

HM GOVERNMENT OF GIBRALTAR MINISTRY OF EQUALITY, SOCIAL SERVICES & THE ELDERLY 14 GOVERNOR'S PARADE

GIBRALTAR

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BUDGET SPEECH 2014

BY THE MINISTER FOR EQUALITY, SOCIAL SERVICES & THE ELDERLY

THE HON S SACRAMENTO

Mr Speaker

We have now been in office over two and a half years and i can reflect proudly on

the differences that have been undertaken by my Ministry and the departments I am

responsible for.

This year has been an extremely positive one in terms of numerous developments

coming to fruition as well as how our services have been extended to assist more

vulnerable in our community.

We are now at a stage where the progress is real and is tangible, and Mr Speaker

there are still more good things to come as other projects become a reality during the

course of the coming year.

EQUALITY

I will commence with the progress in my equality portfolio as this has been so

marked this year and symbolic of this Government's overall commitment to a fair and

just society.

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As I have said previously, equality is at the heart of this Government, and our commitment to equality shows a natural progression towards an inclusive society

and it is recognition of a modern Gibraltar.

We are committed to setting up an Equal Opportunities Commission which will be

responsible for promoting equal treatment for all without discrimination as provided

for in the Equal Opportunities Act. This coming financial year will see advancement

in developing this and in the meantime, the statutory function will continue to be

discharged by the Citizens Advice Bureau and we continue to work closely with them

and support their initiatives.

I am immensely proud of having being appointed by the Chief Minister as the first

Minister for Equality, and in that capacity, having passed the Civil Partnership Act

earlier this year. It truly is a landmark piece of legislation, one which enables the

formal recognition of relationships between couples of the same sex. It is important

because this Government recognises that there are gay men and gay women living

in Gibraltar and they live in loving and committed relationships. They are entitled to

a formal recognition of that commitment in the eyes of the law and that Mr Speaker,

is progress and that is equality.

To have been invited to the first civil partnership ceremony was truly special, and

particularly since it was the celebration by a couple who have been pioneers in

standing up for gay rights and challenging the establishment. They won their David

and Goliath battle against the former administration who refused to give them the

right to a joint tenancy in a government flat and that case that was fought all the way

to the Privy Council at tax payer's expense.

How times have changed Mr Speaker, our Government recognises the fundamental

human rights of gay people, quite unlike the way that they were treated by the GSD

when they were in office.

Furthermore, Mr Speaker, this past year we have outlawed homophobic hate crime

and hate speech and made these aggravated criminal offences.

It is therefore no surprise that community groups now feel the freedom and confidence to organise days such as International Day Against Homophobia and Pride, such groups no longer live in fear of expressing themselves and they know

that they have the full support of this Government in these endeavours.

Turning to disability, it is clear to all that Gibraltar's landscape is changing to make it

more accessible, and our progress is not limited to those with physical limitations but

also those with learning disabilities. Our aim is to improve the lives of people with

disabilities and this is being achieved by having for the first time in Gibraltar's history

a Ministry for Equality and within that established a department that is dedicated to

Since last year, we now have additional staff; we have a Head of

Department to deal with matters at a strategic and policy level and a truly dedicated

and motivated disability awareness officer and i have to say at this point, Mr Speaker

that this does not represent any increase in our compliment but more a re-

adjustment of existing posts. Equality is an issue that transcends all government

departments as indeed it does our community.

This department is able to co-ordinate and oversee matters relating to disability in all

other government departments and is involved in all Government projects. It is the

policy of this Government to ensure that all new projects going forward are fully

accessible and my department offers advice and guidance on this.

We have undertaken a robust review of all matters to do with disabilities and in the

past year have made significant developments in an area that has generally been

quite dormant. As we work on achieving a disability action plan, all these things fall

neatly into line.

Mr Speaker, the fruit of our work, and in particular inter agency working together, has

not gone unnoticed and recently we were recognised by a tour operator specialising

in holidays to meet the requirements of people with disabilities as an accessible

holiday destination, an achievement indeed for our initiatives and that of the Minister

for Tourism to be recognised internationally.

One of the most significant aspects of the work that we have taken so far is to review current legislation and provide laws modelled on the UN Convention on the Rights of the Disabled. A lot of work has been undertaken on the drafting of this important piece of legislation and i am delighted to report that we will be in a position to present the new laws by the end of this year. The most fundamental change that the new legislation will bring is the statutory obligation to make premises accessible to people with disabilities. At the moment we are giving careful consideration to how this will be achieved in a responsible manner as we are learning from the experience in the

UK.

Notwithstanding, and in advance of the legislation being in place, we already have a programme of auditing and reforming government premises and public areas and of course all new Government projects will be fully accessible. The Government Technical Services Department, in consultation with the Ministry of Equality & the GHA Occupational Therapy department have already been busy identifying and making improvements to our community. Mr Speaker, I am sure you will have noticed all the progress and significant improvements we have already made.

