



The Scottish Parliament  
Pàrlamaid na h-Alba

**Local Government and Regeneration Committee**

**Committee Memorandum on the Children and Young  
People (Scotland) Bill and the Public Bodies (Joint  
Working) (Scotland) Bill**

**26 September 2013**





The Scottish Parliament  
Pàrlamaid na h-Alba

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The Scottish Parliament  
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## **Local Government and Regeneration Committee**

### **Remit and membership**

#### **Remit:**

To consider and report on a) the financing and delivery of local government and local services, and b) planning, and c) matters relating to regeneration falling within the responsibility of the Cabinet Secretary for Infrastructure and Capital Investment.

#### **Membership:**

Richard Baker  
Cameron Buchanan  
Stuart McMillan  
Anne McTaggart  
Stewart Stevenson  
Kevin Stewart (Convener)  
John Wilson (Deputy Convener)

#### **Committee Clerking Team:**

##### **Clerk to the Committee**

David Cullum

##### **Senior Assistant Clerk**

Fiona Darwin

##### **Assistant Clerk**

Seán Wixted

##### **Committee Assistant**

Fiona Sinclair



The Scottish Parliament  
Pàrlamaid na h-Alba

## **Local Government and Regeneration Committee**

### **Committee Memorandum on the Children and Young People (Scotland) Bill and the Public Bodies (Joint Working) Scotland Bill**

#### INTRODUCTION

The Committee reports to the Education and Culture Committee and the Health and Sport Committee as follows—

1. The Local Government and Regeneration Committee agreed to take evidence at Stage 1 on the Children and Young People (Scotland) Bill and the Public Bodies (Joint Working) (Scotland) Bill in relation to the delivery of local government services. Both bills include proposals for joint working between local government and public bodies. Our main focus of interest in the Bills is the proposals for integrating and sharing public services. The proposals for the integration of public services are inextricably linked to issues covered in recent and ongoing inquiry work, particularly the public service reform inquiry.

#### COMMITTEE INTEREST

##### *Introduction*

2. The Children and Young People (Scotland) Bill (“the CYP Bill”), aims to put children and young people at the heart of planning and delivery of services and ensure that their rights are respected across the public sector. Part 3 of the CYP Bill aims to improve the way in which services support children and families by promoting cooperation between planning children’s services, placing the child at the centre of this process.

3. The Public Bodies (Joint Working) (Scotland) Bill (“the PBJW Bill”), provides the framework which will support improvement of the quality and consistency of health and social care services through the integrated delivery of health and social care in Scotland. This framework permits integration of other local authority services with health services.

4. Our interested is in how the Bills, with related key aims, complement each other and work together to help deliver and support the Public Service Reform agenda.

##### *Approach*

5. We agreed to consider those parts of the Bills relevant to its remit. We did not issue its own call for evidence but included questions in the Health and Sport Committee call for evidence, as lead committee for the PBJW Bill. For the CYP Bill, we considered evidence submissions received by the Education and Culture Committee, the lead committee for this Bill.

6. We targeted specific organisations to supply written evidence given the Bills may have an impact on them. Written submissions were received from—

- Association on Directors of Education in Scotland;
- Argyll and Bute Council;
- Audit Scotland on behalf of the Auditor General for Scotland and the Accounts Commission;
- Coalition of Care and Support Providers (CCPS);
- Children in Scotland;
- Childrens Hearings Scotland;
- COSLA;
- GPs at the Deep End;
- Housing Coordinating Group;
- Midlothian Community Planning Partnership;
- NHS Ayrshire and Arran;
- Police Scotland;
- Royal College of General Practitioners;
- Scottish Fire and Rescue Service (SFRS);
- UNICEF UK, and
- West Lothian Community Planning Partnership.

7. We took oral evidence from relevant witnesses in a single evidence session on Wednesday 4 September 2013—

- NHS Ayrshire and Arran;
- GPs at the Deep End;
- East Ayrshire Council;
- North Ayrshire Council, and
- Housing Coordinating Group.

8. Finally, we then took oral evidence from the Cabinet Secretary for Health and Wellbeing, Alex Neil MSP (“the Cabinet Secretary”) and the Minister for Children and Young People, Aileen Campbell MSP (“the Minister”) jointly, on both Bills.

