This starts the moment we vote this proposition through and if we do not then it will be each other we have to answer to. There will also be those voters in to deliver in their name. We must succeed. We must take accountability for our actions. We must act now. That starts with voting to urgently rescind the previous decision, secure project funding and taxpayers' money is safely spent and ensure we get this right, so our children and children's children do not look back in many years' time from now and have to fix something that should not be theirs to fix. On that subject, 2 years ago some Members know my health failed and now I continue living with what I need to do, to ensure I can live a longer life, see Beatrice grow up, my son become a man and, in time, hopefully my family grow further and extend. Maybe it is another miracle that I live long enough to watch my beloved Tottenham Hotspur win the Premier League and my New York Jets are in the Super Bowl; I live in eternal hope. I probably will not be standing here today, with most of my hair now fully restored, without the skills of our hospital consultants, the doctors and the love and care by our nurses and

some of the best cups of tea by the wonderful League of Friends volunteers' café. During my recovery, my nan passed away and came to the hospital to receive that same level of care. My brother also had a rare brain tumour; he also received the same level of care. But, some of our experience of the facilities and the system was not good enough. I, and my family members, lost count of how many times our clinical staff caring for us apologised to us. As long as I am still standing and not just in this fortunate space, I will fight for the same level of support, care, pay and respect that they now deserve but also facilities and a place of work fit for purpose. Today it is about the hospital, but reality is so much more. No more words; it is time for action yesterday, not tomorrow, and I urge Members to vote with Deputy Labey today.

#### **2.4.17 Senator K.L. Moore:**

Yesterday we heard that Channel 103 had run a poll; a poll to ask Islanders whether they had confidence in this Government to deliver a new hospital for the Island to use. Ninety-five per cent of the respondents to this poll said they had no confidence that this Government would deliver a new hospital for the Island. I am afraid, that after listening to the debates of the last day, I am with that 95 per cent, sadly, because I can see where this debate is going; it is becoming quite clear. But I cannot let this lie without making a few additional comments to those who believe that we can push forward, provide some answers and a vision, because there is no answer, no vision to the current situation that we find ourselves in. We are simply told by the Chief Minister that he is going to bring forward a quick process. In order to make that quick, he will go back over the information that we have gathered already over the last 7 years and he expects to come up with a different answer. I think somebody referred earlier to the definition of madness being doing the same thing more than once and expecting a different answer. Well, I put it to the Assembly that if the best we can do for our Island healthcare system is to go back over the same information and expect a different answer, we really need to try a little bit better than that. I propose that it would be helpful if we had an answer from the Minister for the Environment as to why he did not use the public interest argument in order to allow the planning application to be passed. The independent planning inspector, in saying that there is no perfect site, but there are alternatives that could deliver the hospital project with different environmental effects and consequences, also gave the Minister for the Environment a hospital pass. He did make that statement. He defined the various issues that he saw with the various sites that were options on the table and made those problems with each of those sites because, as he says, there is no perfect one. He reminded the Minister that he could, if he felt it appropriate, use the argument of it being within the public interest. Delivering a hospital that is fit for purpose and modern, especially when we are reminded by the hospital director, himself, in a risk report: "The failure to mitigate against this situation faced a clear and present danger by the completion of our new model hospital within the next 5 years, will prevent us dealing with predictable surges in patients and community-acquired infections, while simultaneously exposing vulnerable groups to the added risk of hospital acquired infections; a vicious cycle of super-added infections and poor outcomes to the Island's people and community." I appreciate that the Deputy of St. Martin referred to that very statement in his own excellent speech earlier on, but such a lot of time has passed I thought it was due reminding Members of those words: "a clear and present danger if we do not achieve a new hospital within 5 years." That is a very clear message. We have had all sorts of arguments why we cannot do this, but we have not heard any arguments of how we can move forward and what we can do to offer a better alternative than those that have already been looked at over the past 7 years. Seven years when we have spent £45 million on consultants and experts in their field, who have provided us with advice. There are also unintended consequences of not making decisions. We did not make a decision for many years in relation to the siting of the police headquarters. Thankfully, that police headquarters has now been built and it provides a very fine home to the States of Jersey Police Force. The unintended consequence of not making that decision and I have talked about this in the past, was that social housing, that was due to be built on the site that was then vacated eventually by the States of Jersey Police, was not delivered. In fact still, to this day, that social housing has not been



