

2016.11.15

4.5 Deputy J.A. Martin of the Minister for Health and Social Services regarding the site being proposed for the new Hospital: [9699]

Would the Minister advise when the site, now being proposed for the new hospital, was first considered by him or his predecessor, was this site one of the first options to be discarded during initial consideration of potential sites and, if so, why should it now be considered as the best site? Thank you.

Senator A.K.F. Green (The Minister for Health and Social Services):

This site option, as presently proposed, had not been considered previously. The General Hospital site had previously included various options, including a dual hospital site. I dismissed that dual hospital site when I was first appointed as the Minister on the basis that it offered poor value for money in comparison to a new build alternative. The original current site option, which also featured as one of the options alongside the other sites that we considered, this version was considerably more expensive, it would have taken considerably longer to build and was much more disruptive than the current preferred option set out now in P.110. All of that was completed or planned, if you like, within the current planning brief. So what is different? The current option has been developed following extensive consultation with States Members. There was a consensus that this project was of such importance that planning guidance should be revisited. Using that principle, we did revisit the planning guidance. The future hospital team then developed what is now our preferred site on the concept of using existing infrastructure, including Patriotic Street car park, but a much taller building on a much smaller footprint to provide excellent services in a single phase new build and space for future development.

4.5.1 Deputy J.A. Martin:

Yes, I asked this question because, from my memory, I am sure I saw this scheme about 5 years ago and I cannot really see much difference; and the reason this was ruled out was because of all the things the Minister has just said. It is on the same site; it is a massive block; it is going to be one of the hardest sites to build on. I disagree with the Minister. The Minister now says this block will not cause so much disruption to the people already in the hospital. This was why it was ruled out, I would say, 5 to 6 years ago and I have not heard anything this morning that makes me comfortable that this is not the same scheme, but maybe 2 floors taller. Thank you.

Senator A.K.F. Green:

It is entirely not the same scheme. The original plan involved 40-plus moves on the current site, was limited in height - that is why it was so difficult to configure - was a refurbishment partly of the old hospital and most of us that have been involved in refurbishment know full well that when you get there, you find all sorts of other problems, so it was a very high risk strategy. It was over £600 million, it took 12 years to deliver and had to be developed around chronically ill people, but what we are proposing is a clean site developed alongside the current provision.

4.5.2 Deputy M. Tadier:

Would the Minister for Health and Social Services put on record again that the best site for the hospital, clinically, is the Waterfront? It is not the current option that is being put forward. It is the Waterfront area. Will he explain the reasons that that hospital is not going there, given the fact that it is of such importance for the future of our population and their health care?

Senator A.K.F. Green:

Totally independently, regardless of my view, EY have looked at both the Waterfront and the current proposed development and said that there is little to choose between them. The fact is that we can deliver on this new site south of the line from the granite block, a fantastic hospital for the people of Jersey. We can deliver the best access of any of the 50 schemes we looked at coming straight off the car park. We can deliver expansion potential for the future and, dare I say it, in 70 or 80 years' time when we are all pushing up daisies, the new Minister for Health and Social Services, or whatever they might be called then, will also have a site on the new health campus to deliver the next new hospital or whatever facilities might look like in 70 or 80 years' time. This is a fantastic opportunity for the people of Jersey: using our own land and still allowing the masterplan to go forward on the Waterfront.

4.5.3 Deputy M. Tadier:

Would the Minister perhaps put it on record - because it is all fun and games in the Assembly and we can talk in codes - but the public, I think, know the reality that we have one very vocal and disproportionately vocal Assistant Minister, who likes to throw his weight around at the Council of Ministers, even though he is not a Minister himself, and that that individual wields disproportionate influence when we all know that the best place for the hospital is down at the Waterfront? The Minister for Health and Social Services, I think, knows that, in his heart of hearts, yet he stands here and tries to justify Ernst and Young's report, saying that there is little difference, when we all know that the best place is clearly somewhere, which has not been built on and that he is risking the future of Jersey's interests by letting somebody wield so much influence who has not been elected by this Assembly to that position. Is that not the case?

Senator A.K.F. Green:

No, it is not the case and I do not recognise what the Deputy is describing. This is a lot of work done by professional people and advisers that I have working in the future hospital team. Fantastic, well-experienced people - Gleeds, EY and KPMG - so perhaps they all do not know what they are doing. The fact is that this is a good hospital, but I would just like to say that I am on record on Hansard before to say that the Waterfront was not my first choice, because we cannot get sufficient access there. The plan was to have a footbridge across the carriageway, so that people would park in Patriotic Street. Some would park at the hospital if it was on the Waterfront, but there was not enough space. The plan was to have a footbridge. I ask you, a footbridge, for going to a building for the infirm, the sick and the young across 6 carriageways, I think, in total, something like that. Ridiculous. We have got a fantastic opportunity here right alongside Patriotic Street that people are familiar with and if you want to understand the concept, go to the Grand *Marché* and have a look.

[10:30]

4.5.4 Deputy J.A. Martin:

Yes, and I admire the Minister's enthusiasm and gusto for this fantastic site and I am just wondering why we did not have it 7 years ago when they first started looking. Because I say the Minister - maybe not this Minister, but the previous Minister - was presented with a very similar scheme. It was ruled out and now the Minister, and all these experts he has just mentioned, have gone around in a circle and the Waterfront has been dismissed because it is too valuable a land to have a hospital on for your people of Jersey. That is what some of your Ministers say. Does not the Minister agree?

Senator A.K.F. Green:

Absolutely not, because the Assistant Minister was Assistant Minister in the department when this was first looked at and this option that we have developed, which is fantastic, was not an option that

could be developed under the current planning brief of the time. That is why they came up with the £600 million refurbishment and slight redevelopment of the hospital, which I know the previous Minister would not have been happy about it either, because of the severe disruption to patients - I think it was 47 moves of patients, who would have been sat in a building site for 12 years - and the financial risk. No, this is a good option. The current new site - and it is a new build on a new site - is a good option. The best option for Jersey. It is deliverable and people will be saying: "Why did we not think of it before?"