

Wednesday 8 January 2014

## SCOTTISH GOVERNMENT

### Health and Social Care

**Lewis Macdonald (North East Scotland) (Scottish Labour):** To ask the Scottish Government how much NHS Grampian will receive in revenue allocation in (a) 2013-14 and (b) 2014-15 and how much it would receive if the NHSScotland Resource Allocation Committee formula was implemented in full.

(S4W-18767)

**Alex Neil:** NHS Grampian received a revenue allocation of £743.8 million in 2013-14. Full implementation of the NHSScotland Resource Allocation Committee formula would have given an allocation of £776.6m.

The 2014-15 Budget Bill is in the process of being scrutinised by Parliament. NHS board allocations for 2014-15 will be announced following approval of the Bill. It is the approach of the Scottish Government that those boards that are behind parity will receive additional funding each year to bring them closer to parity, whilst not destabilising other boards.

**Lewis Macdonald (North East Scotland) (Scottish Labour):** To ask the Scottish Government what changes were made to NHS Grampian's budget to achieve NHSScotland Resource Allocation Committee parity in each year from 2007 to 2015.

(S4W-18768)

**Alex Neil:** The NHSScotland Resource Allocation Committee (NRAC) formula was introduced in 2009-10. For the years 2009-10 to 2013-14, additional funding was provided to NHS Grampian to support movement towards NRAC parity:

2013-14	£10.6 million
2012-13	£7.4million
2011-12	£4.7million
2010-11	£1.8million
2009-10	£2.1million

It is the approach of the Scottish Government that those boards that are behind NRAC funding parity will receive additional funding each year to bring them closer to parity, whilst not destabilising other boards.

The 2014-15 Budget Bill is currently being scrutinised by Parliament and NHS boards will be informed of their 2014-15 allocations following the approval of the Bill.

**Mary Scanlon (Highlands and Islands) (Scottish Conservative and Unionist Party):** To ask the Scottish Government how much money a GP practice receives to provide a dispensing pharmacy service.

(S4W-18846)

**Alex Neil:** There is no fixed amount.

Payments are made up of two elements: remuneration, paid for each prescription written plus an on-cost payment, and; reimbursement, in respect of the items dispensed. Full details are set out in Section 18 of the *General Medical Services Statement of Financial Entitlements for GPs in Scotland*, which is published annually. The current version, for 2013-2014, is available on the Scotland's Health on the Web website at: [www.sehd.scot.nhs.uk/pca/PCA2013\(M\)09letter.pdf](http://www.sehd.scot.nhs.uk/pca/PCA2013(M)09letter.pdf)

**Mary Scanlon (Highlands and Islands) (Scottish Conservative and Unionist Party):** To ask the Scottish Government whether GP practices must lose staff when they cease to provide a dispensing pharmacy service and, if so, for what reason.

(S4W-18847)

**Alex Neil:** The level of staffing of a GP practice is a matter for the practice itself.

**Mary Scanlon (Highlands and Islands) (Scottish Conservative and Unionist Party):** To ask the Scottish Government whether GP dispensing pharmacies can offer a minor ailments or chronic medication service and what the reasons are for its position on this matter.

**(S4W-18848)**

**Alex Neil:** The minor ailment service and the chronic medication service are additional pharmaceutical services, and by statute may only be offered by community pharmacy contractors on the pharmaceutical list of an NHS board.

**Mary Scanlon (Highlands and Islands) (Scottish Conservative and Unionist Party):** To ask the Scottish Government what it is doing to assist people with mental health issues to stop smoking.

**(S4W-18849)**

**Michael Matheson:** Smoking cessation support for people with mental health issues is available throughout Scotland via local stop smoking services.

Individual treatment plans for all patients, including patients with mental health conditions, should be developed taking into account current smoking cessation guidance and recommendations. Current guidance identifies people with mental health issues as a priority group.

Smoking cessation services receive £11 million per annum (allocated directly to NHS Health Boards) from the Scottish Government to provide this service. A review of smoking cessation services is currently underway and will include specific recommendations on delivering services that are person centred and supports the needs of the individual no matter their personal circumstances. The review will report in 2014.

**Mary Scanlon (Highlands and Islands) (Scottish Conservative and Unionist Party):** To ask the Scottish Government how it ensures that people with mental health issues receive the same level of NHS care and treatment as for physical health issues.

**(S4W-18850)**

**Michael Matheson:** The Scottish Government funds NHS boards and their partners to provide high quality health care that meets the needs of their local populations.

The Scottish Government has prioritised mental health and continues to work to give it parity with other health conditions. The Mental Health Strategy (2012–2015) is fully consistent with the NHS 2020 Vision for all health care, including physical health issues, that everyone is able to live longer healthier lives.

In relation to ensuring we have the same level of NHS care and treatment for people with mental health issues as for physical health issues, the Scottish Government works closely with NHS partners to implement improvement that is based on a shared understanding of the goal that is to be achieved, that uses data to understand what is happening at national and local level, that identifies early gains to create momentum and confidence, and that builds in improvement support to share and develop learning and that puts in place a clear performance and accountability framework.

**Mary Scanlon (Highlands and Islands) (Scottish Conservative and Unionist Party):** To ask the Scottish Government what is being done to assist patients in psychiatric hospitals to stop smoking.

**(S4W-18854)**

**Michael Matheson:** All patients in psychiatric hospitals will have access to support from dedicated NHS smoking cessation services.

While existing smoke-free legislation includes an exemption for designated rooms in psychiatric hospitals and psychiatric units, national guidance was issued in 2011 to help service providers move towards a smoke free mental health service. This guidance stresses the importance of effective smoking cessation support and lays out detailed recommendations on service delivery.

Our latest strategy builds upon the aspiration for smoke free mental health facilities by setting a target that mental health services should ensure that indoor facilities are smoke-free by 2015.

**Mary Scanlon (Highlands and Islands) (Scottish Conservative and Unionist Party):** To ask the Scottish Government what it is doing to ensure that people with mental health problems have equal access to diagnosis and treatment across the NHS.

