

## QUESTIONS IN THE STATES - OVERDALE

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### Oral Questions: 13th September 2005

9. **Senator P.V.F. Le Claire of the President of the Health and Social Services Committee:**

“Is the Committee planning on reducing the number of wards at Overdale and, if so, why; and is the Committee satisfied that the current number of beds in the Health Service is sufficient for present and future requirements?”

**Senator S. Syvret (President of the Health and Social Services Committee):**

“Health and Social Services is currently conducting a review of longer term care. This review will examine continuing care and respite provision within Old Peoples Services and will examine the current purchase of these services in the independent sector. The review will specifically determine whether the current deployment of services provides choice, high quality care and value for money. Clinical areas which are included in the review are the Overdale, McKinstry Secker and Samarés Wards, all located at Overdale Hospital, together with The Limes and Sandybrook Nursing Homes. Also included in the review are those 30 beds purchased by Health and Social Services and provided by the private sector. As is best practice, the review will be based on clinical evidence, together with the views of patients, staff, clinicians and important stakeholders, which include Family Nursing and Home Care, representatives of local GPs, Age Concern Jersey and the Jersey Association of Carers. The review has been prompted by the deteriorating physical condition of both the McKinstry Secker and the Overdale Wards. These wards are located in buildings which are over 40 years old and the layout of them belongs to a previous era. It is not possible to provide the level of privacy and dignity, together with the maintenance of a pleasant living environment, which patients in the modern day rightly demand and rightly deserve in these buildings. It comes as no surprise to me that the number of complaints received by Health and Social Services from patients and their families about the unsatisfactory nature of these 2 wards is increasing all the time. The strategic driver for the review is the demographics, that is the aging of the population of Jersey, which has been well articulated, particularly by the Interim Strategy for an Aging Society. At the risk of anticipating the outcome of the review, we should be mindful of the fact that the Health and Social Service Department has announced that it intends to develop a concordat with the private institutional sector. The aim of this concordat is to increase the availability and range of modern high quality, institutional care for both private and publicly funded patients.”

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### Questions without Notice: 17th January 2006

5.5 **Deputy P.N. Troy of St. Brelade:**

Sitting in Deputy Rondel’s chair, I thought I should, perhaps, consider asking the Chief Minister a question. This is something that I was looking at prior to becoming an Assistant Minister. I would like to state that, during the Budget debate, I asked the Health Minister why respite care at Secker House had closed and why current service provision on the McKinstry Ward does not meet the previous standard of facilities received at Secker House? The Health Minister would not give an assurance, at that time, that additional funding would be coming forward to improve facilities. So, I would like to ask the Chief Minister: does he consider it acceptable that respite care should continue at a reduced level of service? Would he consider requesting a report? If in agreement with me that the service provision has decreased, will he then exert pressure on the Health Minister to bring

forward increased funding to this area to improve facilities?

**Senator F.H. Walker:**

I will gladly ask for a report. The problem of funding, of course, is that there are many examples of where we would want to improve the service offered. It is a question of prioritisation, as we well know. The States has agreed to overall levels of spending. We are doing our very best to provide the best possible service - certainly in the core social areas - within that level of spending. The Council of Ministers is having a 2-day meeting this week, where we will be looking to prepare the first draft of the next 5-year strategic plan. Of course, resourcing, and the ability to fund key social issues, will be top of that agenda but I will, as the Deputy has requested, ask for a report on the respite care.

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**Questions without Notice: 25th April 2006**

**4.5 Deputy P.N. Troy of St. Brelade:**

Will the Minister confirm that he has now fully reviewed the strategy for the provision of respite care and can he inform whether a Ministerial decision has been taken regarding the implementation of his future strategy? The Minister also stated, in the media, that beds will be purchased in the private sector. Can he advise how many beds will be purchased and at what cost per bed per annum?

**Senator S. Syvret:**

The number of beds purchased might be in the range of 40 to 50 at this stage, although this will be a fluctuating figure on the basis of need and the development and implementation of the strategy. I do not know, off the top of my head, the cost per bed. If the Deputy likes I can find that information out for him later today. I have not yet made a formal Ministerial decision to implement the strategy but nevertheless I will be doing so very shortly. I can assure the Deputy that where people are currently receiving respite care at the inadequate buildings at Overdale, it is our intention, and our plan, to have everyone who needs respite care moved completely out of those facilities by the end of June so that people will be receiving respite care in decent, civilised accommodation, as opposed to the totally inadequate buildings that presently exist at Overdale.

**4.11 Connétable M.K. Jackson of St. Brelade**

In view of the impending closure of McKinsty and Leoville Wards at Overdale, and the closure of the Secker Ward, could the Minister let the House know what the long-term plans for Overdale Hospital are, in view of the considerable value of the site?

