

2.6 Deputy S.S.P.A. Power of St. Brelade of the Minister for Health and Social Services regarding respite and long-term care at Overdale:

Given the acknowledged excellent standard of service and care provided by the staff at Overdale Hospital and the general interest of the public in this facility, would the Minister undertake to review plans for the closure and break-up of Overdale and explore the option of retaining it or expanding it so that it continues to offer States-controlled respite and long-term care?

Senator S. Syvret (Minister for Health and Social Services):

The Deputy is correct to refer to the high standards of care provided by the staff, but I must correct the Deputy in his incorrect assertion that Overdale is being broken up and closed. The site contains and will continue to contain numerous services including the recently opened, state-of-the-art Westmount Rehabilitation Centre. It also contains the Meals on Wheels food collection and delivery service, primarily for the elderly, the Poplars centre which provides assessment and day care for up to 45 older people suffering from a mental disorder and includes the outpatients' centre for the consultant psychogeriatrician memory clinic, Community Psychiatric Team. These are all services for elderly people. It also includes the William Knott Centre which deals with speech and language therapy (that provides services for all age groups), the Neurocare Team that serves all age groups. Community-based social work and occupational therapy staff are also located here. The Hearing Resource Centre, the Child Development Centre, the Psychology Department as an outpatients' centre (all age groups including the elderly), Community Alarm Service and Wheelchair Repair and Maintenance Centre, storage, resources equipment for the Pathology Laboratory, Pharmacy emergency equipment. This list is not exhaustive. All of these services will continue functioning as normal on the Overdale site after the closure of the Leoville and McKinstry Wards. In terms of future options, may I point to the Draft Strategic Plan, references 215, page 21 that states that Health and Social Services Department will, by 2008, develop a concordat between the private, the voluntary and charitable and public sector as a means of building capacity for the care of older people who require residential accommodation.

2.6.1 Deputy S. Power:

My question was related to long-term care and respite care, and I was going to ask the Minister for Health that when you have a valuable staff resource such as you do have in those 2 areas that I specifically raised in my question, is it not better to keep that resource ongoing and look at keeping some States' control in long-term care?

Senator S. Syvret:

The staff resource is certainly valuable. There will be no staff positions lost. The staff will be redeployed to other areas of Health and Social Services. The States will retain control. We, as the contracting department, will retain control over the standards of care delivered to our public sector clients. I do not agree that it is worthwhile trying to keep these 2 present buildings open. They are basically hospital ward-style environments that do not deliver the appropriate degree of privacy and high standard of living environment that people effectively in permanent care require. These people need to be living in a home-style environment as opposed to a hospital ward-style

environment. Even if we were minded (and we might well be at some point in the future) to reconstruct States-owned and run continuing care facilities, there is no provision in the States' capital programme for this at the moment. The money is simply not available.

2.6.2 Deputy R.G. Le Hérissier:

I wonder if I can ask the supplementary, notwithstanding the fact, Sir, that the Minister cannot reveal actual offers being made to private homes in terms of what is paid per individual. Could he inform the House what is the total budget that has been put aside in order to pay for provision in private homes?

Senator S. Syvret:

As I have explained before, I am not prepared to discuss the figures publicly. If the Deputy wishes to contact the department, they will give him the figures. The fact is the States, through the Health and Social Services Department, is putting these services out to tender at the moment, and we hope to get a range of competitively priced offers back to us. Once we have done that, we will consider whether they are worth taking up or not and make the appropriate decisions. It is not in the public interest to discuss these kinds of contracting arrangements and the potential value of them in the open forum while the contracts have yet to be finalised and signed.