



The Scottish Parliament  
Pàrlamaid na h-Alba

**PUBLIC PETITIONS COMMITTEE**

**AGENDA**

**7th Meeting, 2019 (Session 5)**

**Thursday 4 April 2019**

The Committee will meet at 9.30 am in the Robert Burns Room (CR1).

1. **Consideration of a new petition:** The Committee will consider the following new petition—

PE1716 on Full review of mental health service provision across the NHS in Scotland, and will take evidence from petitioner, Karen McKeown.

2. **Consideration of continued petitions:** The Committee will consider the following continued petitions—

PE1678 on National strategic framework for Countryside Ranger Services in Scotland;

PE1698 on Medical care in rural areas; and

PE1705 on Wildlife crime - penalties and investigation.

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The papers for this meeting are as follows—

**Agenda item 1**

PRIVATE PAPER

PPC/S5/19/7/1 (P)

Note by the Clerk

PPC/S5/19/7/2

**Agenda item 2**

Note by the Clerk

PPC/S5/19/7/3

Note by the Clerk

PPC/S5/19/7/4

Note by the Clerk

PPC/S5/19/7/5

**Public Petitions Committee****7th Meeting, 2019 (Session 5)****Thursday 4 April 2019****PE1716: Full review of mental health service provision  
across the NHS in Scotland****Note by the Clerk**

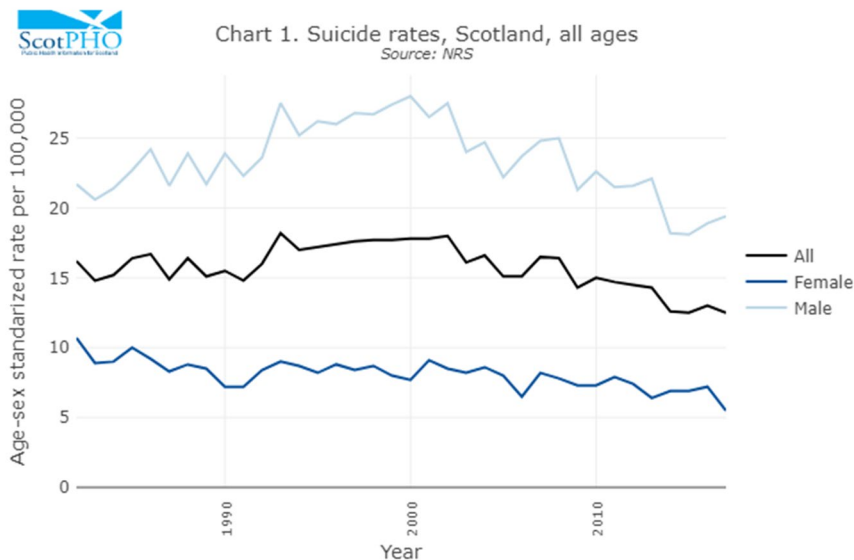
<b>Petitioner</b>	Karen McKeown and Gillian Murray
<b>Petition summary</b>	Calling on the Scottish Parliament to urge the Scottish Government to carry out a full review of mental health services across the NHS in Scotland, to ensure that policy and practice is delivered consistently across the country.
<b>Webpage</b>	<a href="http://www.parliament.scot/GettingInvolved/Petitions/PE01716">http://www.parliament.scot/GettingInvolved/Petitions/PE01716</a>

**Introduction**

1. This is a new petition that collected 882 signatures and 102 comments in support. The Committee will take evidence from petitioner Karen McKeown.

**Background**

2. Mental health problems exist on a continuum, from symptoms which interfere with emotional, cognitive or social function, to the most severe clinically diagnosed mental illnesses. Examples include common mental health problems such as depression and anxiety, and severe and enduring mental health problems, such as schizophrenia.
3. The exact prevalence of mental health problems is difficult to estimate, primarily due to the numbers of people who do not seek treatment, but also because of difficulties in accurately recording them in a non-acute setting. Nevertheless, the Scottish [burden of disease study](#) estimates that mental health problems are the second largest health burden in Scotland.
4. In their petition, the Petitioners mention two gentlemen who died by suicide and call for a number of actions to prevent cases like this happening again. The data on deaths by suicide is more complete, with 680 recorded suicides in Scotland in 2017. The following graph shows the trend in suicide rates in Scotland since 1982.