completed and we all sit here talking about the lack of social housing in the Island and our need to address the crisis. To address crises we have to make decisions. They may be difficult, but, on balance, we have to move forward and have the confidence with which to do so. The Policy Development Board - I do not wish to spend too much time on this board because they have simply muddied the waters by having a bias group of the Chief Minister's selected men looking at this issue in tandem to the work of Scrutiny - but they visited hospitals in Bristol to see what can be done when building and extending a hospital site, a major construction project, alongside another one. I happened to speak to a doctor, who practises in that very hospital and let me remind Members that the Bristol Royal Infirmary and the Bristol Children's Hospitals sit side by side and the construction project that occurred there was a good deal more intrusive than what is planned for our site on Gloucester Street. Those 2 buildings have become joined at certain parts, which, I am sure Members can easily imagine, would have a great deal more confusion, dust, disruption during that construction project. The key factor, when I asked the doctor what it had been like working in a hospital construction project like that over a number of years. He said: "The worst thing was the fact that the management were so preoccupied with managing the construction project, that they did not have adequate time to maintain business as usual." So I said: "Sorry, was that the key thing that gave you a problem working and operating during those years of construction?" He said: "Yes. It may have sometimes been annoying that we had corridors closed, that we had to use a different route to get around the hospital. Yes, there was occasionally drilling, but they were not drilling 24/7. That background noise was more like loud traffic, instead of a quiet road. The worst part was the time it was taking for management to deal with the project." So, I do appreciate we need to move on, but I really counsel Members to think very carefully about what their alternatives are today. We know that it is very unlikely we will deliver a hospital within 10 years if the proposition is carried today. During those 10 years it will cost, we have been told that it is predicted it will cost us £65 million to maintain our current hospital and maintain good clinical standards within it. That means that those £65 million will not be available to cope with other new services that we would like to offer the public of this Island. Those £65 million will not be available to deal with a public sector pay crisis. I would much prefer that we spent public money resolving the public sector pay crisis and assisting those hard working and diligent men and women, who work in our hospital service and throughout the rest of the public sector, so that they are adequately and properly paid for the excellent service that they provide. I know, from personal experience, that they have battled against adversity with a building that is insufficient for modern needs and they continue to provide the very best of service that they possibly can, day in day out, 24 hours a day. I thank them all for their efforts and the Island will thank Members for their efforts if they can show they can make a decision, they can move forward and focus on what is important to the men and women of this Island and that is, fundamentally, providing the best possible health and education services that we can.

#### **2.4.18 Deputy J.H. Young:**

I was not going to speak, but the last speaker set down an effective challenge to me, which I cannot disregard. Obviously, Members know that my position is constrained because, under the current law, responsibilities weigh on me in the planning decisions. I said I had a matter which I have had lots of discussions with the Scrutiny Panel, which I did immediately after my decision. In fact, all that matter is in the transcripts on the public record and my reasons are explained in there and, in fact, I dealt with it in questions yesterday. I do not want to speak at length, because I do not think there is a need. As far as I am concerned, I agree with the last speaker that the process was, to put it at its best, far from satisfactory; at worst, it was a shambles. That was a process that I take no responsibility for. All the decisions were made before my election as Minister and I did not expect that I would end up having to work with the process and the decisions that had been set in place. But, it was my duty to do so and I did to the best of my abilities and objectively and honestly as I can. Now, we all want the hospital, absolutely, as soon as possible. I agree firmly with all of the things that the previous speaker spoke about, that passionate need. I myself was a hospital manager for several