In order to ensure that we are fully equipped to do this properly my department arranged for specialist training to be delivered on access audits earlier this year. The course trained participants to be able to identify barriers to access and solve these, including access audits to historical buildings. The course was aimed at the Government's technical services department, occupational therapists and anyone involved with the responsibility of access to public buildings and services.

The accessible beaches project is a prime example of the huge progress we have made. This year we took stock of the flagship projects we undertook at the beaches last year and the service has been expanded and further improved by the Gibraltar Tourist Board.

An announcement on the new bathing pavilion at the old GASA site will be made very shortly and the whole community will be able to fully benefit from it this summer. I say fully because this exciting new project is completely accessible throughout.

Works have been undertaken to St Michael's Cave, Gibraltar International Airport

Terminal and Parliament will be fully accessible for wheelchair users once the

refurbishment works are complete. Works have also been undertaken at St

Bernard's Hospital.

We have worked with the Gibraltar Bus Company making all bus stops accessible to

wheelchair users as the ones we inherited were not and the new buses purchased

will be fully accessible.

Voice synthesisers will be installed in all lifts in Government rental estates in order to

assist those with visual impairment and these will be ready very shortly.

We have been working very closely with GHITA on issues relating to our deaf

community and Government has funded staff from the Care Agency, the GHA and

the Department of Education to undertake British Sign Language training in levels 1

& 2 and we supported the first Deaf Awareness Conference in October last year.

We have been working to ensure that there are no barriers when we organise public

events. You will have seen a BSL interpreter on stage during the National Day Rally

over the past two years and he has already been engaged for this year. At present

we are working on a text relay service so as to make services more accessible to the

deaf.

Government has now purchased a wheelchair viewing platform and this will be used

at all public gatherings and concerts, whether or not organised by government, to

enable participation by wheelchair users.

I will expand further on services related to people with learning disabilities when I

refer to the Care Agency.

We have invested greatly in the fabric of Gibraltar already as part of this

Government's task of achieving access for all and enabling the disabled in our

community.

I feel that we have come a long way in dealing with issues related to disabilities. I

am not suggesting that everything that needs to be done has been done but a lot has

been done so far and certainly this is a work in progress and we can be proud of our

achievements so far. We continue to work closely with related groups and societies,

that is one of the benefits of the Government's open door policy. Inter departmental

working is proving to be very effective & the success of my centralised department is

obvious.

WOMEN

Turning to women, Mr Speaker, I always wonder if there is such a thing as women's

issues, as any issue that affects women affects us all.

So what does equality for women really mean? It means identifying circumstances in

which women are particularly vulnerable, or placed at a disadvantage, it is about

ensuring a level playing field in opportunities and what it does not mean is that

women should be favoured over men whether it is for jobs or posts or places on

boards.

I have mentioned in the past that Government is in the process of collecting and

collating statistics of women in the workplace. Once that data is ready we will

evaluate the situation and decide what action needs to be taken and we will consider

what initiatives may need to be introduced.

The recent change to the public sector working hours will undoubtedly benefit many

working women, and the flexibility of the working hours will help them balance work

and home commitment

We are also looking at projects to empower girls and young women. We have an

excellent education system in Gibraltar and I want to ensure that young women have

the confidence to pursue whatever path they wish to choose in life.

Furthermore, in the context of women's issues, last year Government formally requested the extension to Gibraltar of the Convention of the elimination of all forms of discrimination against women. Such a step forms part of the Government's

continuing policy on the principles of equality and fairness.

Mr Speaker, I am fortunate to represent the Gibraltar Parliament on a steering

committee of commonwealth women parliamentarians. Through this forum I hold

regular meetings with like minded colleagues and have been invited to speak at

conferences that I have attended.

Mr Speaker, I would like to announce today that, as a member of the CWP

steering group, I have agreed to host a conference for women Parliamentarians early

in 2015. Personally I am very excited about this as it will be the first time that there

will have been a conference dedicated to meaningful discussion on the advancement

of women's issues in Gibraltar.

We know that another issue that affects women, predominantly though not

exclusively is domestic abuse. Apart from the provision of two buildings to be used

as a shelter for women, the previous administration did very little in terms of support

for victims of domestic abuse. Women in Need, the charity that runs the shelter, had

very little practical input or support from Government aside from a grant.

Speaker, joined up and strategic thinking simply did not exist in the past.

Indeed Mr Speaker, we have worked with them to redress this. We are in the

process of regularising their position in connection to Government, but more

importantly, working closely with them to offer real and practical support and offer

them training and guidance. The staff at women in need undertake exemplary work

to help victims of domestic abuse; the service is an essential component of the

whole domestic abuse matrix. Importantly, there is now communication between

them and social services so that they can work together seamlessly in relevant

cases.

Social Services is a pivotal player in this and I will expand on the changes made to

the service to make it more effective later on.

At present we are involved in a process of collecting empirical data to analyse the

extent and the impact of domestic abuse in Gibraltar.