**(S4W-18855)**

**Michael Matheson:** Some people can experience more difficulty than others in accessing mental health services to meet their needs. This can be because some groups are less likely to try to access services, for example due to stigma, or because there are gaps or lack of capacity in some services. We are committed to combatting the stigma and discrimination that can be associated with mental health problems. The Scottish Government is committed to work with NHS boards and partners to improve monitoring information about who is accessing services, such as ethnicity, is consistently available to inform decisions about service design and to remove barriers to services (Commitment 14).

We introduced the HEAT targets for access to Child and Adolescent Mental Health Services (CAMHS) and psychological therapies. Across Scotland we delivered the 2008-11 targets to improve diagnosis of dementia, which has been replaced by a HEAT standard. To build on this, the first national target on post-diagnostic support began in 2013. This is underpinned by a commitment that everyone diagnosed with dementia from 1 April 2013 should receive a minimum of a year's worth of post-diagnostic support, coordinated by a named link worker.

We have worked with the management group of *see me*, with the Scottish Association for Mental Health and the Mental Health Foundation who host *see me* and with other partners to develop the strategic direction for *see me* for the period from 2013 onwards.

The Scottish Government's approach to supporting service improvement includes having a focus on information to tell us how well our system works and where the opportunities are for improvement. We continue to develop the Mental Health Benchmarking Toolkit and the CAMHS Balanced Scorecard as tools to support service improvement, by using a range of comparative information to identify gaps and opportunities for improvement and to monitor progress. We also introduced the HEAT targets for access to CAMHS and psychological therapies.

NHS boards are also responsible for monitoring information about who is accessing services so they can ensure that local services are meeting the needs of their local communities.

**Neil Findlay (Lothian) (Scottish Labour):** To ask the Scottish Government what actions (a) it is and (b) NHS boards are taking to ensure that junior doctors' hours comply with the European working time directive.

**(S4W-18860)**

**Alex Neil:** Our dedicated medical workforce adviser works with NHS boards to ensure that rotas comply with the required legal and contractual guidelines. No junior doctor rotas in NHS Scotland can be implemented without the approval of this adviser.

NHS boards undertake twice yearly monitoring of junior doctors rotas to ensure they continue to comply with the working time directive. In this exercise, junior doctors self-monitor by recording the hours they work over a minimum period of two weeks. This information is then analysed by NHS boards and the results reported to the Scottish Government's medical workforce adviser, as well as to junior doctors.

We also fund software (doctors rostering system) which ensures NHS boards have the relevant tools to design legal compliant rotas.

We continue to work with NHS boards and professional bodies to review best practice and how this can be used to improve the working lives of junior doctors, and we meet on a regular basis with the British Medical Association to provide reports on compliance with contracts and the working time regulations.

We have been investing in medical staff and since September 2006 there has been an increase in the number of doctors working in hospitals in NHS Scotland. Junior doctor numbers have risen from

5,336.1 to 5,796.7, an 8.6% increase, Consultant numbers have risen from 3,636.5 to 4,665.8, a 28.3% increase and speciality doctor numbers have risen from 810.3 to 1,042.9, a 28.7% increase.

**Neil Findlay (Lothian) (Scottish Labour):** To ask the Scottish Government how the NHS (a) monitors and (b) records the hours worked by junior doctors.

**(S4W-18861)**

**Alex Neil:** Under the New Deal Contract, NHS boards are required to monitor the hours of work for junior doctors twice per year.

In this exercise, junior doctors self-monitor by recording the hours they work over a minimum period of two weeks. This information is then analysed by NHS boards and the results reported to the Scottish Government's medical workforce adviser, as well as to junior doctors involved.

Junior doctors can, at any time, request to be monitored and NHS boards must comply with this request. They can also request that the monitoring itself is independently verified by the medical workforce adviser.

**Neil Findlay (Lothian) (Scottish Labour):** To ask the Scottish Government what average hours have been worked by junior doctors in each NHS board area in each of the last six years.

**(S4W-18862)**

**Alex Neil:** Since 1 August 2009 all junior doctor rotas in NHS Scotland have been designed to meet the requirements of the working time regulations, which limits working hours to 48 hours per week on average over a 26 week reference period.

Before this, the new deal contract, limited hours to up to 56 per week which was averaged over the course of the agreed rota.

**Neil Findlay (Lothian) (Scottish Labour):** To ask the Scottish Government what action it has taken in response to the issues highlighted in the General Medical Council's 2013 National Training Survey.

**(S4W-18863)**

**Alex Neil:** The Scottish Government welcomes the publication of this important national survey as understanding the views of trainees and trainers is essential to monitoring and improving the quality of postgraduate medical education and training.

NHS Education for Scotland (NES) is tasked with quality management of postgraduate medical education and training in Scotland.

Feedback from the National Training Survey (NTS) is triangulated against the NES Scottish Trainee Survey and other data sources and then compared with previous years' responses. This analysis generates an action plan that is based on either the strength of available evidence about an issue, or the need for further evidence. The action plan comprises either a) visits by training leads from NES that typically focus on specific cohorts of trainees, in particular specialties and in particular locations or b) specific requests for clarification directed typically to the Directors of Medical Education employed in NHS Scotland health boards.

When the issues that have been flagged via the NTS are verified, a specific action plan detailing areas for improvement is shared with the health board (or GP practice) with a timeline for implementation and instructions for evidencing improvement.

**Neil Findlay (Lothian) (Scottish Labour):** To ask the Scottish Government what action (a) it is and (b) NHS boards are taking to stop the practice of junior doctors working seven consecutive night shifts.

**(S4W-18864)**

**Alex Neil:** Since 2009 the Scottish Government has been advising NHS boards to eliminate the practice of junior doctors working seven nights in a row. Over 97% of rotas in Scotland have now eliminated this practice, with the remainder under review to identify alternative patterns.

**Neil Findlay (Lothian) (Scottish Labour):** To ask the Scottish Government what action (a) it is and (b) NHS boards are taking to improve the wellbeing of junior doctors.