9. Our findings and recommendations are reported to the respective lead committees, and to the Parliament, in this memorandum.

## FINDINGS AND RECOMMENDATIONS

### **Is there a consistency of approach across legislation?**

10. Our recent inquiry into Public Services Reform in Scotland<sup>1</sup> had a strong focus on partnership, joint working and shared services in line with the Christie Commission recommendations. A significant part of that work was looking at Community Planning Partnerships (“CPPs”) which are a key delivery agent in driving forward public service reform. During that inquiry we were informed that the forthcoming Community Empowerment and Renewal Bill (“CER Bill”) will include

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<sup>1</sup> Local Government and Regeneration Committee, 9<sup>th</sup> Report 2013: *Public Services Reform and Local Government: Strand 3 - Developing New Ways of Delivering Services* SP Paper 370 (Published 26 June 2013): <http://www.scottish.parliament.uk/parliamentarybusiness/CurrentCommittees/56442.aspx> [Retrieved 19 Sept 2013].

provisions strengthening relationships and responsibilities of partners in CPPs in order to improve accountability and ultimately enhance joint working.

11. We expect to be the lead committee for consideration of the forthcoming CER Bill and have noted that the provisions requiring joint or integrated working in the PBJW Bill and the CYP Bill are inextricably linked. They all share the overarching purpose of public sector reform.

12. Evidence taken by us generally acknowledges the desirability of better integration of services while ensuring that the approaches taken to integration across the public sector remain compatible. Evidence highlighted actions that need to be undertaken to ensure that links and relationships between the new partnerships, CPPs and Single Outcome Agreements work.

13. Consultation responses on Part 3 of the CYP Bill referred to the need for a linkage to other legislation, in particular the PBJW Bill, the forthcoming CER Bill and recent legislation on self-directed support. There was concern that between the CYP Bill and the PBJW Bill, two processes for service planning were being established. The Royal College of Nursing suggested that this showed 'little strategic thinking'<sup>2</sup>. Disability groups highlighted their particular concern for well integrated systems of service provision across age groups, policy areas and geographical areas.

14. Both the Cabinet Secretary and the Minister in evidence stated similar aims for their Bills, principally 'improving outcomes for service user' while recognising that the approach taken differed. The Bills, we were told, "complement one another"<sup>3</sup> and "will streamline structures and make it easier to see the focus for partnership working"<sup>4</sup>.

15. The Cabinet Secretary in evidence told us that—

“...the umbrella for all of this is the Government’s guiding principles and strategic objectives, which include not only community empowerment and renewal but public sector reform, to ensure that better-quality services are delivered more cost effectively and timeously; patient-centred healthcare and social care; and, indeed, person-centred education. Those underlying principles are not restricted to my bill, Aileen Campbell’s bill or Derek Mackay’s community empowerment bill; they are universal and part and parcel of our broad principled agenda for changing Scotland for the better.”<sup>5</sup>

16. COSLA noted clear links between the PBJW and the integration of adult health and social care services and suggested that it was possible “some local partnerships may wish to consider the inclusion of children’s services in those arrangements.”<sup>6</sup>

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<sup>2</sup> Royal College of Nursing written submission to the Education and Culture Committee on the Children and Young People (Scotland) Bill (Submission 83):  
[http://www.scottish.parliament.uk/S4\\_EducationandCultureCommittee/Children%20and%20Young%20People%20\(Scotland\)%20Bill/RoyalCollegeofNursingScotland.pdf](http://www.scottish.parliament.uk/S4_EducationandCultureCommittee/Children%20and%20Young%20People%20(Scotland)%20Bill/RoyalCollegeofNursingScotland.pdf) [Retrieved 19 Sept 2013].

<sup>3</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2526.

<sup>4</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2526.

<sup>5</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2535.

<sup>6</sup> COSLA written submission:

17. We support the drive for public services reform and recognise the desirability of taking a flexible approach, endeavouring to identify an approach which fits the particular policy.