We are also working on establishing a forum where all the key players in relation to

domestic abuse will meet and discuss working practices at a strategic level and as

soon as the work necessary in the individual departments is complete we will meet

together to develop the strategy, and that's not to say, Mr Speaker, that because the

forum has not formally met that no work has been done at a strategic level or

individually in developing these departments, and finally, on this front, through my

contacts with other commonwealth parliamentarians, we will be twinning with

colleagues in Wales who have developed a very successful domestic abuse

strategy.

CARE AGENCY

Turning to the Care Agency, Mr Speaker, I continue to try and improve the way in

which the Care Agency develops and delivers a more efficient and effective service

than that which I found when I took on Ministerial responsibility for it. Like any

progressive organisation, there is now a continual process of revision that takes

place as we encounter daily issues. As an organisation that was in complete chaos

when I inherited it, it is now beginning to take shape.

One of the major problems was that the Human Resources Department operated in

a way that was completely ad hock and uncoordinated. Last year we introduced a

database for Human Resources which is now fully functional and with improvements

being made continuously we are now investing in the Human Resources department

so that staff have a clear understanding of employment issues within the Agency.

Although the Care Agency is the fruit between the merger of the previous Social

Services and Elderly Care Agencies, aspects of the Agency had never merged,

particularly in the way that the Human Resources department operated. A case in

point is the staff handbook and this year will see the consolidation of both previous

handbooks and the creation of one single handbook

In terms of investment, in December 2013, twelve Junior and Middle Managers

embarked on a five day course in management training spread over three months

allowing time to complete specific tasks on managing people, communicating

effectively and building effective teams.

Employees are the backbone to any organisation and its Service Users and the

people that we need to ensure receive the best possible care; therefore the

development and implementation of an effective framework for learning in all forms,

academic, professional and vocational is imperative to enable staff to be fully

prepared to provide the appropriate care to the people we are responsible for.

With stronger training, support staff are now able to feel professional in their roles

and have a clearer understanding as well as knowing the purpose for which their

work is being delivered

It is very satisfying to see that there are still a vast majority of workers who show

vocational qualities that can be enhanced with appropriate training. The Care

Agency continues with its approach of investing in people and we continue to strive

towards ensuring that its workforce comprises appropriately skilled people in the

right places, working to deliver high quality care.

The Care Agency's new dedicated training team is exemplary and provides a better

service year on year.

During this year, the Care Agency Training Team has been extremely busy and proactive; they have not only continued to research, facilitate, deliver and review training to ensure evidence based practice is taught to enhance skills but they continue to develop their own skills and develop 'in-house' training programmes, they have also expanded their remit; by collaborating and delivering training for other government departments.

The elements of the training are split into numerous sections; I will obviously not refer to all the training that we undertake Mr Speaker, but I will concentrate on the most important ones, principally the introduction to the Care Agency will involve the Care Agency Generic Core Training and this has continued to be provided throughout 2013 for new, existing staff and ETCL Trainees. I want to mention a new, resourceful piece of equipment we have bought which is 'the age simulation & empathy suit' has been incorporated for the training. This equipment helps staff to walk in the shoes of the elderly thereby making them more in tune with the needs of their job.

Trainers and instructors in the Care Agency have been trained, qualified and updated in various subjects to enable Mandatory Training Programmes to be continuing and developed 'in-house' in the individual services.

It is important that the trainers of the Care Agency Training Team also maintain their professional development and enhance their skills; therefore provision was made for them to gain further qualifications as recognised in Gibraltar and the UK by completing a Level 3 Award in Preparing to Teach in the Lifelong Learning Sector.

In November 2013, the Care Agency training team procured the British Institute of Learning Disabilities to visit Gibraltar to provide training in Learning Disability Awareness. This training consisted of five one day sessions. Over the period of five days a total of one hundred and twenty-seven people attended from the Care Agency, Department of Education, RGP, GHA and the GSLA.

The aim of this training was to develop an understanding and look at positive

approaches to working with people with learning disabilities, autism and mental

health problems. The training had excellent reviews and such training will be

expanded upon in future.

Not only have the dedicated in house training team provided a service to the Care

Agency, they have also shared their expertise and trained other government

department and bodies. Our team have provided training to the lifeguards

employed by the tourist board in moving and manual handling procedures so that

they are fully equipped to assist people with disabilities who use the beach

accessibility service.

Relationships between the Care Agency and the Gibraltar Health Authority are

thriving. The School of Health Studies has made places available for Nurses working

in Elderly Residential Services to attend courses on mentorship, fall prevention,

dignity awareness, diabetes and to name a few. These courses allow staff to

maintain a continued professional development through the Kingston University in

the UK.

Moreover two Care Agency employees have been given the opportunity to undertake

the Enrolment Nurse Course, due to complete this coming month, when they will

return to Elderly Residential Services with qualifications, knowledge and skills that

can be put into practice as nurses. It is expected for this opportunity to be repeated

regularly one or two years, thereby increasing the local availability of people with the

skills and qualifications required for such job vacancies when they arise.