5. According to the Scottish Public Health Observatory, the rate of suicide has generally decreased since 1992, but the age distribution has changed, with the highest rate now found in the 35-44 age bracket.

### Treatment

6. Treatment for mental health problems is predominantly delivered in the community by primary care professionals such as GPs and community psychiatric teams. A relatively small amount of care is now delivered in inpatient facilities.
7. The delivery of mental health services is for the 14 territorial health boards to decide, although there are [national access standards](#) which they must aim to meet, namely:
- **Child and Adolescent Mental Health Services (CAMHS) waiting times** - The standard is for at least 90% of young people to start CAMHS treatment within 18 weeks of referral. During the quarter ending December 2018, 4,523 children and young people started treatment at CAMHS in Scotland and 72.8% were seen within 18 weeks<sup>1</sup>.
  - **Psychological therapy waiting times** – the standard is for 90% of patients to commence Psychological Therapy based treatment within 18 weeks of referral. In the quarter ending December 2018, 78% of people were seen within 18 weeks<sup>2</sup>.

<sup>1</sup> ISD Scotland (05 March 2019) [CAMHS in Scotland: Waiting times, service demand and workforce](#)

<sup>2</sup> ISD Scotland (05 March 2019) [Psychological therapies waiting times](#)

8. Clinicians may also be guided by professional guidelines and standards.
9. The treatment of people with mental health problems is overseen by the Mental Welfare Commission. The Mental Health (Care and Treatment) (Scotland) Act 2003 gives the Commission the authority to carry out investigations and make related recommendations as it considers appropriate in a number of circumstances. These circumstances include suspected deficiencies in care and treatment.
10. Previous investigations conducted by the Commission have considered the care and treatment of individuals prior to suicide.

### **Scottish Government action**

11. In March 2017, the Scottish Government published a new [Mental Health Strategy: 2017-2027](#). The strategy contained several ambitions. These included that access to the most effective and safe care and treatment for mental health problems should be available across Scotland and that there should be parity of esteem between physical and mental health problems.
12. The strategy also contained an ambition to provide safe and effective treatment that follows clinical guidelines and is accessed in a timely way. In addition, it aims to ensure appropriate mental health professionals are accessible in Emergency Departments and through other out-of-hours crisis services.
13. The prevention of suicide and self-harm is also being addressed in the national [Suicide prevention action plan: every life matters](#).
14. The action plan sets out 10 key actions with the aim to reduce the number of suicides in Scotland by 20% by 2022. These key actions include:
  - Establishment of a national Suicide Prevention Leadership Group
  - The creation and implementation of refreshed mental health and suicide prevention training.
  - Making recommendations to service providers on differing models of crisis support.
  - Developing appropriate reviews into all deaths by suicide and ensuring these are shared and acted upon.
15. Other recent announcements from the Scottish Government around mental health include:
  - a [review](#) of forensic mental health services, and
  - a [review](#) of mental health and incapacity legislation.
16. Mental health services in Tayside are also currently under review. NHS Tayside commissioned an independent review of services following 10 suicides in the region. The review is being chaired by David Strang, the former Chief Inspector of Prisons.

### Scottish Parliament action

17. At the start of this parliamentary session, the Health and Sport Committee undertook a [short inquiry into mental health services and CAMHs](#).
18. More recently, the Public Petitions Committee commenced an inquiry into [mental health support for young people](#) and the Public Audit and Post-Legislative Scrutiny Committee considered the Audit Scotland report on [children and young people's mental health](#).