18. Argyll and Bute Council noted—

“...implementation of joint working will require a major culture change for both the Local Authority and our NHS colleagues, there will need to be changes in behaviours and attitudes and a willingness to overcome obstacles, driven by strong and enthusiastic leadership. We need to improve on staff and community involvement and overcome risk aversion to achieve truly customer-led service delivery. We also face financial and logistical challenges, particularly given the rurality of our environment; however it is clear that unless we achieve both economies of scale and economies of skill, through this opportunity for joint working, we will not be able to meet the demographic-demand challenges of the future.”

19. **We agree with the sentiments expressed in that comment. We would like to see a mechanism put in place to monitor and review the approaches taken to ensure that lessons can be learned across portfolios and best practice identified across the boards.** We note the submission by Audit Scotland which states that “it is essential that services are able to work well together to respond to needs whilst making the best use of existing resources and delivering high quality services.”<sup>7</sup>

20. In the following section we consider specific system issues raised in evidence.

### System issues

21. A number of ‘system’ issues were raised in evidence which were categorised by one witness as “strategic planning systems”.<sup>8</sup> These included the necessity for processes to communicate well with each other and about duplication of statutory frameworks requiring multiple plans for children.<sup>9</sup>

22. We heard from NHS Ayrshire and Arran that—

“A significant amount of work needs to be done to resolve the systems that we have and to ensure that we are working to a common system and a common language. In Ayrshire and Arran we have AYRshare; we hope that that will take us some way down that road, but there is still a need for the organisations that we work with—education, social work and health—to have their own systems underneath all of that. That is an industry in itself and they all have different reporting mechanisms that work within that.”<sup>10</sup>

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[http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/COSLA\\_CYPBJW.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/COSLA_CYPBJW.pdf) [Retrieved 19 Sept 2013].

<sup>7</sup> Audit Scotland written submission to the Health and Sport on the Public Bodies (Joint Working)(Scotland) Bill, p41 (Submission PBJW0066):

[http://www.scottish.parliament.uk/S4\\_HealthandSportCommittee/Public%20Bodies%20Joint%20Working%20Scotland%20Bill/PBJW0066\\_-\\_Audit\\_Scotland.pdf](http://www.scottish.parliament.uk/S4_HealthandSportCommittee/Public%20Bodies%20Joint%20Working%20Scotland%20Bill/PBJW0066_-_Audit_Scotland.pdf) [Retrieved 19 Sept 2013].

<sup>8</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2505.

<sup>9</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2514.

<sup>10</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Cols 2514-15.

23. In our recent work we have increasingly been hearing about benefits accruing from co-location of buildings and people. East Ayrshire indicated that “co-location of certain services has been a really positive move”.<sup>11</sup> Although it was made clear that while co-location is helpful, the key is improved information sharing. This is true for both electronic communications, but better yet, and more simple, by professionals talking to one another. Co-location can of course assist this process, but is not a prerequisite for conversations and information sharing to take place.

24. Written evidence from GP’s at the Deep End noted that—

“Our faith in the instrumental efficacy of technology and proliferation of process-orientated tasks should not displace what is essential to effective integration working practices, namely sustained professional relationships that are built on mutuality and trust.”<sup>12</sup>

25. Collaboration between GPs and other partners exists on many different levels. Working collaboratively promotes a collective determination to reach objectives where sharing information and experiences contributes to a more detailed local knowledge of individual patients and their families. This is vital to planning effective support services for patients, addressing their unmet health needs and anticipating when they will need to access specialized services.<sup>13</sup>

26. The Cabinet Secretary indicated that he “would not like to prescribe that co-location is always a prerequisite to approving any delivery plan” before adding that “in the examples that I have seen, co-location is definitely very advantageous.”<sup>14</sup>

**27. We welcome all moves towards co-location of services recognising local solutions are required to meet local needs. We agree with the evidence of NHS Ayrshire and Arran that—**

**“good communication and professionals talking to professionals to ensure that we are talking the same language and that we understand the issues will be critical to the whole process.”<sup>15</sup>**

### **The role of GPs**

28. The evidence we received from GPs at the Deep End highlighted the central and critical role that doctors can, and do, have with those affected by these Bills—

“General practice is the main public service that is in regular contact with virtually the whole of the general population, with substantial cumulative knowledge and experience of people’s problems and consistently reported high levels of public trust. These intrinsic features make General Practices the natural hubs around which integrated care should be based, with groups of General Practices supported, within the context of local service

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<sup>11</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2504.