Perhaps the most significant initiative that was commenced last year is a training

programme that been devised and is co-ordinated and delivered by Care Agency

staff through the Ministry of Employment.

In December 2013 the Care Agency developed a course 'An Introduction to Elderly

and Dementia Care' and has facilitated the delivery of this course to just over one

hundred registered unemployed people with the Employment and Training Board

through this financial year. This course has been incredibly successful.

These people receive fundamental theoretical information and are taught practical skills over a 3 week period attending a full 5 days a week. All the subjects follow the 'skills for care common induction standards for care workers' in the UK and on completion of the course the attendees are provided with Certificates of Attendance. In addition, a two week work experience placement is offered in the Elderly Residential Services of the Care Agency or the long stay wards at St Bernard's Hospital.

The training will enable these people to build up a portfolio to support them in their applications for employment in the care sector in the future, if they decide that this is their chosen profession.

It is anticipated that the Care Agency will continue to deliver this course for up to a further one hundred people in the upcoming year.

As you will be aware Mr Speaker, Government will be operating two new elderly residential facilities by the end of the year. In order to operate these services we will need staff and we are therefore pre-empting this need for staff by commencing to offer training in this field as well as hands on work experience and this will avoid having to do what the GSD did were they had to import labour in the care sector because of apparent lack of skill in our work force so unlike the GSD when they were in office we are tackling the issue head on and we are co-ordinating our approach. Their excuse Mr Speaker, when asked why residents were never considered for employment in the care sector was that locals did not want to carry out this type of work. Statistics show that is far from the case Mr Speaker and judging from the number of residents who have already been employed in this field both by the Care Agency and private contractors - it is about giving the people the tools and the opportunity to carry out the job.

Incidentally, a lot of the people who have undergone the training have already secured employment in the care sector a continued investment in Gibraltar's care and in Gibraltar's employment.

Furthermore, the Care Agency continues to offer ETCL and GRAD trainees the opportunity to have 'on the Job' training and experience giving them the potential to apply for a vacancy within the Care Agency after gaining the necessary skills to undertake the work and since this initiative commenced we have already employed in the Care Agency 63 people who started their placement in the Care Agency either through ETCL or the GRAD scheme, another success story.

Mr Speaker, I will turn to the different services of the Care Agency, starting with

(a) Elderly Residential Services

One of the major achievements this year has been the fruition of negations with Unite the Union in relation to the nursing and nursing allied professionals who work in Elderly residential services of the Care Agency, essentially what used to be the Elderly Care Agency prior to the merge in 2009. Care Agency staff working in this sector were transferred to the GHA effective from the 1st November 2013 and now enjoy parity with their GHA counterparts on the basis of equal pay for equal work. The staff are deployed to the Care Agency under the Management of Elderly Residential Services

In this process, the new agreement of Agenda for Change has been applied to all Elderly Care nursing staff, this claim was ongoing for over 4 years, ignored by the previous administration. I must take this opportunity to thank all from the Care Agency and Unite who formed part of the working group, the Care Agency and GHA management who enabled the smooth transition of the process and particularly the Care Agency finance team who calculated the payment of arrears in record time.

The new regime has had a positive impact on the working conditions of this collective. Subsequently, the re-structure of the nursing workforce supposes an increment of the hours of care provided for the elderly.

It must be noted that since the new working shifts post the commencement of the new working arrangements there has been a significant decrease in the need for overtime if at all, so while there has been increased expenditure due to the increase

in salaries, there have also been very significant savings.

Yearly updates on mandatory training for nursing staff are being carried out, as part

of their continuous development. Collaboration with GHA professionals has been

maintained since last year, providing in house training in many different areas of

nursing for Elderly Care staff. In addition to that, accredited modules run through the

School of Health Studies have been available for Elderly Care nursing Staff, and

furthermore, in conjunction with the School of Health Studies, and GHA librarian,

there is a project to open a nursing library in Mount Alvernia, in order to improve the

resources available for the nursing collective of Elderly Care.

Charge Nurses/Team Leaders have attended to a Leadership and Management

Course, something which had never been done before in the service.

There has been a campaign of Awareness on Safeguarding Adults at Risk,

organized by professionals from GHA, in collaboration with the Safeguarding Adults

Committee. A further Basic Awareness course on Safeguarding adults is undergoing

at present, for frontline professionals of both organizations.

A rotation of charge nurses on night duty has been implemented, providing a support

and supervision framework of the night duties of the nursing staff. Satellite services,

such as JCW, CW and the Jewish Home receive now nightly visits of a charge

nurse, something that had never occurred before, and the premises was run by staff

with no support of Nursing Management.

All policies are under review, with an aim of updating all procedures throughout the

Elderly Residential Service.

As from March 2014, a Speech and Language Therapist has been allocated to

Elderly Services. This is an achievement, as in the past the residents requiring

assessment had to wait weeks, even months, before they were assessed by these

professionals.