### Key organisations

- Suicide Prevention Leadership Group
- Mental Welfare Commission
- Scottish Association for Mental Health
- Health and Social Care Alliance (leading the involvement of patients, families and the public in the Tayside review)
- Samaritans
- Royal College of Psychiatrists Scotland

### Conclusion

19. The Committee is invited to consider what action it wishes to take. Options include—
  - To write to the Scottish Government and other key stakeholders the Committee identifies to seek their respective views on the action called for in the petition.
  - To take any other action the Committee considers appropriate, in light of the announcement on 19 March 2019 by the Minister for Mental Health on the review of mental health legislation.

**SPICe/Clerk to the Committee**

**Public Petitions Committee**  
**7th Meeting, 2019 (Session 5)**  
**Thursday 4 April 2019**

**PE1678: National strategic framework for Countryside Ranger Services in Scotland**

**Note by the Clerk**

<b>Petitioner</b>	Robert Reid on behalf of Scottish Countryside Rangers Association
<b>Petition summary</b>	Calling on the Scottish Parliament to urge the Scottish Government to implement the strategic framework for the network of Countryside Ranger Services set out in the document Rangers in Scotland (SNH 2008).
<b>Webpage</b>	<a href="http://parliament.scot/GettingInvolved/Petitions/PE01678">parliament.scot/GettingInvolved/Petitions/PE01678</a>

**Introduction**

1. This is a continued petition, last considered by the Committee at its meeting on 25 October 2018, when it heard evidence from Scottish Natural Heritage (SNH).
2. At that meeting the Committee agreed to write to the Scottish Government inviting it to address issues highlighted during the course of the evidence, with regards to funding and, in particular who is responsible for delivering and reporting on ranger services across Scotland. It also agreed to seek an update on the Ranger Development Partnership meeting in January 2019.
3. Submissions have been received, and the Committee is invited to consider what action it wishes to take.

**Committee consideration**

4. The Scottish Government says that SNH “provides direct funding for a number of community, voluntary and private Countryside Rangers”, while other bodies including National Park Authorities and National Trust for Scotland “strongly support” countryside rangers.
5. With regard to delivery of services, the Scottish Government says that it “continues to believe that the delivery of local authority duties should be delegated at a local level where possible”. It refers to its previous submission, stating “local government funding is now distributed directly by means of a block grant”, and it is a matter for individual authorities to distribute funds as they see fit.
6. The Scottish Government acknowledges that reports and returns on the provision of ranger services can be useful in providing an overall picture, but notes that “there is no statutory obligation for local authorities to respond to

such an exercise". It notes that authorities may deliver rangers services in different ways and "with different priorities".

7. The petitioner has provided a submission on behalf of the Scottish Countryside Rangers Association (SCRA). That submission provides a summary of the steps that the SCRA has taken in the last year. This includes most recently a meeting with the Chair of SNH and attending a meeting of the Ranger Development Partnership.
8. The SCRA sets out its "aspiration" for the outcome of the petition
  - The creation of a working group to establish the facts behind the significant decline in Ranger Service posts
  - Review and update the strategic framework in support of Ranger Services
  - Secure future funding of Ranger Services
9. The SCRA considers that SNH has "marginalised [its] statutory duties in relation to Ranger Services in Scotland" and adds that it "does not believe that [SNH] would be a suitable agency to lead a government working group and the purpose of the group would be better served if an alternative was identified".
10. The SCRA acknowledges the Ranger Development Partnership which is made up of representatives of Ranger employers but considers that it "does not carry sufficient authority and lacks the clear leadership required to look objectively at the various issues". It adds—
 

"The RDP has failed to secure sufficient local government representation and has never successfully engaged with COSLA. Local authorities are still a major employer of Rangers, representing almost 50% of the total."
11. The SCRA sets out its vision of the purpose and remit of a government working group and considers that "a new policy statement would reflect the future priorities of the government and secure the relevance of our national network in continuing to deliver a world class service appropriate to the needs of Scotland's people and our precious environment".
12. In its submission, the SCRA highlights other matters of concern, including—
  - Local authority budget plans for 2019/20 – "more Ranger posts deleted from the staffing complement"
  - Vacant posts continue to be not filled
  - "Ill-considered" rebranding exercises by Historic Environment Scotland and the National Trust for Scotland, including removal of the Ranger badge from their uniform
  - Inconsistency in government funding
  - Job losses and "adverse realignment" of services in, for example, community-based Ranger Services
13. The SCRA considers that the outcome and delivery of NGOs, private estates and community-based services are "every bit as valid" as those within other



employing agencies who receive direct government funding, such as Forest Enterprise Scotland and the two national parks authorities. It argues—

“Both sectors deliver strongly in meeting government priorities in health, education, community and especially the environment and are worthy of a consistent national approach to their future funding.”