**(S4W-18867)**

**Alex Neil:** The working hours of junior doctors are set and controlled by the new deal contract and the working time regulations, both of which set limits of the number of hours a doctor can work, and ensure that minimum periods of rest and time off are adhered to.

The Scottish Government has a dedicated medical workforce adviser who works with NHS boards, the British Medical Association (BMA) and junior doctors to ensure working hours limits are enforced and regularly monitored.

We also meet regularly with the BMA to discuss junior doctor working conditions and address any concerns they have.

**Patrick Harvie (Glasgow) (Scottish Green Party):** To ask the Scottish Government whether the Counsellors and Psychotherapists (Regulation) Bill introduced in the UK Parliament will apply to Scotland.

**(S4W-18881)**

**Michael Matheson:** The Counsellors and Psychotherapists (Regulation) Bill is a Private Members Bill proposed by Geraint Davies MP. Though the regulation of new groups is devolved, ministers of all four countries have committed to maintaining a consistent approach for healthcare professionals working across national boundaries. This Bill was introduced without the support of the UK Government and no Legislative Consent Motion has been passed by the Scottish Parliament. This legislation would therefore not apply to Scotland in the event it is passed into law by the Westminster Parliament.

**Mark McDonald (Aberdeen Donside) (Scottish National Party):** To ask the Scottish Government what guidance it has issued to NHS boards regarding the use of the Makaton communication system by health professionals.

**(S4W-18885)**

**Michael Matheson:** Makaton is one of a range of communication tools used to help children with communication difficulties. No formal guidance on the use of the Makaton communication system has been issued by Scottish Government to NHS boards, however in 2012 we published '*A Right to Speak: Supporting Individuals who use Augmentative and Alternative Communication*'. This document set out our vision for a Scotland where people who use augmentative and alternative communication are fully included in our society.

**Patrick Harvie (Glasgow) (Scottish Green Party):** To ask the Scottish Government whether it supports the objectives of the Counsellors and Psychotherapists (Regulation) Bill introduced in the UK Parliament.

**(S4W-18886)**

**Michael Matheson:** The Scottish Government works closely with the Department of Health, other devolved administrations and the regulators in the interests of patient safety. We believe that full statutory regulation should not be the default approach and support the Accredited Voluntary Registration scheme of the Professional Standards Authority for Health and Social Care as a proportionate, risk-based, alternative for new groups.

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government whether it has encouraged NHS boards to make ex-gratia payments for lesser injuries to resolve disputes at an early stage, as recommended in the *Report of the Expert Group on Financial and Other Support*.

(S4W-18887)

**Alex Neil:** I refer the member to the answer to question S4W-18890 on 8 January 2014. All answers to written parliamentary questions are available on the Parliament's website, the search facility for which can be found at:

<http://www.scottish.parliament.uk/parliamentarybusiness/28877.aspx>.

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government what steps it has taken to encourage the exchange of factual evidence prior to legal proceedings in the pursuit of claims, as recommended in the *Report of the Expert Group on Financial and Other Support*.

(S4W-18888)

**Alex Neil:** I refer the member to the answer to question S4W-18890 on 8 January 2014. All answers to written parliamentary questions are available on the Parliament's website, the search facility for which can be found at:

<http://www.scottish.parliament.uk/parliamentarybusiness/28877.aspx>.

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government how many structured settlements the Central Legal Office has made in each year since 2002.

(S4W-18889)

**Alex Neil:** The number of clinical negligence cases that have settled by either a Structured Settlement or Periodical Payment Order since 2002 is as follows:

Year	Structured Settlement	Periodical Payment Order
2002	-	-
2003	1	
2004	-	-
2005	-	-
2006	-	-
2007	-	-
2008	-	-
2009	-	-
2010	-	-
2011	-	3
2012	-	2
2013	-	-

Source: NHS National Services Scotland Central Legal Office

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government how it will follow up *A Study of Medical Negligence Claiming in Scotland* with regard to deliberations on the introduction of no-fault compensation.

(S4W-18890)

**Alex Neil:** The No-fault Compensation Review Group, chaired by Professor Sheila McLean, Glasgow University, was established in 2009 to consider the potential benefits for patients in Scotland of a no-fault compensation scheme. The group's report:

<http://www.scotland.gov.uk/Topics/Health/Policy/No-Fault-Compensation/ReviewGroupVol1>,

which published in February 2011, set out its views on the essential criteria for a compensation scheme and recommended that consideration should be given to the establishment in Scotland of a no-fault scheme for clinical injury, along the lines of the system in operation in Sweden. The group's recommendations go much wider than covering NHSScotland healthcare treatment alone, suggesting that were such a scheme developed, it should cover all clinical treatment injuries that occur in Scotland. The report also explored how a no-fault system might contribute to wider issues and this included how it might link with the complaints process. The report also suggested improvements to the current legal system for handling clinical negligence claims and where appropriate, these are being considered and taken forward as part of the Scottish Government's Courts Reform Bill.

*A Study of Medical Negligence Claiming in Scotland* was published in June 2012 (<http://www.scotland.gov.uk/Publications/2012/06/234>). This was undertaken by the researchers from Manchester University who supported the No-fault Compensation Review Group.

A public consultation on the No-fault Compensation Review Group's recommendations: <http://www.scotland.gov.uk/Publications/2012/08/4456> was undertaken by the Scottish Government between August and December 2012 in order to seek wider views, help in our understanding of the practical implications and assist in consideration of the scope and possible options for taking this forward. The responses to the consultation are available at: <http://www.scotland.gov.uk/Publications/2013/02/4882>.

I hope it will be possible to make an announcement shortly on the government's proposed way forward.

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government what action it is taking to reduce the complexity of the complaints system in the NHS, in light of the findings in *A Study of Medical Negligence Claiming in Scotland*.

(S4W-18891)

**Alex Neil:** The NHS Complaints procedure was reviewed as part of the Patient Rights (Scotland) Act 2011, which introduced a right to give feedback, comments, raise concerns and make complaints. A revised good practice guidance for handling and learning from feedback, comments, concerns and complaints about NHS health care services was provided in March 2012 and is available at: [http://www.sehd.scot.nhs.uk/mels/CEL2012\\_08.pdf](http://www.sehd.scot.nhs.uk/mels/CEL2012_08.pdf).