In our service we do not only care for the residents, we also care for their relatives and, we have arranged for 2 informative essions for relatives of people suffering dementia to be organized at Mount Alvernia, with the support of GHA health professionals. It has been an innovative, successful and welcomed initiative and will continue during this year on a regular basis.

Finally I cannot talk about Mount Alvernia without referring to the iconic structure that has been in place for over 10 years. I am of course referring to the scaffolding which was initially erected to repair those balconies 10 years ago but have been in place so long that the scaffolding itself has dilapidated and required replacement and the deterioration of the balconies itself was such that the scaffolding is now supporting the balconies. I am delighted to announce that the balconies are finally being renovated and the works will be ready by the end of this month, once complete not only will this enhance the façade of the building, but also the quality of life of the residents who will be able to access them again after years. Also, they will be able to enjoy the spectacular views after years of scaffolding blocking their vision.

The retaining wall on the East face of Mount Alvernia will also be repaired after years of requests and being ignored.

Our elderly care facilities are being expanded and this will enhance the care that we can provide in the future. The RHN residential facility for people with dementia will be ready by the end of the year and we have already opened a new facility at the John Mackintosh Home, albeit partially at the moment. At present it provides for residents of the Jewish Home on a temporary basis while this facility is being refurbished and in addition there are 10 long term patients from the GHA.

The service is under constant review of course, to ensure that all provisions and requirements for the welfare and safety of its occupants were met. A complete new approach to the concept of the building was required after the fiasco and waste of money by previous government, causing a minor delay to the works and therefore to its opening. Professionals from both GHA and the Care Agency have worked together to make this project viable, safe and secure for the service users.

Once the Jewish Home residents are relocated to the refurbished Jewish Home there will be a total of 54 residential beds available for the elderly.

The much needed refurbishment of the Jewish Home is now forthcoming. The

building requires a full refurbishment due to the sorry state that it presents, inherited

from the lack of action of the previous administration, because that's what happens

to buildings when they are not maintained and they are not kept up, they just

dilapidate and then repairs become more expensive but at least we are getting on

with it.

The Jewish community will of course have an input in the design and works to be

carried out to the building, to ensure that their religious requirements are met.

Before I turn to the other services of the Care Agency i must give credit to the

nursing co-ordinator and her team who have been at the forefront of the transition

process and have made the opening of the new facility at JMW possible.

Social Services

Turning to social services, Mr Speaker this is comprised of four teams: children and

families, adults, drug rehabilitation and disabilities.

I can now state with pride that for the first time ever in the history of social services,

the complement of Social Workers will be fully filled by September this year bearing

in mind that our complement of social workers is now higher than ever before. We

have entered into an agreement with a recruitment agency in UK which has enabled

a faster response in the recruitment process. The days when it took an extraordinary

length of time to recruit are now over. Let me add that in the interim while vacancies

are being filled substantively we have engaged supply cover until the recruitment is

achieved so the service is not affected and does not suffer.

We have also in this financial year added 4 new posts to enable newly qualified

social workers to come into the service. This new post will be provided with a

programme of training and supervision that will equip them to apply for jobs as social

workers as soon as they have acquired the necessary experience.

The professional development continues with increased training for social workers.

One of the strategic priorities for this year is the investment holistic procedures that will incorporate all authorities involved in social care. These procedures will be produced for three of the services, Children and Families, Adults and Residential. The procedures will ensure the safeguarding of our vulnerable people in a

It is envisaged that the project should be completed by the end of this financial year. This will depend on how the consolidation of all existing procedures and adaptation to legal advancements is affected. I want to emphasize that a lot of the advancements and positive developments we have now achieved in Social Services is the result of working on an inter agency basis and we have now been able to formalise a good working relationship with the GHA, the department of Education and in particular the RGP and their safeguarding unit and the benefits of this are very apparent.

Mr. Speaker, I will now explain the roles and what we are achieving within the services of each team and sub-team.

Children and Family Services

coordinated manner that all agencies can follow.

The Children and Family Services is comprised of a number of different services providing for children and their families when in need. The main ethos this service works under is that children thrive when loved and cared for, and generally this is within a family unit. Early intervention is essential so as to ensure children do not need placements outside their homes. Although Safeguarding and Child Protection is what usually gets into the public arena, it is the work that is invested into the early stages that ensures that families move on from crises, and resolve their difficulties, because we are now changing our strategy in terms of child protection and focusing on our resources and emphasizing in preventing crises from happening, because early intervention helps avoid family breakdown, criminality, domestic abuse, and substance misuse amongst others which is why we are investing in processes allowing for this approach it will prevent further pressure on a range of services such as care, health, education.

In keeping with our early intervention strategy we have introduced an additional service the Parent and Child Parenting Assessment Programme. This serves both as an assessment and as a programme whereby the Parent can acquire the necessary skills to be able to care for their child at a good enough level; and in some cases avoid the child entering the Care System altogether.

