

## **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.