I also refer the member to the answer to question S4W-18890 on 8 January 2014. All answers to written parliamentary questions are available on the Parliament's website, the search facility for which can be found at:

<http://www.scottish.parliament.uk/parliamentarybusiness/28877.aspx>

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government how many ex-gratia payments NHS trusts and boards have made in each year since 2002-03 in relation to lesser injuries experienced by victims of medical accidents.

(S4W-18892)

**Alex Neil:** The information requested is not held centrally.

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government whether it will publish its legal advice regarding its powers to (a) award compensation and (b) make ex-gratia or other payments to the recipients of infected blood, as recommended in the *Report of the Expert Group on Financial and Other Support*.

(S4W-18893)

**Alex Neil:** It is the long-standing practice, followed by both the Scottish Government and the UK Government that the fact and content of any legal advice is not released outwith Government.

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government what steps it has taken to (a) develop counselling services, (b) develop advice and assistance in securing appropriate assurance and insurance, (c) set up a proactive publicity campaign to find recipients and (d) develop improved access to palliative care and symptom management services for people who acquired hepatitis C as a result of NHS treatment.

(S4W-18894)

**Alex Neil:** These recommendations stem from the *Ross Report of the Expert Group on Financial and Other Support* which was published in 2003. The hepatitis C (HCV) landscape in Scotland has evolved significantly since 2003, most notably via the Scottish Government's *Hepatitis C Action Plan*, which has been recognised globally as a model of best practice. As a result of the action plan we have

significantly increased clinical services for people affected by hepatitis C. We have more than doubled the number of people being treated for the virus every year and we have witnessed a 33% increase in the annual number of new diagnoses between 2006-07 and 2009-10.

The availability and effectiveness of antiviral therapies for hepatitis C has also evolved, and continues to do so. Most cases of hepatitis C can be effectively treated with current therapies, and the number of people who can clear infection through treatment is likely to continue to increase as new therapies become available over the next few years.

The *Hepatitis C Action Plan* recognised the importance of social support. Action 1 in the plan was for NHS boards to establish multi-disciplinary managed care networks (MCNs). These MCNs include representatives from social work, the voluntary sector, mental health as well as people living with and affected by hepatitis C. The Scottish Government also continues to provide direct funding to third sector organisations such as Hepatitis Scotland, Waverley Care, the Hepatitis C Trust, Haemophilia Scotland and the Scottish Infected Blood Forum. These organisations provide advice and support to those infected with HCV and raise awareness of the disease.

The Scottish Government does not recommend particular insurers but can provide lists of insurance companies and brokers that have been found helpful in relation to HCV. Since the publication of *the Ross Report*, both the Skipton Fund (2004) and Caxton Foundation (2011) have been established to make ex-gratia payments to certain people who were infected with HCV through treatment with NHS blood or blood products. The payments from the Skipton Fund and Caxton Foundation help individuals pay for premiums if they wish. The Scottish Government fully funds all Skipton Fund and Caxton Foundation costs for qualifying persons within Scotland.

In relation to proactive awareness raising campaigns the Scottish Government funded a national awareness raising campaign in 2008-09. The campaign sought to raise awareness of the signs and symptoms of HCV amongst the public and professionals, and to encourage testing.

In 2009 the Penrose Inquiry team called for patients who contracted HCV through receiving blood products and their family members to contact the inquiry to provide statements. This call for evidence was widely advertised across Scotland, including within pharmacies and GP surgeries.

**Richard Lyle (Central Scotland) (Scottish National Party):** To ask the Scottish Government how much it provided to the Association for the Victims of Medical Accidents in 2012-13 to contribute to the cost of providing a service in Scotland.

**(S4W-18895)**

**Alex Neil:** The Scottish Government has provided no direct financial assistance to the Association for the Victims of Medical Accidents in 2012-13.

**Margaret McCulloch (Central Scotland) (Scottish Labour):** To ask the Scottish Government whether it has included the town-centre-first principle in the NHSScotland Property Transactions Handbook.

**(S4W-18904)**

**Alex Neil:** *The Property Transactions Handbook* was last reviewed and published in 2011. A review of the Handbook has recently been commissioned with a view to updating it in the course of 2014. The handbook deals with the processes and procedures for the acquisition or disposal of property rather than covering the context of broader government policy. It would not therefore be appropriate to include specific reference to the town centre principle within the handbook. Business cases prepared by NHSScotland bodies for new or replacement facilities are however required to demonstrate their strategic fit with Scottish Government policy and therefore, where appropriate, the assessment of business cases will consider the town centre first principle. The handbook can be accessed at: <http://www.pcpd.scot.nhs.uk/PropTrans/PTHome.htm>.

**Mary Fee (West Scotland) (Scottish Labour):** To ask the Scottish Government how many consultants specialise in treating adults who have epispadias, broken down by NHS board.

**(S4W-18913)**

**Michael Matheson:** Information requested on how many consultants specialising in treating adults who have epispadias by each NHS board is not held centrally.

Table (a) shows the headcount of consultant urologists at September 2013. The available data does not indicate whether consultants specialise in treating adults with epispadias:

Consultant urologists (headcount)	2013
NHS Ayrshire and Arran	3
NHS Borders	-
NHS Dumfries and Galloway	1
NHS Fife	5
NHS Forth Valley	5
NHS Grampian	6
NHS Greater Glasgow and & Clyde	20
NHS Highland	3
NHS Lanarkshire	8
NHS Lothian	9
NHS Orkney	-
NHS Shetland	-
NHS Tayside	5
NHS Western Isles	-
NHS Scotland	65

Source ISD

**John Mason (Glasgow Shettleston) (Scottish National Party):** To ask the Scottish Government how many incidents of pyrotechnics being illegally used in football grounds were reported in (a) 2003, (b) 2004, (c) 2005, (d) 2006, (e) 2007, (f) 2008, (g) 2009, (h) 2010, (i) 2011 and (j) 2012 and have been reported in 2013.