(Duty Team)

As part of the restructure of the social services following our review, we introduced a duty team as a first point of contact for referrals, this year we have seen a growth post of a Social Work Manager in this Team. This has enabled the development of databases to gather information so as to highlight the trends within society, and where the needs lie.

A new initiative this year has been the development of protocol and a database for domestic abuse, this has highlighted families where this is a common occurrence and intervention is required; however it has also helped identify families where this difficulty has begun to arise, and support is offered so couples can learn to resolve their issues without this impacting on their children.

As part of the development of the Agency's domestic abuse strategy, a new initiative , something that never occurred to the GSD when they were in office, two Social Workers and the Agency's Psychologist will attend a Training Programme so as to deliver workshops with Victims of Domestic violence. They will also deliver and work with the perpetrators of Domestic Abuse. It is no longer good enough to safeguard and protect victims and their children. We have recognized that the perpetrators continue to act out a behaviour they have learnt, and punishment in itself is not the only solution. These perpetrators will continue to act their behaviours; they continue to be parents, and must be assisted in making the necessary changes.

As we change the focus from reactive to preventative we are developing the long term team.

We are in the process of a complete review of the fostering and adoption service and

there is now a dedicated Adoption and Fostering Social Worker. This service is now

offering support to pre-adoption placements, pre-adoptive parents, and foster carers.

Support provided is in terms of one to one, and formal training and supervision will

be offered shortly as part of the development work within this Service.

Furthermore, the Adoption and Foster Panel who sits to review Adoption and Foster

care applications, Foster Carers, and Home-Study Reports will receive training at the

end of this year to ensure they meet the competences required to perform their

duties.

The Court Welfare Team continues to advise the Courts on children issues relating

to their parents' separation. The parenting programme is currently under review so

as ensure it is meeting the needs of changes within our society, in terms of

parenting.

Respite is provided for children with disabilities following assessment. This is offered

by way of care packages within the community and when necessary, in residential

care.

Residential Services

A working party has been established in order to carry out a review of the residential

services. The review will provide information on two critical issues. The principal

issue is that of how we are caring for the children and whether the model being used

is the better option. This review will also look at the issue of resourcing and the

management structure. A Working Party has been formed for this purpose and will

be looking also at all aspects and issues relating to children with challenging

behaviour as well.

Adults Services

Adult Care Services has been able to focus services to the most vulnerable adults

within our community through the one point of referral system which was introduced

when we came into office. Management of the one point entry system into elderly

care, to include domiciliary care, day centres and residential care has proved

extremely successful and has provided care needed to the most vulnerable clients

within our community when they were in need of support without the creation of endless waiting lists. There is now a needs led criteria when considering who is

most in need of the services.

From the 1st April 2013 to the 31st March 2014 the Adult Team have received a total

of 540 referrals from people ranging from professionals working in different agencies

to relatives and neighbours concerned about people in the community. Referrals

have increased by 119 from the previous year alone. This number is increasing on a

monthly basis as our community realise services offered by social services are no

longer stagnant but available to those who really need them.

I am pleased the new systems implemented continue to ensure that all services are

allocated in a fair and equitable way based on each person's individual health and

social care support needs.

The services being provided for the elderly people in our community continue to be

developed and increase at a significant and dramatic rate.

This year there have been a total of 53 admissions into Mount Alvernia, John

Cochrane and Calpe wards. Of these, 22 were of persons in the community that

were at high risk and required admission to avoid a serious incident or hospitalisation

and 31 were admitted from hospital after being deemed to be long stay patients,

unable to return home as they required 24 hour care. The change introduced by us

to the admissions criteria has resulted in the most needy people being admitted first

regardless of their time on the waiting list.

Domiciliary Care Services continue to be provided by two providers and an

additional 125 people have been granted domiciliary care this year. This means that

by the end of the financial year we were providing domiciliary care to 229 people,

more than trebling the number of people provided with this service since we came

into office because at that point only 75 people were receiving this service.

Additionally, 51 clients already in receipt of domiciliary care were granted further

hours. I am proud to say that we are providing more domiciliary care than ever so

many vulnerable people are benefitting from this initiative.

The newly introduced reviewing service for domiciliary care is working well. The new reviewing officer also carries out a quality assurance role which helps the Agency keep checks on the private providers ensuring clients receive the best possible care.

The Agency is now working seamlessly with colleagues in the GHA. Out of the new domiciliary care recipients 74 people were awarded care packages on discharge from hospital to expedite their recovery and integration back into the community. This together with increased admissions into Mount Alvernia reduced the amount of long stay patients in hospital which before would have blocked hospital beds as people would be unable to survive in the community without support. Social workers now attend hospital MDTs on a weekly basis and support the discharge planning process by assessing patient needs and putting packages of care in place that will meet the patients' needs and prevent future readmissions into hospital.

