

STATES OF JERSEY



PRIVATE HOSPITAL DEVELOPMENT: SCRUTINY REVIEW

**Lodged au Greffe on 6th October 2005
by Senator P.V.F. Le Claire**

STATES GREFFE

PROPOSITION

THE STATES are asked to decide whether they are of opinion –

to request the social affairs scrutiny panel and the Public Accounts Committee, once appointed under the new system of government, to undertake a review of the private patient hospital development as proposed by S.N.I.B. Limited for the Stafford Hotel site, Kensington Place, St. Helier, including an assessment of the proposed scheme itself, together with an assessment of the hospital theatre and related facilities for both private and public operations and to examine also any other related and interdependent services, so that the potential benefits of the proposed scheme, and its possible impacts on existing hospital services, can be identified.

SENATOR P.V.F. LE CLAIRE

REPORT

I was first appraised of the idea that the Stafford Hotel site could become a private hospital facility when I was a member of the Health Committee. It was an offer by a private company as an extension of property and medical services which the proposers were willing to integrate within existing facilities as a private/public health partnership. The services were based upon a set plan that offered facilities that seemed to me at the time to be state-of-the-art. The needs, specifications and requirements that the Health Committee would or might require, if the specifications were not suitable as presented, were open for modification upon request, if the Health Department saw fit to ask for them. In considering these proposals, it did seem to me to offer potential savings and increased efficiency. There appeared to be a greater ability to meet the requirements of the people who were to undergo surgery. I have watched ever since with rather a neutral position on the matter as I was not re-elected to the Health Committee, and left it for them to progress. The arguments since then for and against have rumbled on, but mainly it seems in a personal way that detracts from an objective analysis. I must confess that I do not know perhaps as much as I could know about this and the events that have taken place since my time on the Committee, but I believe I know enough to know that we all need to know more. This I am afraid to say has become more evident with what has surfaced recently, with what would seem to be contradictory statements of late, and answers to questions in the States and JEP articles as regards our consultants' appointments and the work they have performed. This has included the positions and qualifications they held and their replacements would have. The articles revolving around a senior health care manager resulted in a slew of letters with which I felt the Health Committee, its President and the officers fared badly with the public.

In the future the new Ministry for Health will continue from the Health and Social Services Committee in being the largest spending branch of the Island's economy. Over £100 million a year will be spent on this department for the foreseeable future. With the States having agreed to a migration policy that allows up to 500 new people a year, more immigrants, probably wealthy ones, will be arriving in the very near future. As in line with policy agreed by the States, these new immigrants will probably have higher-paid jobs and will bring new and high skills that the Island will need if it is to meet the objectives of the Economic Strategy of 2% real growth. The idea that a growing business will be able to attract these individuals and their families without offering them the private health care services they would expect, is something to consider. The fact that it is being mooted that the Health Committee and the States are also moving to encourage a greater proportional contribution for health by a compulsory health insurance scheme also draws in the questions –

- Where and how will these new demands for medical and care facilities and services be met?
- As they are now being directly paid for in a larger tax take and scheme – how will they fit in to the financial aspects of what we are doing already?
- Will private health care be a better alternative than State care and will State care be compulsory if private health care schemes are preferred?
- What are the obligations of the department in respect of the private health care schemes now?
- What are the human rights implications of choice?
- What fiscal tax breaks, if any, will be open for the public?

There are so many aspects of health care in the future that need to be considered in the round, that a thorough review needs to occur. I believe that the Health Committee has already begun many of these processes already. If it is to sell us on the idea that we pay more, then it will have to demonstrate why. I believe with the advent of the system for scrutiny, the States have a duty of care to the public's purse and to the public's health care to investigate thoroughly the issues that will be arriving within the next 2 – 6 years as to how we provide care in Jersey. In our political party, The Centre Party, we believe that a merger of Health and Social Services and Social Security also needs to occur, as this could reduce bureaucracy and save many hundreds of thousands of pounds; and it is evident, given our fiscal position, we also need to consider this in detail. There are also many benefits too, it would appear, in relation to services for patients. Any reduction in posts could be made by redeployment

and this is what we would prefer. It is for these reasons that the proposition should be offered to the Social Affairs Scrutiny Panel and the Public Accounts Committee so that a comprehensive review is undertaken.

In the interim I would hope that the States would accept this Proposition as the right way to address what has been an unsightly issue for many years. I believe that the proposers of this scheme are running a successful hotel on site at this time and are not in this for a “quick buck” as has been suggested. The principal of the company is saying he is willing to invest £21 million in medical facilities, which can only be good for the taxpayers and the public of Jersey surely – and not even to investigate this option thoroughly is not in my view in the best interests of the States.

As a point of information I am told, when the principal of the company wrote to all States members on 4th July 2005 complaining about the treatment he was receiving with regard to his proposals, he received only 6 replies. The proposal has apparently gone before the Policy and Resources and Economic Development Committees but was refused a license. The Chief Officer of Health was asked to provide a report to the Policy and Resources Committee and did so.

The principal has supplied me with some of the papers which I will forward before the debate for members’ consideration and for the use of the Panel and the Committee should they choose to scrutinize the issues. It is not for me to argue the merits or otherwise of the scheme as I believe this is beyond the ability of an independent member who has no specialised knowledge in these fields. The developer should surely be afforded at least a chance to be heard impartially as, after all, he has not approached the States for support to build a casino, luxury apartments or other get-rich schemes – he has in effect put forward a proposal to provide a medical facility consisting of 34 ensuite bedrooms, 18 step-down care rooms, 5 consultant suites, an X-ray facility, an MRI scanner, one sport physio room, one cardio and stress room, 2 operating theatres, 2 anaesthetic rooms and other facilities as required.

All of this he has said would be, apparently, at no cost to the taxpayer, but with the proviso that we sell certain services such as pharmacy and pathology laboratory facilities to the proposed new hospital.

The suggestion that a very substantial investment of taxpayers’ money is required conflicts, it would seem, with answers given in the States and is denied by the developers.

Financial and manpower implications

Financial and manpower resources have been made available by the States to the scrutiny panels and the Public Accounts Committee, and this review would be undertaken as part of the scrutiny programme within those resources.