**(S4W-18918)**

**Shona Robison:** The Scottish Government does not hold this information centrally.

We are aware however of the increasing concerns over the illegal use of pyrotechnic devices at football grounds. The Scottish Government are continuing to work with Police Scotland, the Crown Office and other stakeholders on the best way to highlight the potential dangers of the misuse of such devices.

I have asked Police Scotland to contact the member directly to ascertain whether they hold the information requested.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government whether it considers that young people should be able to access sexual health services in a non-clinical environment and, if so, how it is making such services available.

**(S4W-18940)**

**Michael Matheson:** Scottish Government policy states that it is essential that young people have access to sexual health services, advice and information when they require it. It does not prescribe the format that these services should take or whether these services should be provided in a clinical or non-clinical setting.

The decision on how sexual health services are provided and the most appropriate setting for young people to access these services is a decision for NHS boards and local authorities based on local requirements and following scoping of local needs.

**Kenneth Gibson (Cunninghame North) (Scottish National Party):** To ask the Scottish Government what steps it is taking to ensure that patients are able to see their GP timeously.

**(S4W-18951)**

**Alex Neil:** The Scottish Government knows how important it is for patients to have prompt access to services when needed and that is why there is in place a national standard of 48 hour access, or advance booking, to an appropriate member of the GP practice team during core hours. That access can be either a face-to-face, or telephone consultation with a GP or nurse in the practice team.

GP contractual arrangements are generally practice based with an emphasis on patient care being provided by the whole clinical team and not just by GPs and we have also incentivised GP practices to improve access through an enhanced service arrangement to extend opening hours beyond core hours. Scottish Government has invested over £13 million annually towards this service. The most recent uptake figures show that 80% of all practices now participate in the scheme.

The Scottish Government has an on-going commitment to primary medical services and we have successfully reached a negotiated settlement with the Scottish General Practitioners Committee (SGPC) for the General Medical Services Contract in Scotland for 2014-15 that, along with delivering a commitment to continuous quality improvement in each GP practice, will have real benefits for patients including improved access.

GP time will now be freed up allowing more time to be spent with their patients and we have a commitment that all GP practices in Scotland will now undertake an annual assessment of current patient demand, assessing both met and unmet need. The results will be shared with patients and NHS boards, and be used as the basis for discussion to make any necessary changes/improvements.

#### **Learning and Justice**

**John Pentland (Motherwell and Wishaw) (Scottish Labour):** To ask the Scottish Government what recent contact the Cabinet Secretary for Education and Lifelong Learning has had with EU officials in relation to tuition fees.

**(S4O-2751)**

**Michael Russell:** As I outlined to your colleague Drew Smith, earlier, ministers and officials have raised the question of student mobility with the EU Commission and other European leaders on a range of occasions since 2010. These have been useful discussions that will continue.

**Jackie Baillie (Dumbarton) (Scottish Labour):** To ask the Scottish Government whether it plans to introduce guaranteed access to wraparound childcare for parents of primary school children.

**(S4O-2764)**

**Aileen Campbell:** The Scottish Government appreciates that the need for childcare does not stop when children start school. That is why I have asked the Early Years Task Force to look at what sort of care could be offered for school aged children.

**John Wilson (Central Scotland) (Scottish National Party):** To ask the Scottish Government when its officials last met representatives of Central Scotland region education authorities.

**(S4O-2765)**

**Michael Russell:** Scottish Government officials regularly meet representatives of local authorities including those from Central Scotland education authorities to discuss a wide variety of education issues.

**Kenneth Gibson (Cunninghame North) (Scottish National Party):** To ask the Scottish Government what its education priorities will be in 2014.

**(S4O-2766)**

**Michael Russell:** The education priorities for 2014 are set out in '*The Government's Programme for Scotland 2013-2014*'.

**Neil Bibby (West Scotland) (Scottish Labour):** To ask the Scottish Government what its estimate is of the (a) total, (b) capital, (c) revenue and (d) other costs of providing (i) 600 hours of childcare to half of the country's two-year-olds, (ii) 1,140 hours of childcare to three and four-year-olds and vulnerable two-year-olds and (iii) 1,140 hours of childcare to all children from one to school age.

**Holding answer issued: 7 January 2014**

**(S4W-18709)**

**Aileen Campbell:** As set out in *Scotland's Future*, in its first budget after independence, the Scottish Government will commit £100 million to extend 600 hours a year of early learning and childcare to nearly half of Scotland's two year olds.

By the end of the first Parliament, vulnerable two year olds and all three and four year olds will be entitled to 1,140 hours per year of early learning and childcare, with a further investment of £600 million per year.

In the longer term, the aim is to provide 1,140 hours per year of early learning and childcare for all children aged one to starting school.

**Neil Bibby (West Scotland) (Scottish Labour):** To ask the Scottish Government how many of the estimated 35,000 new jobs to be created by its proposed increase in childcare provision will result from providing (a) 600 hours of childcare to half of the country's two-year-olds, (b) 1,140 hours of childcare to three and four-year-olds and vulnerable two-year-olds and (c) 1,140 hours of childcare to all children from one to school age.

**Holding answer issued: 7 January 2014**

**(S4W-18713)**

**Aileen Campbell:** The issue of workforce planning for the phased expansion of early learning and childcare set out within *Scotland's Future* will be considered by the Scottish Government.

**Neil Bibby (West Scotland) (Scottish Labour):** To ask the Scottish Government what the expected annual increase in tax revenues would be from providing (a) 600 hours of childcare to half of the country's two-year-olds, (b) 1,140 hours of childcare to three and four-year-olds and vulnerable two-year-olds and (c) 1,140 hours of childcare to all children from one to school age.

**Holding answer issued: 7 January 2014**

**(S4W-18719)**

**Aileen Campbell:** Improving access to high quality early learning and childcare reduces barriers to parents' participation in the labour market and is considered to be a crucial element of the wider equality and welfare policy package that would improve economic activity, particularly for females.