<sup>12</sup> GPs at the Deep End written submission:

[http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/GPs\\_at\\_the\\_Deep\\_End.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/GPs_at_the_Deep_End.pdf) [Retrieved 19 Sept 2013].

<sup>13</sup> Ibid.

<sup>14</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2530.

<sup>15</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2518.

planning, to deliver integrated care in partnership with secondary care, area-based NHS services, social work and community organisations.”<sup>16</sup>

29. In evidence the Cabinet Secretary was keen to stress the role that the health sector will play under the PBJW Bill and referenced work that had been commissioned by government to look at where the public health function would sit in future. **We encourage this approach and urge that the role of GPs as key partners is embedded into development, planning and delivery under both Bills.**<sup>17</sup>

### **Role for the Housing Sector [Public Bodies (Joint Working) (Scotland) Bill]**

30. In evidence to us the Housing Coordinating Group made an eloquent plea for greater recognition and inclusion on the face of the PBJW Bill as a partner within integrated authorities. Suggesting that the success of the new integrated authorities—

“...will largely depend on effective joint strategic commissioning to which the housing sector can make a crucial contribution. The current arrangements for involving the housing sector have not produced a consistent nor adequate approach and the Bill, as it stands, could result in an ‘integrated authority’ deciding not to involve the housing sector as a partner. To ensure that housing issues, and the housing sector, form an integral part of contributing to the delivery of national outcomes, the HCG urges that the contribution of the housing sector be recognised within the legislation, urging the new ‘integrated authorities’ to involve their strategic housing partners.”<sup>18</sup>

31. Going on to say that—

“Housing providers offer varying levels of care and/or support to vulnerable adults and older people, and have long been committed to working with colleagues in health and social care to enable people to continue living in the community rather than institutional settings. There are examples where this has happened already and the Bill could promote this approach more widely across the country. The housing sector has much to contribute to this agenda.”<sup>19</sup>

32. The Housing Coordinating Group expressed concerns that they may not be involved by new integrated authorities at the strategic level stating that “proper engagement with the housing sector in both planning and delivery will be required.”<sup>20</sup>

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<sup>16</sup> GPs at the Deep End written submission:  
[http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/GPs\\_at\\_the\\_Deep\\_End.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/GPs_at_the_Deep_End.pdf) [Retrieved 19 Sept 2013].

<sup>17</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2527.

<sup>18</sup> Housing Coordinating Group written submission:  
[http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/Housing\\_Coordinating\\_Group.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/Housing_Coordinating_Group.pdf) [Retrieved 19 Sept 2013].

<sup>19</sup> Housing Coordinating Group written submission:  
[http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/Housing\\_Coordinating\\_Group.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/Housing_Coordinating_Group.pdf) [Retrieved 19 Sept 2013].

<sup>20</sup> Ibid.

33. The Cabinet Secretary agreed it was essential that the housing sector be involved, noting that there is a stream of work ongoing—

“...to best ensure that the housing function is involved at grass-roots level in the partnerships. It may not necessarily be the case that housing bodies are separately represented on partnership boards, but I think that the most important element is what happens in the localities underneath the partnership board area. That is where the close working relationship between health, social work and housing is vital.”<sup>21</sup>

34. The Minister also emphasised the specific requirement to consult social landlords at section 10 of the CYP Bill when preparing a children’s plan.<sup>22</sup>

**35. We agree that the housing sector need not be represented on partnership boards in all cases, but would expect that in situations when housing is likely to be central to the delivery of successful partnership working, they are involved at board level.**

### **Measuring outcomes, costs and benefits**

36. Both Bills seek to set in place policies which have the aim of improving outcomes for users, carers and their families. The PBJW Bill seeks to plan and deliver quality and sustainable care services. Similarly the CYP Bill through early intervention and preventative spend is also intended to produce benefits both in the short and also increasingly the long term.