years and I worked with doctors and nurses and I have had the benefit of their services and needed them; I want them to be there. But, the decision I faced: the planning inspector's report. First of all, there was the issue that the last Assembly and the last Council of Ministers refused to accept that the alternative sites were an issue to be considered at all. Therefore, it was this new Assembly that agreed that the arrangements in place should be modified, to ask the inspector to give us a view about the alternative sites. The first thing he did was to confirm it is absolutely a planning material matter, the availability of alternative sites, and he says that. That was an issue that was challenged before. It is true that he said that all the negatives and positives, in the present Island Plan, present challenges, but I looked and I went away for several days and read hundreds of documents and devoted many hours and many days to this. I could not find in there evidence that he, or the planning inspector, had access to, to enable him to do what he needed to do, which was to make an evaluation of those planning impacts on those realistic alternative sites against the preferred choice. He was not able to make that evaluation, because the evidence was insufficient. My concern is, of course, that it is an open question, the same as the public: how come we spent £40 million? But we did not answer that question. I do not think there is any point in going over that now; it is a story for the future. The issue today is how we move on. There was another aspect, which was the inspector, he invented the phrase "the public interest". It was not in his terms of reference, it was not what was expected, it was not what he was asked to do. The law is simple, the planning decision had to be made. Was there sufficient justification to override the planning harm on the decision? That judgment had to be made. Earlier on in the debate, I think Members raised that we know this is the least harmful site. Well, there was no evidence to say that that was the case. So, I think, yes, the bar is high and I think it has to be high when you are dealing with the largest ever construction project and the largest ever impact in this part of the Island where there has been a whole history of these issues being flagged up and there were so many concerns and doubts put forward by outfits, such as the Jersey Architectural Commission. But be clear, that decision did not reject Gloucester Street as a site. That site is still a possible site and it is the process that is being proposed by Deputy Labey, I read it as such; he is saying a new process, which will examine those sites. I do not express a view on which of those it will be. That is, I think, in the process that the Chief Minister set out and I absolutely agree. Key, to me, is public participation and stakeholder engagement, before that application goes in.

[17:00]

I listened carefully to Deputy Truscott's point and I absolutely agree with everything he said. We need to reach the standard that private sectors do; we need to reach that standard here. I do not think I need to say anymore other than to say I think a question has arisen about the Island Plan. I have certainly committed to the Scrutiny Panel that I would look to see if I can find fast-track changes, so we can do this, because it must be right that, for major public sector infrastructure projects, this Assembly can reach decisions to make sure we get those and there can be nothing more than the hospital. **[Approbation]** So, immediately after my decision, I have worked with the officers. I have taken extensive legal advice on this as to can we produce a faster route to decision making by such a change. At the moment and I am not giving up on it, I am being told no, negative. I have also looked at whether, or not, we can have a local Act, the Queen's Valley type of Act where we can just bring it through but, of course, the situation has changed since those days, there are all sorts of considerations, third parties and so on. Anyway, at the moment, the conclusion is we stick with the current law. If I can find a way around that I give this Assembly an assurance I will bring forward those changes. I did not want to have to speak and I am sorry that I have taken up the Assembly's time, but faced with a challenge I felt no option. I shall be supporting the proposition, because it is about getting the process right, to get the application right, for the hospital that we need.

#### **2.4.19 Senator S.C. Ferguson:**

I was not going to say anything, but a lot of people have talked about the process and the information, this sort of thing. All I can recommend: if you have not read it already, is to read this Comptroller

and Auditor General's report on site selection where she identified that the planning was not arranged properly, they had meetings without minuting decisions. If we are going to do this properly, start with the Comptroller and Auditor General's recommendations and at the same time identify the necessary facilities and services we need, before we start saying where we want to build it. The current plans did not include a hydrotherapy pool. There is no provision of rooms for on-call surgeons. If I am admitted, with an emergency and it is going to take 3 hours to prep me for surgery, for theatre, I do not want the surgeon having to sit in his office, in an uncomfortable chair, waiting for me to be ready. You might think it is a good idea, because there is more chance of getting rid of me, but that is tough. If you have any doubts, read the Auditor General's report, because it is a good read.

**The Greffier of the States (in the Chair):**

Does any other Member wish to speak? If not, I call on Deputy Labey.