As an illustration, the Scottish Government has provided estimates of the potential long-run changes in key economic variables, including tax revenues that could result from increasing female labour market participation in Scotland to match some of the best performing countries in *The Organisation for Economic Co-operation and Development* on this measure. This analysis showed that, for example, matching the female economic activity rate in Sweden could increase tax revenues by around £700 million per annum in the long-term. Further detail on the results of this analysis is available in the note on childcare and female labour market participation at the link below:

<http://www.scotland.gov.uk/Resource/0043/00439259.pdf>

**Neil Bibby (West Scotland) (Scottish Labour):** To ask the Scottish Government what contingency it would put in place to fund its proposed increase in childcare provision in the event of fluctuations in employment levels.

**Holding answer issued: 7 January 2014**

**(S4W-18725)**

**Aileen Campbell:** As set in *Scotland's Future*, the Scottish Government has identified £600 million of savings or increases in revenue that would be implemented with independence, including ending the married couples tax allowance, cancelling the Shares for Rights Scheme, streamlining overseas representation, and ending Trident.

The Scottish Government will also undertake a review of the childcare cost structure, based on international examples, to ensure that our future investment in early learning and childcare achieves the best possible outcomes.

**Neil Bibby (West Scotland) (Scottish Labour):** To ask the Scottish Government what training costs would arise from its proposed increase in the number of people to deliver early learning and childcare provision.

**Holding answer issued: 7 January 2014** (S4W-18727)

**Aileen Campbell:** The proposals set out within *Scotland's Future* to increase early learning and childcare provision are phased over time, to allow for the building of capacity in the sector, including the recruitment and training of additional staff.

**Neil Bibby (West Scotland) (Scottish Labour):** To ask the Scottish Government whether it would (a) increase, (b) decrease or (c) maintain the current pre-school staff/child ratios in an independent Scotland.

**Holding answer issued: 7 January 2014** (S4W-18730)

**Aileen Campbell:** The Scottish Government has no plans to make changes to the current staff: child ratios for pre-school.

**Neil Bibby (West Scotland) (Scottish Labour):** To ask the Scottish Government with what organisations it discussed the costs for the proposed increase in childcare provision as outlined in its white paper on independence.

**Holding answer issued: 7 January 2014** (S4W-18731)

**Aileen Campbell:** The Scottish Government regularly discusses childcare, including the issue of costs, with a range of relevant organisations.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government, further to the answer to question S4W-18325 by Michael Russell on 28 November 2013, how many applications were unsuccessful in each year since 2009-10.

**Holding answer issued: 7 January 2014** (S4W-18783)

**Michael Russell:** The Scottish Government and the Student Awards Agency for Scotland do not hold this information.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government how many students at further education colleges who were awarded a Young Student Bursary in 2012-13 received (a) the maximum bursary, (b) £1,000 to £2,639 and (c) below £1,000.

**Holding answer issued: 7 January 2014** (S4W-18786)

**Michael Russell:** In 2012-13, 5,930 students attending a higher education course at a Scottish college were awarded the maximum Young Students' Bursary (YSB).

3,160 students were awarded YSB between £1,000 to £2,639.

1,210 students were awarded YSB below £1,000.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government, further to the answer to question S4W-18322 by Michael Russell on 25 November 2013, whether a young person leaving care (a) is assessed as independent and (b) can apply for (i) a Young or (ii) an Independent Student Bursary.

**Holding answer issued: 7 January 2014** (S4W-18788)

**Michael Russell:** A young person leaving care is assessed by the Student Awards Agency for Scotland as an independent student.

Students who have been in care and are under 23 at the start of each academic year are eligible to apply for a Young Students' Bursary. Those over 23 at the start of each academic year are eligible to apply for the Independent Students' Bursary.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government how many students were included in the category, income not declared/required, by the Student Awards Agency for Scotland because their income was low enough for them to receive a full support package in 2012-13 and how much in student loans was authorised for this group in 2012-13.

**Holding answer issued: 7 January 2014**

**(S4W-18789)**

**Michael Russell:** The breakdown of information is not held by the Student Awards Agency for Scotland.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government how many of the students in 2012-13 who were classified by the Student Awards Agency for Scotland as being exempt from parental contribution were independent or studying (a) part-time and (b) full-time at a further education college.

**Holding answer issued: 7 January 2014**

**(S4W-18790)**

**Michael Russell:** Student Awards Agency for Scotland (SAAS) operates separate support schemes for students in full time higher education and those in part-time education. Different funding arrangements apply.

a) SAAS only hold information on the total number of independent full-time students. It is not possible to identify the total number of independent part-time students.

b) In 2012-13, 7410 full-time students at a further education college were funded by SAAS that were classed as 'independent'.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government how much in loans was authorised by the Student Awards Agency for Scotland to meet the cost of tuition in other parts of the UK, broken down by residual household income.

**Holding answer issued: 7 January 2014**

**(S4W-18791)**

**Michael Russell:** The details in the following table show the amount of loans paid by the Student Awards Agency for Scotland to meet the cost of tuition fees in other parts of the UK:

All Scottish domiciled students studying in the rest of the UK receiving tuition fees by household residual income, 2012-13	Amount (£000s)
All	15,460
Less than £10,000	1,153
£10,000 - £19,999	1,511
£20,000 - £29,999	1,379
£30,000 - £39,999	1,019
£40,000 - £49,999	772
£50,000 - £59,999	548
£60,000 - £69,999	555
£70,000 - £79,999	358
£80,000 - £89,999	182

All Scottish domiciled students studying in the rest of the UK receiving tuition fees by household residual income, 2012-13	Amount (£000s)
£90,000 - £99,998	164
£99,999 and above	545
Income not declared/required	5,719
Exempt from Parental Contribution	1,555

Source: The Student Awards Agency for Scotland

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government what the average loan authorised by the Student Awards Agency for Scotland was for young students with a household income below £30,000 in 2012-13, including students exempt from contributions.

**Holding answer issued: 7 January 2014**

**(S4W-18793)**

**Michael Russell:** The average loan authorised by the Student Awards Agency for Scotland for young students with a household income below £30,000 was £3,425 in the academic year 2012-13.