**Senator S. Syvret:**

I am not aware that there are any plans in existence at the moment. The point is certainly true, the site is valuable. It is a large site in a good location, and many of existing buildings on the site are extremely obsolete, wholly inadequate, and should be demolished and no longer used, but it is worth pointing out that a variety of other Health and Social Services buildings also on the same site are extremely modern, of a very high standard, very high quality, delivering very good standards of care. A variety of services are provided at Overdale and will continue to be provided there, so it might be that the rest of the site that has the obsolete buildings on it might well be utilised at some point in the future for future Health and Social Services activities. A decision has not been taken yet on the site, and I imagine that when it is, it will be part of the overarching States of Jersey property policy that is going to be developed.

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**Oral Questions: 20th June 2006**

### **3.3 Deputy R.G. Le Hérissier of the Minister for Health and Social Services regarding any studies underlying the decision to move elderly residents from Overdale:**

Would the Minister identify the relevant studies, if any, such as cost benefit and value for money studies, which underlie the decision to move elderly residents from Overdale to private facilities?

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

The Health and Social Services Department has developed an initial outline business case, which has looked into the feasibility and desirability of closing Leoville and McKinstry wards on the Overdale site, as they are no longer fit for purpose. Alternative options for providing the service have been considered, particularly considering the costs and benefits of each alternative. These options included keeping the existing beds open in the current accommodation, with an upgrade to the fabric of the building, a new-build or the purchase of 54 beds from the private sector. The proposal to move clients to private sector facilities, where this is appropriate, was identified as best meeting the needs of the clients in an affordable manner. I have approved in principle the recommendations of the business case so that significantly better patient facilities may be procured in the private sector to better meet patient need. I am not prepared to provide any financial information at this time as the Department is currently conducting the tender process for these beds in the private sector, and such information is, therefore, commercially sensitive. It must be pointed out that the initiative to move these residents from Overdale to private facilities has not been driven by short-term financial constraints and objectives. It has been driven by the need to provide appropriate care facilities that are needed now and to develop facilities and multi-disciplinary support mechanisms to meet expected long-term requirements of the Island in response to the aging demographic.

#### **3.3.1 Deputy R.G. Le Hérissier:**

Would the Minister put in the public domain the general sums of money that are involved, so that a learned judgment can be made on whether this massive shift to the private sector has, indeed, been done in the context of a well worked out policy. Secondly, Sir, would the Business Plan upon which this move is now being conducted also be placed into the public domain?

#### **Senator S. Syvret:**

I think I have already said in my answer that the answer to both of those questions is "No". To put them into the public domain at this stage would disadvantage the public interest, as it would give commercial information, commercially sensitive information about costs and other things to potential bidders for the contracts. I say now, as I said on Radio Jersey last night, I am happy to make this information available to the Deputy and, indeed, any other Member of the Assembly, on the basis of strict confidentiality. Of course, to make it public at this stage would disadvantage the public interest.

#### **3.3.2 Deputy G.C.L. Baudains:**

In the process of these changes, could the Minister advise as to whether ultimately the number of beds available will either be less, more or the same and is there any intention in the future that the occupants might have to pay all or part of the cost that arises?

#### **Senator S. Syvret:**

There will be no variation in the cost for those clients currently using the facilities. As has been made plain on numerous occasions before, it will simply be a case of moving people out of those facilities into better, private facilities. We believe that 54 beds are required. Those are the numbers that we might be looking to commission from the private sector. We do not know quite where yet. There are now a variety of very high quality facilities on the Island which will provide people with private rooms, en suite facilities, facilities of that nature which are completely absent in the 2 existing wards which are being used at the moment, where there is no privacy. Terminally ill patients and their families are simply kept partitioned-off by curtains from other people, other visiting families. It is a wholly unacceptable setting. People that need continuing care are essentially living in what should be a home-type environment. The 2 wards at present, built in the 1930s as they were, simply comprise of a hospital ward-style development. It is not, therefore, appropriate for long-term care.

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

In light of local rumours, would the Minister for Health and Social Services confirm that he has absolutely no intention to sell, lease or otherwise dispose of, or privatise Overdale Hospital?

#### **Senator S. Syvret:**

Yes, Sir, I am happy to give that assurance absolutely and categorically. I have no idea where the rumour started that the Overdale site was going to be sold. There is not a grain of truth in it. Indeed, Health and Social Services have made very substantial investments of taxpayers' money, running into some millions of pounds, on new buildings on the overall site at Overdale. So, there is no question other than it is going to be in the ownership of the States for providing health, social care and other facilities for the public into the future. The issue, as far as the old 1930s buildings are concerned, is that the States of Jersey simply does not have in its capital programme at the present time the money to demolish and rebuild them now. But we might do in 5 years' time. We do not know. We will have to see how the money is going.