**2.4.20 Deputy R. Labey:**

I would like to thank everybody who took part in this debate. Let me start with Deputy Luce: I did not intentionally set a trap, but the Deputy of St. Martin walked straight into one, anyway. We cannot get on and build, because we do not have planning permission. The health of our people is your priority, I accept that; it is the motivation for this proposition. It is just that I trust Dr. Hema, Dr. Kumar, Dr. Kassai, Dr. Ng with the health of our people over politicians and bureaucrats and administrators and I think we should listen to them. This proposition does not send us back, Deputy of St. Martin, to square one; we have never left square one. The Gleeds report, by the way, is already out of date for those worried about People's Park. The Gleeds report was in 2015. The Westmount Development was nowhere near finished by then, it had hardly started. That is a whole fresh load of homes and flats and apartments with people in that will have a justifiable case for unreasonable harm when 5 or 6 storeys of hospital would go up on People's Park. We wasted a couple of hours talking about People's Park this morning; it is a non-starter, it is not the best site. Times have changed. I thank the Minister for Infrastructure and the Minister for Health and Social Services for being so gracious; I am grateful for their support. I do take issue with the Minister for Health and Social Services if he puts the dissent, frustration, dismay and anger even, felt by hospital staff to, I quote "one or 2 consultants" I think he is seriously underestimating the strength of feeling among hospital staff. We need to get a grip of that and I think he does too. I would just say to the Constable of St. Lawrence, supporting this proposition is not supporting the delay. There is no evidence that, if this proposition is successful and we find an alternative site, that completing the hospital on that alternative site would take longer than continuing with the Gloucester Street site. As I said in my opening speech, there is a possibility, if we work really hard, if we, just on this issue, can stop carping at the Chief Minister and admire him for the leadership he has taken with this. He can be forensically careful, but he can also be bold. His speech is magnificent and perfectly sets out the way forward. Let us heal on this issue and unite and let us all drive it forward. I am sorry, Deputy Morel, but £27 million is about to be written off. How can we heal the damage done to the reputation of this Assembly and the Administration of the Island if we do not shake up the team at the top? I have not called for any sackings; I do not know what the Deputy was going on about. But, I do not think the same faces with connections to Infrastructure, Property Holdings and Health can head up this project. I am not talking about dismissing people, or them losing their jobs, I am talking about importing new talent and, I am afraid, egos have to be put aside. This needs a fresh impetus of drive and energy and focus, getting people on board and pushing this forward, so that we can really draw a line under the disaster of the last 6 years. There should be proper political oversight, but let us not design this new hospital by committee. Some of the political groups in the boards are so huge it is ridiculous, so let us have a tight political oversight of the board, and by "oversight" I mean direction, checks and balances; not oversight in terms of forgetting something, or neglecting something, as has been in the past. We have a responsibility, do we not, a real responsibility now to ensure that another £27 million

is not wasted. I am afraid we have to change some faces at the top. If this proposition is successful, we immediately address the governance issues. We immediately begin a new appraisal of alternative sites, in tandem with consultation with every clinical department, to ensure that we have a fit for purpose, satisfactory design brief and then, as the Chief Minister outlined, things go on from there. Let us get an architect in early, let us not rely on the Rochdale Envelope. Let us get an architect in early, so we can have something tangible for people to get excited about. The original Jersey General Hospital, its design and construction and the fabric of it, speaks to where it is located: Jersey, Jersey granite. I am not saying we have to build a new hospital in granite, but it can say something about where it is located. We can have a Jersey hospital. If it breaks over the green backdrop, Deputy Truscott, let it break over that green backdrop with something exciting and inviting, with something that looks healing. A new building does not necessarily always have to look like a starship has landed; that is what we have seen on those mock-ups for the last 6 years. I too think about the staff at the general hospital, who may have come off shift now and be at home, perhaps, and those that have started their evening shift and might be trying to keep tabs with this debate, via the radio or what have you. I want to put an end to their frustrations and give them hope that they are not going to have to live and work on a building site for the next 10, 11, 12 years, however long it is going to take; and that they are being listened to; relief that that is not going to happen; hope for the future; a fit-for-purpose hospital that will have all the things that they say they need and the ability to expand and grow, too. If we can give our hospital clinicians and all the staff of the hospital and all the medics in the Island, if we can give them hope and even excitement about the future, we can then start to turn a corner with public confidence. I would like to thank all those people who have written, or emailed me, or rung up to offer me encouragement with this proposition and to give me advice. I mean, I cannot say I read it all, because there were reams, but the effort was appreciated. I just want to also repeat my gratitude and thanks to the Deputy Greffier for her work in the early stages of putting this together so quickly, so that we could have this debate at the very, very earliest opportunity. Let us take this decision, Members. Let us draw a line; let us make the necessary changes we have to; let us face up to reality; let us not be in denial any longer; let us find a better new site for this hospital and make it the best possible hospital for the people of Jersey, which is what they deserve. Thank you. I maintain the proposition and ask for the *appel*.

**The Deputy of St. Martin:**

Point of clarification, please, Sir.

**The Greffier of the States (in the Chair):**

Point of clarification, Deputy of St. Martin.

**The Deputy of St. Martin:**

The Deputy, both in his opening statement and in his conclusion, named a number of consultants at the hospital, Dr. Hema in particular who, over the last 6 years has unfortunately, for all the wrong reasons, become a very good and personal friend of mine. Could he just clarify that he is not attempting to slight my own personal, or professional, relationship with Dr. Hema?

**Deputy R. Labey:**

I am sorry I missed the question.

**The Greffier of the States (in the Chair):**

Could you repeat the question, Deputy?