It is not possible to include students 'exempt from contributions' as they are considered 'independent' and not 'young' for the purposes of student support.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government for what reason it no longer provides Scottish students studying in London with additional support for living costs.

**Holding answer issued: 7 January 2014**

**(S4W-18794)**

**Michael Russell:** The Post 16 Education Reform Programme has simplified the student support system, making it easier for student to understand and maximise their entitlement. The new student support package introduced in 2013-14 standardised the level of living cost support irrespective of where in the UK a Scottish domiciled student studies.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government in what year additional support for Scottish students studying in London was last made available and what the (a) maximum value of additional support and (b) total amount paid was that year.

**Holding answer issued: 7 January 2014**

**(S4W-18795)**

**Michael Russell:** Additional support was last made available to students studying in London in 2012-13.

a) The maximum support for students studying a 30 week course in London was £6,690. This was £1120 higher than students studying a 30 week course elsewhere.

Courses longer than 30 weeks in London attracted additional support of £109 per week. This was £24 higher than the additional support for a course elsewhere.

b) It is not possible to identify the total amount of additional support awarded in 2012-13 to students studying in London.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government, further to the answer to question S4W-17798 by Michael Russell on 8 November 2013, whether it will publish the text used in the email sent to students by the Student Awards Agency for Scotland.

**Holding answer issued: 7 January 2014**

**(S4W-18796)**

**Michael Russell:** The Student Awards Agency for Scotland (SAAS) already provided this information to Ms Dugdale on 9 September 2013, following a Freedom of Information request. Here is the original email sent to students in August 2012:

The Cabinet Secretary for Education and Lifelong Learning has announced a new funding package for living costs which will apply to Scottish domiciled undergraduate students, studying a course of higher education within the UK in academic year 2013-2014 onwards. The full statement can be found here (link to press release). Details of the new funding package are available at: [http://www.saas.gov.uk/student\\_support/funding\\_update.htm](http://www.saas.gov.uk/student_support/funding_update.htm) (web page no longer available)

Please note that these changes apply to both new and continuing students from academic year 2013-2014 onwards, regardless of when you start your course. Students in attendance this year (autumn 2012) will receive the existing funding package for academic year 2012-2013. If you have already received your SAAS award notice for academic year 2012-2013, there will be no change to the amounts shown on this letter. The new funding package will then apply to all undergraduate students from academic year 2013-2014 (autumn 2013) onwards.

If you have any queries relating to this announcement, please call our contact centre on 0300 555 0505.

**Kevin Stewart (Aberdeen Central) (Scottish National Party):** To ask the Scottish Government what guidance it gives to local authorities to ensure that they apply the getting it right for every child principles when dealing with autistic children.

**Holding answer issued: 7 January 2014**

**(S4W-18832)**

**Aileen Campbell:** The Scottish Strategy for Autism supports the application of the Getting it right for every child (GIRFEC) approach when public bodies and partners are considering a person centred approach to planning and addressing the wellbeing needs of children and young people with autism. To support this, the GIRFEC National Practice Model and other resources for practitioners are on the Scottish Government website and provide guidance on implementing the approach for all children and young people.

The Children and Young People (Scotland) Bill currently progressing through Parliament proposes to put in statute key components of GIRFEC. There will be statutory and practice guidance issued to local authorities and partners to support the GIRFEC provisions, once commenced. This will include detail on how these new statutory provisions should be interpreted when considering children and young people with different conditions and in different circumstances, including children with autism.

**Kevin Stewart (Aberdeen Central) (Scottish National Party):** To ask the Scottish Government whether local authorities are independently inspected on the services that they provide for autistic children.

**Holding answer issued: 7 January 2014**

**(S4W-18833)**

**Aileen Campbell:** Local authorities are inspected on the range of services they provide for children and young people with additional support needs including autism. In terms of education, Education Scotland inspects both mainstream schools and special schools and units that make provision for children and young people with autistic spectrum disorders. Within Education Scotland's reports, specific reference is made to the quality of provision for such units.

**Hugh Henry (Renfrewshire South) (Scottish Labour):** To ask the Scottish Government when it decided that it would not fulfil its 2007 pledge on class sizes in P1 to P3.

**(S4W-18922)**

**Michael Russell:** The Scottish Government remains committed to making progressive reductions in class sizes.

**Hugh Henry (Renfrewshire South) (Scottish Labour):** To ask the Scottish Government when it was first advised that it would not be able to fulfil by 2011 its 2007 pledge to reduce class sizes in P1 to P3.

**(S4W-18923)**

**Michael Russell:** The Scottish Government remains committed to making progressive reductions in class sizes, especially in the early years. Steady progress was made between 2007 and 2011 in reducing P1-P3 class sizes. The average P1 to P3 class size fell from 23.6 to 22.4 during the 2007-11 parliamentary session.

**Hugh Henry (Renfrewshire South) (Scottish Labour):** To ask the Scottish Government, further to the First Minister's assertion on 12 December 2013 that teacher training numbers were increased by 300 (Official Report, c.25668), whether there were subsequent reductions in teacher training numbers and, if so, what the reductions were; on what dates the decisions were taken; for which academic years, and which minister made the decision.

**(S4W-18927)**

**Michael Russell:** Target intakes to initial teacher education courses are set each year, on the basis of guidance from the Scottish Government, by the Scottish Funding Council (SFC). That guidance, which is based on advice from the Teacher Workforce Planning Advisory Group, is agreed by the Cabinet Secretary for Education and Lifelong Learning.

The increase of 300 in 2007 was set out in circular SFC/44/2007, and subsequent target intakes are set out in circulars SFC/08/2008, SFC/08/2009, SFC/18/2009, SFC/05/2010, SFC/01/2011, SFC/03/2012 and SFC/02/2013 all of which can be viewed at:

[http://www.sfc.ac.uk/newsinformation/Circulars/circulars\\_page.aspx](http://www.sfc.ac.uk/newsinformation/Circulars/circulars_page.aspx)

**Mary Scanlon (Highlands and Islands) (Scottish Conservative and Unionist Party):** To ask the Scottish Government, further to the answer to question S4W-18318 by Michael Russell on 4 December 2013, whether all secondary pupils who wish to study for a higher that is not available at their school will be given the opportunity to study the course online.