37. This has challenges in measuring outcomes and benefits as Jim Carle eloquently described—

“Public organisations are quite used to looking for short-term gains over one, two or three years, but we are not used to looking at someone who will be born today and the benefits for them or the reduction in their uptake of services in later life.”<sup>23</sup>

38. Children in Scotland suggested “that current performance and reporting requirements are linked to earlier, specific policies and strategies and they may not reflect the shift of focus towards prevention, early intervention and the early years.”<sup>24</sup>

39. Audit Scotland in their submission on behalf of the Auditor General for Scotland and the Accounts Commission suggested that looking ahead—

“Any outcome measures must be transparently reported and available to the public and this information should be used to drive improvement. National measures are useful but partners also need a mechanism for

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<sup>21</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2524.

<sup>22</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2524.

<sup>23</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2500.

<sup>24</sup> Children in Scotland written submission, paragraph 21:

[http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/ChildreninScotland1.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/ChildreninScotland1.pdf) [Retrieved 19 Sept 2013].

ensuring local needs and priorities are met and for measuring the difference that specific services are making to the individual.”<sup>25</sup>

40. We explored how outcomes and benefits can be measured. Witnesses agreed that numbers are available but that they focus on costs, are generally short term measuring the impacts of existing services. It is “harder to look at less tangible issues such as wellbeing in communities and longitudinal things”<sup>26</sup>

41. The Cabinet Secretary in response noted that outcomes are not on the face of the PBJW Bill for two reasons—

“One is that outcomes change. The outcomes that you would set today would be very different from the outcomes that you would have set, say, five years ago. I suspect that they would also be very different from what they would be in five or 10 years’ time as service provision changes—how we do things in these fields changes continually. Therefore, if you put the outcomes in the bill, you would need to introduce primary legislation every time you wanted to amend them. The national outcomes will be set out in secondary legislation.”<sup>27</sup>

**42. We are content that outcomes should not be placed on the face of either Bill for the reasons given. We draw the Scottish Government’s attention to the Audit Scotland submission and we will, as part of our ongoing work in scrutinising benchmarking by local authorities, look closely at the measures introduced and crucially how they are used to learn from others and improve performance.**

### The role of CPPs

43. Since we published our original report on Public Services Reform<sup>28</sup> the Scottish Government have advised that community planning has been significantly strengthened. Recent review work by the Accounts Commission for Scotland and Auditor General for Scotland, together with internal quality assurance processes, have identified a range of key strengths as well as some key areas for development which chime with some of our findings.<sup>29</sup>

44. CPPs will have key roles to play if the overarching aims of these Bills are to be realised. We note the views of Audit Scotland, on behalf of the Auditor General for Scotland and the Accounts Commission for Scotland in their submission that—

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<sup>25</sup> Audit Scotland submission on behalf of the Auditor General for Scotland and the Accounts Commission, paragraph 17:

[http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/Audit\\_Scotland.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/Audit_Scotland.pdf) [Retrieved 19 Sept 2013].

<sup>26</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2508.

<sup>27</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2533.

<sup>28</sup> Local Government and Regeneration Committee, 8<sup>th</sup> Report 2012: *Public Services Reform and Local Government: Strand 1 – Partnerships and Outcomes* SP Paper 170 (Published 22 June 2012): <http://www.scottish.parliament.uk/parliamentarybusiness/CurrentCommittees/52672.aspx> [Retrieved 19 Sept 2013].

<sup>29</sup> Scottish Government response to the Local Government and Regeneration Committee three strand inquiry on Public Services Reform and Local Government in Scotland (published 12 September 2013): [http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/Local\\_Government\\_and\\_Regeneration\\_Committee\\_-\\_PSR\\_report\\_-\\_SG\\_response.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/Local_Government_and_Regeneration_Committee_-_PSR_report_-_SG_response.pdf) [Retrieved 19 Sept 2013].

“There is a need for a clear articulation of how these new arrangements fit with CPPs given the significant leadership and co-ordinating role for local public services that the Scottish Government/COSLA see for CPPs in their Statement of Ambition for Community Planning and Single Outcome Agreements.”<sup>30</sup>

45. We heard in evidence how well the North Ayrshire Council CPP works with their integrated children’s services partnership.<sup>31</sup> We note that the forthcoming CER Bill will seek to strengthen further the roles and responsibilities of partners in CPPs. **In the meantime we consider it important that the Scottish Government provide clarity around implementation of the Bills and how they fit with the role of CPPs in the new partnerships and arrangements.**