14. Scottish Natural Heritage also provided a submission, with an update on the meeting of the Ranger Development Partnership (RDP) held on 29 January. The submission notes that it was “a positive meeting with much lively discussion across a range of issues relevant to the petition” and includes a full note of that meeting.
15. SNH notes that COSLA was unable to attend the RDP meeting but that a meeting was held in February. It states—
 

“We agreed that there is common interest in the light of the petition of the need to raise awareness within COSLA of the profile of the ranger services in local authorities – this should focus on the benefits provided by ranger services across a range of local authority activity, rather than on the impact of individual budget decisions.”
16. The SNH submission states that COSLA proposed to prepare a paper with SNH on the future of ranger services, for discussion at a meeting of the COSLA Environment and Economy Board, and that it was agreed to hold a further meeting – potentially in May - to discuss the issues relevant to the petition.
17. The SNH submission also provides a summary of the meeting held between the Chair of SNH and the SCRA. This was a “broadly positive meeting which covered the key challenges facing rangers” and considered how the key agencies and stakeholders “could help move rangers forward”.
18. It adds that the Chair committed SNH to providing continued co-ordination and leadership, to develop a “2030 vision” which would “look beyond the current period of significant change/budget uncertainty”. A further meeting to review progress was proposed for early 2020.
19. SNH believes that its work provides “a firm foundation for further collective work on this agenda”. It provides a list of the work it expects to take forward with the SCRA and the RDP over the next twelve months. In conclusion, it states—
 

“[...] we are currently finalising our budget for 19/20, including our funding to community and private sector ranger services. While we need to look for further savings across all our expenditure, we are not proposing to stop funding these services next year.”

## Conclusion

20. The Committee is invited to consider what action it wishes to take. Options include—

- To take evidence on the petition in a round table format at a future meeting with representatives of Scottish Natural Heritage, the Scottish Countryside Rangers Association and the Ranger Development Partnership, including COSLA
- Any other action the Committee wishes to take.

**Clerk to the Committee**

### **Annexe**

The following submissions are circulated in connection with consideration of the petition at this meeting—

- [PE1678/Z: Scottish Government submission of 27 November 2018 \(68KB pdf\)](#)
- [PE1678/AA: Petitioner submission of 11 March 2019 \(318KB pdf\)](#)
- [PE1678/BB: Scottish Natural Heritage submission of 18 March 2019 \(439KB pdf\)](#)

All written submissions received on the petition can be viewed on the petition [webpage](#).

**Public Petitions Committee**  
**7th Meeting, 2019 (Session 5)**

**Thursday 4 April 2019**

**PE1698: Medical care in rural areas**

**Note by the Clerk**

**Petitioners** Karen Murphy, Jane Rentoul, David Wilkie, Louisa Rogers and Jennifer Jane Lee

**Petition summary** Calling on the Scottish Parliament to urge the Scottish Government to:

1. Ensure strong rural and remote GP representation on the remote and rural short life working group, recently established as part of the new GP contract for Scotland.
2. Adjust the Workload Allocation Formula (WAF) urgently in light of the new contract proposals to guarantee that both primary and ancillary services are, at least, as good as they are now in ALL areas so patients do not experience a rural and remote post code lottery in relation to the provision of health care.
3. Address remote practice and patient concerns raised in relation to the new GP contract.

**Webpage** [parliament.scot/GettingInvolved/Petitions/PE1698](http://parliament.scot/GettingInvolved/Petitions/PE1698)

**Introduction**

1. This is a continued petition that was last considered on 22 November 2018. At that meeting, the Committee agreed to write to the Scottish Government and the Scottish Rural Parliament.
2. Responses have now been received in addition to a written submission from one of the petitioners. The Committee is invited to consider what action it wishes to take.