I am very proud to say that the new day centre which we promised on our first year of office is now fully operational and is providing a service to so many elderly in the community. This purpose built day centre is certainly one of the jewels in the crown of the Care Agency. It provides a therapeutic and welcoming environment for elderly who otherwise would be isolated in the community. It provides a service that also monitors their needs on a weekly basis and becomes a point of quick referral to social workers if their circumstances change and they require more support.

Five social workers have been trained in investigating officer and Safeguarding lead Manager roles within safeguarding adult at risk procedures. Social workers have had Placements in the UK on hospital discharge and assessments of care packages in the community. Social workers have trained in conjunction with the RGP in order to become designated risk managers of sexual offenders in Gibraltar and to be part of the Gibraltar Public Protection Arrangements and support other departments in the management of high risk offenders. And here is where the Social Services' close working relationship with the police is particularly important.

Social Services now have 137 clients receiving a quick response service. They are being contacted on a monthly basis by the Elderly Needs Coordinator and are being

monitored through phone calls and police visits. This ensures the most vulnerable in

our community are not at risk and this is another fantastic new initiative that we have

introduced.

Disability Service

The service has improved greatly and I said so last year and explained why and we

have improved again this year. We have worked on the objectives set down in the

2013 Business Plan with the aim of carrying on with greater improvements to

develop the standard and quality of care at Dr Giraldi Home and St. Bernadette's

Resource Centre.

Once again we have embarked in a robust training programme to further develop

employees professionally and extensive in-house and external training courses

undertaken during this year.

During the period April 2012-March 2013 the total number of training attendees was

161 members of staff (including St. Bernadette's Resource Centre and Dr Giraldi

Home staff) and the total hours of training provided was of 286.5 hours.

This year training during the period April 2013-March 2014 the total number of

training attendees was 497 staff members (again, including St. Bernadette's

Resource Centre and Dr. Giraldi Home staff) and the total hours of training provided

was of 624.5 hours.

The total increase of training attendees between 2012/2013 and 2013/2014 has

been 300% and that is year to year in our administration, if we were to compare it to

the little or no training provided before 2011 the comparative statistics are shocking.

All medication, environmental and documentation audits have been reviewed.

These audits are carried out on a monthly basis, allowing any issues to be

addressed quickly.

I am pleased to inform that the outcome of the last Environmental Agency visit at Dr.

Giraldi Home in February was that everything was found to be in good order, to the

extent that for the first time there was no submission of any advice/comment form for

improvement.

Our liaison strategy with various Government departments is now established and

produces very positive results.

We have built a very effective and professional relationship with relevant GHA

departments

We have provided training to the Gibraltar Royal Police on Learning Disabilities.

We continue networking with other Government Departments and different sectors

of the community. We have specific team members appointed as liaison officers with

different groups/societies. This has created a strong and effective communication

route with the following societies:

Down Syndrome Support Group

Gibraltar Disability Society

Special Olympics

The Autistic Association

Society for the Visually Impaired

Gibraltar Diabetic Association

Additionally:

Parents/Relatives are well informed and have easy access to the services and

managers and monthly meetings with parents/relatives are held at St Bernadette's

Resource Centre, Respite and Sitting Service to keep families informed and to

obtain feedback.

The home has also been refurbished recently and we have also introduced a further

flat so as to be able to increase the respite facilities that we can offer.

We now have a structured program of activities in order to enrich the Service User's

social environment and we encourage them to engage in meaningful activities in the

community. They are undertaking numerous activities too long to list but they

include things like attending supported holidays of their choice, participating in

various charity events, but importantly residents from Dr Giraldi and service users of

St Bernadette's are now undertaking work placements supported by staff. This is a

very important initiative which gives them confidence and a structure to their day, in

fact we have 6 service users who are currently in employment.

This year we have had an increase in admissions to both Dr Giraldi and St

Bernadette's resource centre. Both to the residential and the respite service and we

have therefore had to accommodate for these growing needs.

We have very importantly developed a Transitional Policy has been developed for

the Transition Pathway (children with learning disabilities moving into Adults

Services in Gibraltar). This has been done in conjunction with Social Services, the

Department of Education.

•Official Policies and Procedure Manual Guidance for staff implemented at St.

Bernadette's Resources Centre in September 2013.

A General Policy File with Care Agency Policies has been distributed to all flats at

Dr. Giraldi Home and St Bernadette's.

I am particularly grateful for everyone who works in the disability service because of

the huge improvements that they have achieved during the year.

Drug rehabilitation

This past year has seen considerable investment in the physical fabric of Bruce's

Farm Rehabilitation Centre. The facilities have already seen a significant

transformation which has enhanced the safe and comfortable therapeutic

environment we aim to create for persons suffering from various forms of addictions

and which is more conducive to their successful recovery.

However, this by itself would be futile if we had not addressed the underlying causes

which were preventing many persons from accessing treatment. We have worked

hard to simplify the onerous and archaic systems and processes that prospective

applicants had to contend with in the past. All agencies that link into drug treatment

from Social Services, health professionals and voluntary bodies now work closely to

ensure that the applications from any person wishing to be admitted to Bruce's Farm

are dealt with expeditiously.