### **Consultation with service users and role of third sector**

46. In our recent work we have taken a close interest in the extent to which service users are consulted and the methods used to engage them. We have been critical of engagement practices, in particular tendencies towards doing things to people as opposed to undertaking meaningful consultation. We note that neither Bill requires consultation at the level of individual service users although we were told by the Cabinet Secretary that for the PBJW Bill—

“The planning and delivery principles in the bill encapsulate the Christie commission’s principles by putting the person at the centre of service planning and delivery and require a focus on prevention and anticipatory care planning.”<sup>32</sup>

47. We acknowledge that both Bills require levels of consultation and were pleased to be told that “it is essential that we have real engagement with local communities”<sup>33</sup> and of the need “for communities to inform professional practice”.<sup>34</sup>

48. The Minister indicated that guidance will make the role of the child and family “explicitly clear”.<sup>35</sup>

49. The Cabinet Secretary responded to criticisms we received from the third sector, for example the Coalition of Care and Support Providers in Scotland, about the lack of community involvement in the PBJW Bill at the planning, design and delivery stages. He indicated that he envisaged the third and independent sector being represented on boards in every case. Adding that involvement in service redesign and consultation exercises “will be required”.<sup>36</sup>

**50. We note the determination of the Scottish Government to involve service users and the third sector at every stage, we recognise this need not be set out on the face of the Bills and expect guidance to make the roles of**

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<sup>30</sup> Audit Scotland submission on behalf of the Auditor General for Scotland and the Accounts Commission, page 2:

[http://www.scottish.parliament.uk/S4\\_LocalGovernmentandRegenerationCommittee/Inquiries/Audit\\_Scotland.pdf](http://www.scottish.parliament.uk/S4_LocalGovernmentandRegenerationCommittee/Inquiries/Audit_Scotland.pdf) [Retrieved 19 Sept 2013].

<sup>31</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2501.

<sup>32</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2521.

<sup>33</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2505.

<sup>34</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2510.

<sup>35</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2525.

<sup>36</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2529.

**all parties clear. We are interested in what role the National Community Planning Group will have in the preparation of guidance.**

### **Transition arrangements for children to adult services**

51. Consultation responses on the CYP Bill from both Capability Scotland and For Scotland's Disabled Children highlighted the need for good planning when young people move from children's services to adult services, or move between local authority boundaries. Young disabled people will use services planned under the CYP Bill and under the PBJW Bill.

52. We asked the Minister how the quite different mechanisms for integrating services will improve children's transition to adult services. In response she suggested that the transition will in future be "far smoother" adding—

"I believe that there are two big differences between dealing with children and dealing with adults. First, there is the very crucial role that the education system plays with children and for which there is no equivalent for adults, particularly older people. Secondly, children by definition do not legally have the capacity to make decisions for themselves. However, adults do and I note that there are special arrangements for adults with incapacity. The fact that these two bills cross-reference each other means that we are singing from the same hymn sheet—and that is very important."<sup>37</sup>

### **Named Person provision [Children and Young People (Scotland) Bill]**

53. Although not a matter falling within our remit, we received evidence in relation to Part 4 of the CYP Bill, the Named Persons provision. **We draw to the attention of the Education and Culture Committee the exchanges which took place on the Named Persons provision at our meeting on 4 September.<sup>38</sup> In particular we highlight the concerns raised around time, burdens and resources on both health and education professionals in undertaking this role as well as questions around continuity of provision. We also draw attention to the outstanding issue of who should be the named person for children being home educated.**

54. In drawing this to attention we are not expressing any view on the substantive issue.

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<sup>37</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Col 2534.

<sup>38</sup> Local Government and Regeneration Committee, *Official Report*, 4 Sept 2013 Cols 2511, 2513, 2517 and 2523.

## **ANNEXE A: EXTRACT OF MINUTES**

### **19th Meeting, 2013 (Session 4), Wednesday 12 June 2013**

**Public Bodies (Joint Working) (Scotland) Bill (in private):** The Committee considered its approach to the scrutiny of the Bill at Stage 1, and agreed that it wished to consider those parts of the Bill relevant to its remit. The Committee also agreed not to issue its own call for written evidence, but to ask to include questions in the call for evidence being issued by the Health and Sport Committee, as the lead committee for Bill. Furthermore, the Committee agreed to take oral evidence on the Bill, after the summer recess, and to report its findings and recommendations to the lead committee, by way of a memorandum.