### **3.3.4 Deputy A.E. Pyrke of Trinity:**

Would the Minister inform the House, when the residents are moving to the residential homes, what is going to happen to the staff in place at Overdale?

#### **Senator S. Syvret:**

The staff will be redeployed throughout areas of need Health and Social Services. That has been made absolutely clear to the staff on numerous occasions. There will be no redundancies, no job losses. Those people that wish to continue to work for Health and Social Services will continue to do so. They will be deployed to other areas of need.

### **3.4.5 Deputy J.B. Fox:**

I was pleased to hear the reassurances about the site after the processes going through at the moment for improvements to health care, but there are residents in the area, that would probably have been listening to the rumours as well, that would like reassurance that the fine mature trees - some of which have got history - will be retained on any future build or other requirement that Health would produce. Can you give that reassurance today?

#### **Senator S. Syvret:**

I certainly strongly support the preservation of trees, so, I am certainly happy to look into it in terms of any future plans for redeveloping the site that may exist. But I would have thought it would be most unlikely that trees and other attractive features of the area would be damaged or removed in any way. The area, it has to be remembered, includes the crematorium and the crematorium gardens, which are areas obviously that have to be treated with reverence and respect. So, at any future States of Jersey redevelopment of some of the old buildings on the site, all I can say is environmental factors, such as preservation of trees, will be taken very seriously and any such development will be undertaken with the utmost sensitivity.

### **3.3.6 Deputy P.N. Troy of St. Brelade:**

I have previously asked the Senator for costings. He did say he would provide them to me. I have not received anything at all and he is now saying today that he cannot provide costings. I think he should certainly consider passing information to States members. I certainly could keep any information in confidence. The question, Sir: patient care certainly is very important and I would like to ask the Senator would a bed manager be appointed to these 54 bed? Would there also be proper counselling for people who are coming into respite care and arrangements made to ensure that people are not shunted around from one facility to another?

#### **Senator S. Syvret:**

Yes, Sir, patients will be engaged in discussions about their own circumstances and where they are going to go. There is no question of patients, without reference to them or their families, simply being shunted to this place or that. There will be proper further discussions with all of the clients of the service facility there. It has to be remembered that there are 7 respite bed facilities there. Most of the rest are long-term care beds. It has to be said for the respite facilities there, take-up has fallen very significantly because of the extremely poor quality and inappropriateness of the building.

Yes, Sir, the clients' needs will be taken into consideration as they have been already. Before this exercise really got underway, clients and their families were surveyed to find their wishes, and most quite clearly said they would much prefer to be living in far better or private, more modern accommodation than that which they are in at the present time.

**3.3.7 Deputy G.P. Southern of St. Helier:**

The Minister said that he did not understand where the rumours were coming from about the possible sell off of Overdale. Could I point him to the fact that the Housing Department is selling off its stock? Public Services is talking of selling off substantial chunks of property and the Chief Minister is talking about privatisation. Will the Minister assure the House that he will keep communications open with the public sector workers for whom he is responsible and assure them that their jobs will not be sold off along with many others?

**Senator S. Syvret:**

Certainly, Sir, I am very happy to give that assurance again. It has already been given to the staff in question. I am not aware of any other Department or other Ministers having plans to sell off parts of Overdale. All I can say to the Assembly is that, as far as I am concerned, there are no such plans and never have been such plans, and it is difficult to concede, given the other uses on that site, how it could be that parts could be sold off. It is very, very difficult to envisage any future for that site other than it remaining in the long-term in the social care and health portfolio of the Island.

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**Oral Questions: 4th July 2006**

**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.

**2.8 Deputy A.E. Pryke of Trinity of the Minister for Health and Social Services regarding the transfer of patients from Overdale:**

Further to information given to Members regarding the patients in long-term care at Overdale Hospital, would the Minister inform Members whether discussions are taking place with nursing homes or residential homes and, if so, what these have concluded, what criteria, if any, these homes will have to meet in the care they offer, and whether transferred patients and/or their families will have a choice in the home and transfer time?