**The Deputy of St. Martin:**

The Deputy, in naming consultants at the hospital, was trying to align them with his own case, but I also have a personal and professional relationship with Dr. Hema, in particular, and I just want to clarify that the Deputy is not trying to slight that.

**Deputy R. Labey:**

Yes, of course. I absolutely understand what the Deputy of St. Martin is saying and I understand why he has got a relationship with Dr. Hema. Mine is through my friendship and help with the late Deputy Rondel’s last 4 years. Dr. Hema was absolutely magnificent in the treatment of him.

**The Connétable of St. Lawrence:**

If I may, the Deputy attributed a comment to me, which sounded critical and which I do not recall making. So, for the record, I would just like to state that I do not recall referring to a delay on this project.

[17:15]

**The Connétable of St. Brelade:**

May I just ask for a point of clarification of the Deputy? In my speech I asked that in the event that the Future Hospital group, whoever it may be, analyse sites, which may then go back to Gloucester Street, what would his view be; and he did not give an answer to that.

**The Greffier of the States (in the Chair):**

Do you wish to do so, Deputy?

**Deputy R. Labey:**

I will give an answer to it. In law it remains, all we are doing is taking away the preferred status. Please, can we just not talk about Gloucester Street for at least another 2 years?

**The Greffier of the States (in the Chair):**

Do I assume you have called for the *appel*, Deputy?

**Deputy R. Labey:**

Yes, thank you, Sir.

**The Greffier of the States (in the Chair):**

Since the *appel* has been called for, I think Members have had the chance to return to their seats. I will ask the Greffier to open the voting.

<b>POUR: 39</b>		<b>CONTRE: 7</b>		<b>ABSTAIN: 0</b>
Senator L.J. Farnham		Senator I.J. Gorst		
Senator S.C. Ferguson		Senator K.L. Moore		
Senator J.A.N. Le Fondré		Senator S.W. Pallett		
Senator T.A. Vallois		Connétable of St. Clement		
Senator S.Y. Mézec		Connétable of St. Brelade		
Connétable of St. Helier		Deputy of St. Martin		
Connétable of St. Lawrence		Deputy K.F. Morel (L)		
Connétable of St. Saviour				
Connétable of St. John				
Connétable of St. Peter				
Connétable of St. Mary				
Connétable of St. Ouen				
Connétable of St. Martin				
Deputy J.A. Martin (H)				
Deputy G.P. Southern (H)				
Deputy of Grouville				
Deputy K.C. Lewis (S)				
Deputy M. Tadier (B)				

Deputy M.R. Higgins (H)				
Deputy J.M. Maçon (S)				
Deputy S.J. Pinel (C)				
Deputy of St. Ouen				
Deputy L.M.C. Doublet (S)				
Deputy R. Labey (H)				
Deputy S.M. Wickenden (H)				
Deputy of St. Mary				
Deputy G.J. Truscott (B)				
Deputy J.H. Young (B)				
Deputy L.B. Ash (C)				
Deputy G.C.U. Guida (L)				
Deputy of St. Peter				
Deputy of Trinity				
Deputy of St. John				
Deputy M.R. Le Hegarat (H)				
Deputy S.M. Ahier (H)				
Deputy J.H. Perchard (S)				
Deputy R.J. Ward (H)				
Deputy C.S. Alves (H)				
Deputy K.G. Pamplin (S)				

## ARRANGEMENT OF PUBLIC BUSINESS FOR FUTURE MEETINGS

### The Greffier of the States (in the Chair):

We now move, having finished the business for the sitting, to the arrangements of Public Business at future sittings, if Deputy Labey is ready to spring to his feet again.

### 3. Deputy R. Labey (Chairman, Privileges and Procedures Committee):

I am really unprepared for this. Okay, I can tell Members that a petition has reached the 5,000 mark, which is excellent [**Approbation**] and congratulations to the petitioners. I think it is vindication, too, of Deputy Wickenden and where he sets the threshold. I mean, it is really tough to get 5,000 signatures online; it is tough. So, it has been done for the very first time which means it triggers an - not *in camera* - in committee debate in this Assembly and the Minister, Senator Mézec and the relevant Scrutiny Chair, the Constable of St. Brelade, would like to hold that on the 12th March sitting.

### The Greffier of the States (in the Chair):

So, if you want to propose that, with the other arrangements as per the Order Paper, I can ask for the Members' agreement on that.