**(S4W-18934)**

**Michael Russell:** Local authorities are responsible for the provision of school education within their areas. As indicated in the answer to question S4W-18318, SCHOLAR, a programme of Heriot-Watt University, provides interactive online learning resources for SQA courses to Scottish secondary schools. Each of the 32 local authorities have now signed three year contracts with SCHOLAR from August 2013 ensuring that all learners in Scotland's secondary schools studying towards Scottish higher and advanced qualifications in science, technology, engineering and mathematics subjects (STEM), business subjects and languages have access to these study support materials.

The SCHOLAR materials supplement and complement teaching in the class. They are not a replacement for teaching. The Scottish Government will continue to encourage schools and local authorities to work together, and with colleges, to deliver as wide a range of courses to learners as possible.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government whether Education Scotland's remit includes adult learning and, if so, what work is underway to enhance learning opportunities for adult learners across the country.

**(S4W-18936)**

**Michael Russell:** Education Scotland has policy responsibility for adult learning. This includes the *Adult Literacies in Scotland 2020 Strategic Guidance* and the strategy for *English for Speakers of Other Languages*. The Cabinet Secretary for Education and Lifelong Learning has recently established and chairs a national strategic forum for adult learning. The forum is currently working with partners to develop a statement of ambition for adult learning in Scotland. Education Scotland's Community Learning and Development team supports the forum and leads a range of initiatives to help improve life chances for people of all ages, through learning, personal development and active citizenship. The team links with national partners through nine strategic funding partnerships and administers small grants to a range of adult learning providers to directly enhance learning opportunities across the country.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government what steps it has taken to encourage the uptake of massive open online courses in schools.

**(S4W-18939)**

**Michael Russell:** Education Scotland, through the Senior Education Officer (SEO) team, has opened up a dialogue with the Open University (OU) in relation to massive open online courses (MOOCS).

They are exploring how we can promote the Young Applicants in Schools scheme, which involves young people in schools following OU courses which are largely online.

SEOs are meeting with OU representatives in January 2014 to further explore the development and use of MOOCs in science. Discussions are also taking place with the OU around how best to ensure uptake of future learn courses by practitioners and pupils and how to make use of OpenLearn materials.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government how many people are studying for Scottish Qualification Authority awards in cooperative studies, broken down by local authority.

**(S4W-18941)**

**Michael Russell:** The certificate in co-operative studies is a customised award that SQA certificates and quality assures, but that is privately owned and developed.

The award is available at SCQF levels 4, 5 and 6 although only levels 4 and 5 are currently being delivered. There are 18 candidates currently entered for the award across these levels. The candidates are all in a single centre in Dundee City. As these awards are privately owned and developed, SQA does not actively promote them. It is up to the owner of the qualification to promote them if they wish to do so.

**Kezia Dugdale (Lothian) (Scottish Labour):** To ask the Scottish Government how it seeks to encourage the uptake of Scottish Qualification Authority awards in cooperative studies.

**(S4W-18942)**

**Michael Russell:** I refer the member to the answer to question S4W-18941 on 8 January 2014. All answers to written parliamentary questions are available on the Parliament's website, the search facility for which can be found at:

<http://www.scottish.parliament.uk/Apps2/Business/PQA/Default.aspx>.

#### **Strategy and External Affairs**

**Patricia Ferguson (Glasgow Maryhill and Springburn) (Scottish Labour):** To ask the Scottish Government what recent discussions it has had with (a) National Museums Scotland, (b) National Museums Scotland Enterprises Ltd and (c) the National Galleries of Scotland regarding pay policy.

**(S4W-18871)**

**Fiona Hyslop:** The Scottish Government routinely discusses with both the National Museums of Scotland and the National Galleries of Scotland pay policy and current pay remit proposals in accordance with government pay remit approval processes.

The Scottish Government has not held direct discussions with National Museums Scotland Enterprises Ltd.

**Patricia Ferguson (Glasgow Maryhill and Springburn) (Scottish Labour):** To ask the Scottish Government for what reason the staff of National Museums Scotland Enterprises Ltd are not covered by the Scottish Government public sector pay policy.

**(S4W-18872)**

**Fiona Hyslop:** National Museums Scotland Enterprises Ltd. (NMSE) was established as a commercial company to generate income in support of the public services provided and funded by

National Museums Scotland. NMSE receives no public subsidy, being run as a wholly commercial enterprise operating in a competitive commercial marketplace. Since its establishment in 1998, NMSE staff have historically, not been subject to public sector pay policy. The Scottish Government will review this position with the National Museums.

**Patricia Ferguson (Glasgow Maryhill and Springburn) (Scottish Labour):** To ask the Scottish Government what its position is on staff of the National Galleries of Scotland being asked to give up weekend working allowances.

**(S4W-18873)**

**Fiona Hyslop:** Negotiations with the three recognised Trade Unions over the 2012-13 pay offer have not yet concluded. I understand that the National Galleries of Scotland has advised staff that it expects to make a final offer in early January and no longer intends to include any changes to staff terms and conditions of employment, including the weekend working allowance.

**Patricia Ferguson (Glasgow Maryhill and Springburn) (Scottish Labour):** To ask the Scottish Government whether pay negotiations for 2012-13 in respect of the staff of (a) the National Galleries of Scotland, (b) National Museums Scotland and (c) National Museums Scotland Enterprises Ltd have been concluded.

**(S4W-18874)**

**Fiona Hyslop:** Negotiations with the recognised trade unions over the National Museums of Scotland's (NGS) 2012-13 pay offer were concluded in January 2013.

Pay for National Museums Scotland Enterprises Ltd was established in 1998 and has not been subject to government pay policy or approval during the period since then. I understand that the 2012-13 pay award has been settled.

Negotiations with the recognised trade unions over the National Galleries of Scotland's 2012-13 pay offer have not yet concluded. NGS expects to make a final offer in early January 2014.

*The following questions received holding answers:*

S4W-18827

S4W-18828

S4W-18834