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

We are in discussion with various homeowners who responded to the invitation to make an application to provide beds. Therefore, the department is in a commercially sensitive situation, so we would not wish to release information that could impact on any negotiations. Nursing and residential homes are regulated by the Nursing and Residential Homes (Jersey) Law 199-, the Nursing Homes and Mental Nursing Homes (General Provisions) (Jersey) Order 1995 and the Residential Homes (General Provisions) (Jersey) Order 1995. These set specific criteria that homes must meet for registration. Furthermore, the law permits an authorised officer of Health and Social Services the right to inspect homes to ensure that homes are complying with the law. Thus, any homes used will have to, by law, comply with the necessary high standards. Before any individual patient is placed in an independent home, they will have a comprehensive health and social care assessment to ensure the most appropriate placement. Each patient's personal and social

circumstances will also be taken into account. Furthermore, I can relate that in each case we are meeting with all of the patients and their families once each patient's assessment is completed to discuss the situation. A placement will be made taking account of all of these factors and available capacity, ensuring that the patient's care needs are met.

**Deputy A.E. Pryke:**

The last part of the question was not answered, about transfer time.

**Senator S. Syvret:**

I think I did answer it. We will be negotiating with the clients and their families and, as far as is practicable, transferring people according to their wishes. There is no escaping from the fact that it simply is not possible to give everyone in Jersey who needs to go into either residential care or nursing home care an absolutely free choice of where they go and when they go there. There simply is not the capacity in the market. Were that the case, we would have most people who require such care, for example, on the waiting list waiting to go into places like the Limes or Sandybrook. So there does have to be a degree of realism about what is available in the marketplace.

**2.8.1 Connétable M.K. Jackson of St. Brelade:**

Could the Minister let us know what the time schedule of the arrangements with the private homeowners is, given that the families of many people who are connected with those either at Leoville or McKinstry were told at a meeting some months ago that arrangements would be concluded by the end of June and there is a certain amount of disquiet among those people?

**Senator S. Syvret:**

Yes the Connétable is correct. There is some disquiet among some of the families because they and their loved ones who are in care do not want to continue to be living in a hospital-style ward. So there is a degree of urgency for many of the patients and their families to move into better quality care. That is undeniable. I do think we are slightly behind schedule. The Connétable is absolutely correct; we did say the very end of June. I think concluding the negotiations with differing private sector institutions is taking a little longer than we expected, but nevertheless we are endeavouring to make sure that it happens as quickly as possible.

**2.8.2 Deputy R.G. Le Hérissier:**

Would the Minister like to confirm that his department is in fact getting out of the business of providing residential care? While I am considering his invitation to look at the figures, I am a bit wary of looking at them in private. Could he confirm, Sir, that the figures prove that providing care privately is cheaper than providing it through States provision?

**Senator S. Syvret:**

No I cannot say that the figures prove that, and I have never ever made that claim; quite the contrary. I have always said that there may be a slight additional cost. We possibly expect the exercise to be about a breakeven exercise. It has never been a cost-cutting exercise. It has never been a budgetary-driven exercise. It is about improving the quality of the environment in which these people live, given the absence of available States capital funding for new States build at the present time. To answer the first part of the question, no, I will not confirm the Deputy's wholly incorrect assertion that Health and Social Services are looking at getting out of residential care. We run a number of residential care environments. Some of the more recently purpose-built ones are of the very, very highest standards and they will continue to be run by Health and Social Services.

**2.8.3 Deputy D.W. Mezbourian:**

I am not sure if I missed whether the Minister said that all care homes in the Island have been approached with regard to moving patients to them, and perhaps if I did miss it, perhaps you could

confirm whether all care homes have been approached. If they have not, would he tell the House why they have not because by implication it would seem that perhaps they do not necessarily come up to the standards that we would expect?

**Senator S. Syvret:**

The Health and Social Services Department has advertised the fact that this service is required and we are inviting tenders on it. Therefore, the option to tender for providing this degree of care is open to all of the Island's care homes and all of the Island's nursing homes. It is up to them whether they wish to apply and make a bid for the contracts or not. Some have, some have not. It is entirely a commercial decision for them. In the final analysis, in any event, we will be making a decision as to which institutions we contract with, based on a range of issues including cost but perhaps even more particularly quality of care and standard of environment provided.

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### **Questions without Notice: 18th July 2006**

**3.4 Deputy S. Power of St. Brelade:**

Could the Minister confirm to this Assembly that an appraisal or a review is going on within his Department to move long-term care residents of Overdale to either The Limes or Sandybrook and that residents of The Limes and Sandybrook may then be moved to the private sector?

**Senator S. Syvret:**

No, Sir, I am not aware of that. As I have informed the Assembly on many occasions in the recent past a review has taken place in respect of the long-term and continuing care facilities at Overdale. It is being concluded in consultation with the clients and their families themselves that those facilities are not satisfactory and therefore we are looking to move those clients out into high quality private sector facilities. There was no question of people being moved out to the other nursing homes if that is where they are established.