The results of these changes speak for themselves; since 2012 admissions to

Bruce's Farm have increased year upon year. In fact in 2013 Bruce's Farm saw 49

admissions, the highest number in ten years and over double the number of

admissions from 2011. That is how badly Bruce's Farm, when managed by the GSD

administration, was failing people with addiction problems in our community.

I recently announced that we had re-established formal contacts with Broadway

Lodge, one of the longest established and respected rehabilitation centres in the UK.

This has opened a new and exciting chapter in the transformation of Bruce's Farm.

We are currently working on developing a partnership which will include staff

training, consultancy and staff placements.

I have always advocated for the inclusion of the voluntary sector and ex-service

users as important stakeholders in how the service develops. Since assuming office

my open door policy towards groups such as Families, Alcoholics and Narcotics

Anonymous has yielded very real and positive results. During our refurbishment

numerous members of these groups have given of their time to undertake voluntary

work within Bruce's Farm something that rarely happened in the past.

In my maiden budget speech I referred to Bruce's Farm as being 'out of sight and out

of mind'. Clearly this is no longer the case.

I would like to announce today a new initiative that we will be introducing at Bruce's Farm and that will be a top up admission service available to people who are in recovery, similar to a weekend retreat. It will be offered to anyone who wishes to take it up having undergone the 12 step programme, the aim of this is to provide continued support to avoid relapse.

In the past I have referred to how we needed to develop our community and outreach support for those who were unable to commit to residential rehabilitation for varying reasons. Over the past year we have firmly established such a service which is operated by two counsellors from Bruce's Farm who operate for part of their week from the Gladys Perez Centre. They provide an invaluable service not only to those who complete treatment but also to those who suffer from the fallout of addiction particularly their families.

One important and very significant development has been the addition of one further counsellor who will be based within the community on a full-time basis. This additional post will also enable us to provide a service to the prison where we will be able to roll out a comprehensive rehabilitation programme for the first time ever. This has created additional rehabilitation routes to complement the work undertaken at Bruce's farm and will make decisive inroads in addressing the well documented link between drugs and crime, which I referred to in my last budget speech.

On the drugs awareness front we have continued to work closely with statutory and official bodies, including law enforcement and various sporting associations. There are many events that the Care Agency has sponsored where the anti-drugs message has reached literally thousands of children. This includes the Mini-Olympiads in partnership with the RGP as well as many other events throughout the past year such as football, basketball and volleyball tournaments. The public will have also become familiar with our high profile campaigns that we have conducted together with the RGP to address issues of concern such as binge drinking and at peak periods such as National Day and Christmas.

Our on-going drug awareness workshops in all educational establishments from middle schools onwards have continued over the past year. The Care Agency has worked in close partnership with the very dedicated team at the RGP and recovering addicts, to great effect, to ensure the best possible outcomes for young people who

may be exposed to the risks of drugs.

At a strategic level, members of the Drug Strategy Group formed last year led by myself have continued to work together we have attended key conferences in Strasbourg and Brussels where we have established valuable contacts with leading figures in various areas that will inform how we will develop our strategic responses to the challenges posed by drugs within our community. So far this year our priority has been in getting our facilities and services that we deliver right so that we can

now progress to continue working on these matters on a strategic level.

Finally on the point of drugs I will announce that the Care Agency will be introducing a substance abuse policy. We provide a service where we care for the most vulnerable and we cannot risk that anyone be under the influence. More importantly the policy is not aimed at catching people out but rather offering support where people have an addiction problem. That is why it is imperative that resources such as Bruce's Farm and the community counselling service work as these services will

offer support.

Finally, I am responsible for the funding of many charities and community bodies.

I would like to refer to the Gibraltar Clubhouse and I will echo what the Minister for Health said yesterday what a wonderful job this organisation is doing. We work very closely with them and support them. Last year we provided them with temporary premises and rescued them from dilapidating premises they had been allocated at Toc H which were abysmal and this made all the difference to the people to whom

they provide a service but we are working together towards other premises.

I would like to take this opportunity to thank all these charities and community organisations who work with me. I will not list them all given that there is so many. Because they know that my door is always open I am grateful for the meaningful engagement as we progress to improve services in consultation together and I would

also like to thank both unions for the work that we have done together in the past

year.

This budget shows a real investment in the services with tangible results but the job

is not easy as I am still dealing with many skeletons and gaps and problems

inherited in the service, but a lot of progress has been made and this is thanks to the

dynamic teams that work and support me and were it not for them, the changes and

improvements to the service I have alluded to would not have been possible.

I particularly want to thank my Ministerial team for all the work that they do

continuously.

We will not lose sight of all that still needs to be done and will not take our foot off the

pedal - it is full speed ahead and we continue to meet all our manifesto

commitments as well as develop other necessary initiatives.

Mr Speaker, we will continue to deliver.