**Committee consideration**

3. At its meeting on 22 November 2018, the Committee agreed to write to the Scottish Government and the Scottish Rural Parliament, seeking its views on the three specific issues raised by the petitioner. What follows is a summary of previous submissions, submissions received since the petition's last consideration and the petitioner's response structured around the three issues raised.

*Remote and rural remote GP Working Group (SLWG)*

4. Previous Scottish Government submissions explain that the Remote and Rural General Practice Working Group (SLWG), chaired by Sir Lewis Ritchie are represented by a number of General Practitioners from a broad variety of rural communities across Scotland as well as the British Medical Association, the Royal College of General Practitioners (RCGP), the Rural GP Association for Scotland (RGPAS), and the Scottish Rural Medicine Collaborative.
5. These submissions also state that the SLWG intends to engage with and seek the views of stakeholders involved in delivering Phase One of the new GP contract by implementing Primary Care Improvement Plans in rural areas to promote and share good practice.
6. The Chair of the Rural GP Association of Scotland stood down in November 2018, stating that he has become “disheartened and disaffected by the lack of commitment to appropriate consideration of the impact of national policy on healthcare to rural communities”. The submission also explains that RGPAS was invited to input informally at the negotiation stage of the GP contract but its comments were “not taken into account”.
7. It is the petitioner’s view that—
 

*“There continues to be a need for questions to be answered around transparency of the SLWG and legitimacy of the original voting process together with how this, and the implications of the new contract for rural communities, are portrayed more honestly”.*
8. The Scottish Government’s December 2018 submission highlights the SLWG’s acknowledgement of the importance of being open and transparent. To this end:
 

*“...a Remote and Rural Working Group webpage has been created where the Terms of Reference and minutes of the meetings are shared publicly. The webpage also includes a Rural Bulletin, which highlights the engagement work of Scottish Government officials between meetings.”*
9. In March 2019, clerks received a copy of the Rural GP Association of Scotland’s (RGPAS) resignation letter from the SLWG, including further work with the group. The letter states the Vice Chair’s disappointment that detailed concerns and solutions raised by the group back in November 2017 in the report ‘[Looking at the Right Map](#)’ have yet to be addressed, and that:
 

*“...there remains an ongoing reliance on rural GPs to fix the problems caused by lack of appropriate rural-proofing in our national contract.”*
10. The resignation letter also states that the SLWG’s terms of reference mean that it is unable to address core issues such as the disparity of resource allocation via the Scottish Workload Allocation Formula (SWAF), in addition to failing to define the additional services currently provided by rural GP’s.

11. The [SLWG rural bulletin](#) (September 2018) confirms that the following is out with its scope:
- Recommending any changes to existing national contracts between Health Boards and individual practices. These can only be changed by the mechanisms set out in the relevant GMS or PMS regulations.
  - Negotiations between the Scottish Government and Scottish General Practitioners Committee towards Phase Two of the Contract are out of scope, unless input on a specific matter is requested jointly by the SG and SGPC.
12. With reference to the SLWG, the petitioner's February 2019 submission states:
- "It is, unfortunately, unable to make recommendations which go against the contract's aims so further deliberation of its role and scope is counterproductive to the purpose of the petition"*

*Calculation of the Scottish Workload Allocation Formula (SWAF)*

13. The Scottish Government's October 2018 submission states that *"no practice has or will lose funding as a result of the new GP contract"*. This is intended to be achieved through an additional £23 million investment by the Scottish Government. The submission goes on to explain that the new Workload Allocation Formula is a "methodological improvement to the previous SAF" which is based on "the best available evidence" and more accurately reflects the work of GPs. According to the Government, the new formula also gives greater weight to older patients and deprivation".
14. However, the Rural GP Association of Scotland's submission raises concerns that—
- "It has now been demonstrated that, partly due to the interpretation of the commissioned Deloitte report<sup>1</sup>, the SWAF has failed to take into account the extra costs of supply of services in rural areas"*.
15. Indeed, Professor Philip Wilson's submission of 24 October 2018 states—
- "The SWAF report is fatally flawed. The Deloitte team made minimal efforts to obtain an informative representative source of patient-level workload data... Instead they used an outdated non-representative sample based on data from Practice Team Information practices"*.
16. The Rural GP Association of Scotland's submission states that while there has been an assurance that there will not be a decrease to GP practice funding, there are a number of reasons why this is of "limited reassurance". This includes the scrutiny process for the Workload Allocation Formula not being