### Deputy R. Labey:

Thank you I would like to do just that, Sir. [**Laughter**]

### The Greffier of the States (in the Chair):

Excellent. But before we do that, Deputy Maçon.

### 3.1 Deputy J.M. Maçon:

Is there any way to challenge that? I mean, our next States sitting is quite short. It would seem a better use of time to slide that in at the same time.

### Deputy R. Labey:

We have got to give the Minister a chance to prepare for that debate; that is the first available date. He has come with the next available date. I do not think that is unreasonable and I am quite happy with that.

### **3.2 Senator S.C. Ferguson:**

Will the Greffe's office have had a chance to check all the people petitioning, to make sure they are Jersey people and that all the signatures are valid?

#### **The Greffier of the States (in the Chair):**

Luckily I am in a position to answer that directly, Senator. I have been asked the question and I am due to reply to an email on the subject. The system does not rely on signatures being checked, because we do not have access to the signatures. The short answer - and the longer one will go round to Members - is that the developers are able to check the validity with the pattern of signing up for a petition, to check if there is any unusual activity, or anything like that. That has been done. There is nothing untoward about it, but I will put the matter in writing for Members to see when I leave this chair.

### **3.3 Deputy M. Tadier:**

I think it is important, this being the first petition that has reached 5,000 and it is quite a high bar, it has to be said and I think it shows that the system is working potentially but it may show that the bar is too high were it not for the fact that it is such a contentious issue. While it is right to thank the people, who set up the petition system, I think we also have to thank previous Administrations, for their failure to get to grips with affordable housing in Jersey, for the fact that this has reached 5,000 signatures. I would like to ask the P.P.C. chairman to make sure that, in future, we have a set process, because I think there should at least be the same lodging period and notification period for any in committee debate so that all parties have due time to prepare for that. So, I think there needs to be the balance of doing it swiftly, but probably mirroring the ordinary lodging time of 4 weeks would seem logical for any future debates of this sort.

#### **Deputy R. Labey:**

There is a process.

#### **The Greffier of the States (in the Chair):**

Sorry, Deputy, it is not question time. I will just see if there are any other contributions and then I will bring you in at the end. Does anybody wish to speak?

### **3.4 Deputy J.H. Young:**

Not being party to when this was put through, this new procedure, which is obviously an excellent one, can I ask, does it only allow an in committee debate, or can there be an attempt to have a proposition there, so we can have some substantive outcome from it?

#### **The Greffier of the States (in the Chair):**

I am going to take that as a point of order. Any Member can bring a proposition at any time, including on the subjects of any petition.

### **3.5 Deputy G.P. Southern of St. Helier:**

I have been trying to lodge a proposition during this afternoon, I do not know if it has come through yet, but it is likely to be, and I am going to wish to, debated on 26th March.

#### **The Greffier of the States (in the Chair):**

On 26th March. Because we were talking about 26th February and 12th March, but in any case I have not seen a proposition come through this afternoon, but I have not been able to. Does any other Member wish to speak at this point? Deputy Labey, do you want to conclude?

**3.6 Deputy R. Labey:**

There is a system in place and all I would say to Deputy Tadier is to get 5,000 signatures takes quite a while and if you have put yourself in the place of the petitioners, once you have reached your 5,000 you would want action pretty quick, I think. There has already been stuff in the media about the debate coming up and I think the Assembly should respond when people have hit the target as soon as they possibly can, giving reasonable time for the relevant Minister to prepare. I did ask Senator Mézec if he was happy with that. I gave him the first opportunity. He said he would like it 2 weeks later and that is absolutely fine with me. I think he is happy.

**Deputy M. Tadier:**

Can I just ask for a clarification? As a general principle, does the chairman agree that 4 weeks is a reasonably sufficient response time that gives time for Ministers and other people to prepare, but it is also not an undue waiting time for petitioners? If something is so urgent, of course, there is nothing to stop somebody bringing a proposition attached to that petition, before it reaches 5,000.

**Deputy R. Labey:**

Yes, but of course Ministers can always see, can they not, that a petition is creeping up. We get the report from the Greffe every week and so your preparation can start before the 5,000 is hit.

**The Greffier of the States (in the Chair):**

I think the sensible thing is to take the decision about debating the petition in committee on 12th March. Members in favour, kindly show. Members against? I think there was no challenge to the business of 26th February, so we can assume that has been accepted, in which case the Assembly stands adjourned until Tuesday, 26th February at 9.30 a.m.

**ADJOURNMENT**

[17:23]