**Children and Young People (Scotland) Bill (in private):** The Committee considered its approach to the scrutiny of the Bill at Stage 1, and agreed that it wished to consider those parts of the Bill relevant to its remit. The Committee also agreed not to issue its own call for written evidence, but to consider relevant submissions received by the Education and Culture Committee, as the lead committee for Bill, in response to that committee's call for written evidence. Furthermore, the Committee agreed to take oral evidence on the Bill, after the summer recess. Given the parallels in policy between the Bill and the Public Bodies (Joint Working) (Scotland) Bill - in relation to issues such as joint working and the development of shared services - the Committee agreed to take oral evidence from relevant witnesses, jointly, on both Bills. Finally, the Committee agreed to take evidence from the relevant Scottish Ministers on both Bills, and to report its findings and recommendations to the lead committee, by way of a memorandum.

### **22nd Meeting, 2013 (Session 4), Wednesday 4 September 2013**

**Children and Young People (Scotland) Bill and the Public Bodies (Joint Working) (Scotland) Bill:** The Committee took evidence on the Bills from—

Jim Carle, Child Health Commissioner, NHS Ayrshire and Arran;  
Dr Anne Mullin, GPs at the Deep End;  
Eddie Fraser, Head of Community Care, East Ayrshire Council;  
Carol Kirk, Corporate Director (Education and Skills), North Ayrshire Council;  
Mary Taylor, Chief Executive, Scottish Federation of Housing Associations, and Member of the Housing Coordinating Group;  
Alex Neil, Cabinet Secretary for Health and Wellbeing, Aileen Campbell, Minister for Children and Young People, Kathleen Bessos, Deputy Director Integration and Reshaping Care, John Paterson, Divisional Solicitor (Food Health and Community Care), Alison Taylor, Team Leader Integration and Reshaping Care, Philip Raines, Head of Child Protection and Children's Legislation, and Magdalene Boyd, Solicitor (Communities and Education), Scottish Government.

**Children and Young People (Scotland) Bill and the Public Bodies (Joint Working) (Scotland) Bill (in private):** The Committee considered the evidence received.

**24th Meeting, 2013 (Session 4), Wednesday 25 September 2013**

**Children and Young People (Scotland) Bill and the Public Bodies (Joint Working) (Scotland) Bill (in private):** The Committee considered a draft memorandum to the lead committees on the Bills. Subject to various amendments, the memorandum was agreed to.



## ANNEXE B: ASSOCIATED WRITTEN AND ORAL EVIDENCE

Wednesday 4 September 2013

### Oral Evidence

NHS Ayrshire and Arran;  
GPs at the Deep End;  
East Ayrshire Council;  
North Ayrshire Council;  
Housing Coordinating Group;  
Cabinet Secretary for Health and Wellbeing  
Minister for Children and Young People

### **Written evidence**

[NHS Ayrshire and Arran \(43KB pdf\)](#)  
[GPs at the Deep End \(112KB pdf\)](#)  
[North Ayrshire Community Planning Partnership \(35KB pdf\)](#)  
[Housing Co-Ordinating Group \(62KB pdf\)](#)

### **Other written evidence**

[Association of Directors of Education in Scotland \(8KB pdf\)](#)  
[Argyll and Bute Council \(30KB pdf\)](#)  
[Audit Scotland \(47 KB pdf\)](#)  
[Children in Scotland \(43KB pdf\)](#)  
[Children's Hearings Scotland \(13KB pdf\)](#)  
[Coalition of Care and Support Providers in Scotland \(23KB pdf\)](#)  
[COSLA \(43KB pdf\)](#)  
[Midlothian Community Planning Partnership \(11KB pdf\)](#)  
[Police Scotland \(11KB pdf\)](#)  
[Royal College of General Practitioners \(42KB pdf\)](#)  
[Scottish Fire and Rescue Service \(26KB pdf\)](#)  
[UNICEF UK \(19KB pdf\)](#)  
[West Lothian Community Planning Partnership \(8KB pdf\)](#)