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<sup>1</sup> [A Review of GP Earnings and Expenses](#) was prepared by Deloitte for the Scottish Government and published in November 2017

followed, the view that investment in primary care has not been provided to rural areas and concerns that income protection to practices is not guaranteed in the longer term, meaning that this will affect recruitment and retention of current GP posts in rural Scotland.

17. The Scottish Government's December 2018 submission adds to previous submissions by stating that the updated SWAF helps to deliver:

- Transparency of public investment in general practice funds;
- Improved equity of resource allocation;
- Enhanced sustainability of general practices, and;
- Improved quality of service provision.

18. The petitioner's response to this raises a number of concerns e.g. the prevention of the Technical Advisory Group on Resource Allocation (TAGRA), which provides advice on all resource decisions in the NHS, providing an opinion on the impact of the SWAF.

*"It is important, now that the question has been asked a number of times in the public domain, that the Scottish Government are open and transparent about their rationale for not seeking advice on the SWAF from TAGRA"*

19. Furthermore, the petitioner has a number of questions regarding the SWAF, the topics of which are summarised below:

- The data used as part of the updated SWAF analysis
- The lack of effort to obtain more up-to-date and representative data
- Additional costs of providing GP services in rural areas not being taken full account of in the development of SWAF
- The definition of workload used in the SWAF analysis
- Appointments in rural practices, on average, are more complex than their urban counterparts; meaning that rural practices are at a disadvantage under the SWAF
- The inequality of the SWAF regarding deprived urban practices compared with affluent urban practices

20. The frustrations of the petitioner are made clear on this subject:

*"It is as if they have not read any of the documentation on the petition website, or, if they have, they do not feel they need to answer any of the questions raised by the authors. Their response remains woefully inadequate"*

*The appropriateness of the new GP contract for rural parts of Scotland*

21. The Rural GP Association of Scotland's submission raises serious concerns that the GP contract is not fit for purpose in rural communities, stating that there is growing evidence that the 'direction of travel' is not appropriate for rural Scotland. The submission also highlights that the Scottish Government needs to rural-proof its policies and ensure adequate co-production and patient representation is conducted from the outset, which has been missing from the new contract development.
22. The petitioner's October 2018 submission explains that the Memorandum of Understanding, agreed in November 2017 by the Scottish Government, the BMA, Health Boards and Health and Social Care Partnerships set out the principles by which the new contract is to be delivered. The submission highlights that key to these principles is that "services are only transferred from GPs to Board employed staff where it is safe and sustainable to do so".
23. The Scottish Government's December 2018 submission states the following:  
*"Both the new GP contract and the accompanying Memorandum of Understanding allow flexibility in how primary care services are delivered... a 'one size fits all' uniform approach to delivery is not desirable"*
24. The petitioner's response to this submission states that:  
*"The Memorandum of Understanding restricts the provision of services to those managed by Health Boards, it does NOT allow allocation of funding to practices to provide services which further disadvantages patients."*

**Conclusion**

25. The Committee is invited to consider what action it wishes to take on the petition. Options include—
- To arrange for the Cabinet Secretary for Health and Sport to provide evidence to the Committee on the matters raised in the submissions to date.
  - Any other action the Committee wishes to take.

**Clerk to the Committee**

## Annexe

The following submissions are circulated in connection with consideration of the petition at this meeting—

- [PE1698/G: Scottish Government submission of 21 December 2018 \(470KB pdf\)](#)
- [PE1698/H: Scottish Rural Action submission of 8 February 2019 \(251KB pdf\)](#)
- [PE1698/I: Petitioner submission of 20 February 2019 \(142KB pdf\)](#)
- [PE1698/J: Louisa Llewellyn submission of 21 November 2018 \(56KB pdf\)](#)
- [PE1698/K: Shelagh Cannon submission of 21 November 2018 \(8KB pdf\)](#)
- [PE1698/L: Jane Rentoul submission of 21 November 2018 \(15KB pdf\)](#)
- [PE1698/M: Petitioner submission of 20 November 2018 \(75KB pdf\)](#)
- [PE1698/N: David S. Millward MBE submission of 19 November 2018 \(55KB pdf\)](#)

All written submissions received on the petition can be viewed on the petition [webpage](#).



**Public Petitions Committee**  
**7th Meeting, 2019 (Session 5)**  
**Thursday 4 April 2019**

**PE1705: Wildlife crime – penalties and investigation**

**Note by the Clerk**

**Petitioner** Alex Milne

**Petition summary** Calling on the Scottish Parliament to urge the Scottish Government to review legislation relating to the investigation of and penalties applicable to wildlife crime in Scotland.

**Webpage** <https://www.parliament.scot/GettingInvolved/Petitions/PE01705>

**Purpose**

1. This is a continued petition, first considered by the Committee on 25 October 2018, when it agreed to write to the Scottish Government.

**Committee consideration**

2. In its submission the Scottish Government says that it is “committed to legislate to increase penalties relating to wildlife crime”, and that it intends to “take forward the necessary primary legislation” during this parliamentary session.
3. In a statement to the Parliament on 9 January 2019, the Minister for Rural Affairs and the Natural Environment outlined a number of measures and consultations that the Government is taking forward to inform any primary or secondary legislation.
4. The petitioner indicates that he is pleased that primary legislation is to be taken forward in this parliamentary session and that he would look to respond to any consultations.
5. He has provided written submissions which provide further background and context to his petition. In his most recent submission of 31 March, he states—  
  
“[...] I urge the Scottish Government to recommend by some means that a hearing before a bench of five judges to remove the state of uncertainty in the law in relation to video evidence should be held...”
6. The Environment, Climate Change and Land Reform Committee recently took evidence on the Wildlife Crime Annual Report 2017.
7. The petitioner notes that at that meeting “the SSPCA and police representatives both remarked on the obstacles facing those wishing to present evidence before a court”. He also notes the Opinion of Lady Dorrian in May

2017 in which she referred to the law in relation to video evidence of wildlife crime being in a “state of uncertainty”.

8. The petitioner in his most recent submission puts forward what he considers to be potential solutions to the challenges to presenting video evidence—
  - An agreed standard protocol to be put in place to avoid an incomplete chain of evidence
  - In terms of individuals being recorded, use of or reference to a relevant code of practice (the petitioner refers to the Office of Surveillance Commissioners Procedures and Guidance 2016)
  - The rights of land or property owners where recording is taking place, or an “actual potential offence is being committed” – reference to a similar relevant code, together with individual rights under the Land Reform Act 2003
  - The need to demonstrate that a recording being made does not always require authorisation could be addressed with reference to the Regulation of Investigatory Powers

### **Conclusion**

9. The Committee is invited to consider what action it wishes to take on this petition. Options include—
  - To refer the petition to the Environment, Climate Change and Land Reform Committee for its consideration as part of its ongoing work in relation to wildlife crime, and for any potential scrutiny of relevant legislation in this session
  - To take any other action the Committee considers appropriate.

**Clerk to the Committee**

### **Annexe**

The following submissions are circulated in connection with consideration of the petition at this meeting—

- [PE1705/A: Scottish Government submission of 23 November 2018 \(63KB pdf\)](#)
- [PE1705/B: Petitioner submission of 22 February 2019 \(171KB pdf\)](#)
- [PE1705/C: Petitioner submission of 4 March 2019 \(60KB pdf\)](#)
- [PE1705/D: Petitioner submission of 31 March 2019 \(90KB pdf\)](#)

All written submissions received on the petition can be viewed on the petition [webpage](#).