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Wednesday 26 April 2017

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Scottish Parliament

Wednesday 26 April 2017

[The Presiding Officer opened the meeting at 14:00]

Portfolio Question Time

Justice and the Law Officers

Cashback for Communities (West Dunbartonshire)

1. Gil Paterson (Clydebank and Milngavie)

(SNP): To ask the Scottish Government how much West Dunbartonshire has received as a result of the cashback for communities scheme. (S5O-00889)

The Cabinet Secretary for Justice (Michael Matheson): Young people from West Dunbartonshire directly benefited from over £890,000 of cashback investment from 2008 to 2016. That investment delivered almost 33,000 activities and opportunities up to March 2016.

Phase 4 of cashback started on 1 April 2017, and it will run until 31 March 2020. We are investing £17 million across 17 exciting new programmes that are even more focused on disadvantaged young people in every local authority area across Scotland. That will build on the success of the cashback programme to date.

Gil Paterson: How many activities has the scheme funded in West Dunbartonshire and across Scotland as a whole, and what are the priorities for the cashback for communities initiative?

Michael Matheson: As I mentioned, between 2008 and 2016 we delivered almost 33,000 activities and opportunities in West Dunbartonshire. Across Scotland, we have delivered nearly 2 million free, positive and healthy opportunities and activities for young people to participate in.

The £17 million phase 4 cashback programme started on 1 April this year, and it involves 17 partner organisations delivering for young people throughout the country. The phase 4 cashback programme has an even stronger focus on areas of deprivation and disadvantaged young people. The strong focus on disadvantaged young people will contribute towards reaching our aim of tackling inequality by raising their attainment, ambition and aspiration.

I very much agree with Gil Paterson that cashback gives young people the chance to get creative and broaden their horizons by taking part

in a range of different activities and opportunities. We are providing opportunities to young people to get involved and improve their confidence and sense of achievement. Investment in our young people and their communities through cashback is money well spent.

Maurice Corry (West Scotland) (Con): I note that a large proportion of the cashback for communities scheme money in West Dunbartonshire goes to sports-related projects. Will the cabinet secretary consider a more even spread to other community schemes that are very worth while in West Dunbartonshire?

Michael Matheson: Maurice Corry will recognise that sport is a key component of the cashback programme, but we also have the creative programme and the 17 different programmes that we will take forward with a range of national organisations. We will tailor and deliver programmes that are specific to local areas. Some of them will involve outdoor activities that are not sport related as such; those activities will involve participation in other types of programme.

This week, the first of the experience in going sailing events through the youth ocean-going training programme is taking place. Young people from the Borders are participating in that. A range of different programmes will be delivered in West Dunbartonshire and other parts of Scotland, in which young people from West Dunbartonshire will be able to participate. The 17 organisations that we have given funding to will be responsible for considering how things will be delivered at local level and ensuring that, if the programmes are national, people from areas such as West Dunbartonshire will get the opportunity to participate in them.

Police Stations (Support for People with Mental Health Problems)

2. Tom Arthur (Renfrewshire South) (SNP): I remind members that I am the parliamentary liaison officer for the Cabinet Secretary for Justice.

To ask the Scottish Government what action it is taking to ensure that police stations are resourced to support people with mental health problems. (S5O-00890)

The Cabinet Secretary for Justice (Michael Matheson): There is increasing recognition of the key role that the police play in supporting people who are vulnerable or in distress, including people with mental health conditions. The draft "Policing 2026" strategy, which was recently published for consultation by Police Scotland and the Scottish Police Authority, emphasises the importance of a partnership approach in providing effective support to people with mental health conditions. There are already very good examples of collaboration

between Police Scotland and national health service partners to improve the response and service to people who are in distress or suffering from mental health difficulties. For example, community triage services, which provide officers with out-of-hours access to community psychiatric nurses, are operating in the Glasgow area and in Edinburgh, and several other areas across Scotland are developing similar services.

The Scottish Government's mental health strategy contains an action to increase the mental health workforce to give access to dedicated mental health professionals in a number of key settings, including the police service. To meet that commitment, the Scottish Government will increase the additional investment to £35 million over the next five years, which will pay for 800 additional mental health workers in those settings.

Tom Arthur: Given that as many as 80 per cent of incidents that are attended by Police Scotland are non-criminal call-outs, including responding to vulnerable individuals and individuals with mental health conditions, does the cabinet secretary agree that the provision of dedicated mental health professionals in police stations across Scotland will be an invaluable addition to local policing?

Michael Matheson: It is important that vulnerable individuals, particularly those who are in distress or experiencing mental ill health, get the right support at the appropriate time when they contact one of our emergency services, including the police service. The additional investment that we are putting into the mental health workforce will help to increase capacity to assist the police in addressing issues relating to mental ill-health.

It is worth noting the significant work that Police Scotland is taking forward. Last week, I had the privilege of visiting Police Scotland's Fife divisional headquarters in Glenrothes, where I saw at first hand the excellent work that is being undertaken to equip officers and staff with the skills required to support people who have mental ill-health or who are experiencing distress. Police Scotland is leading the way on the issue, with the training of all its officers up to the rank of inspector. That training of around 17,500 officers will be completed by May this year, when they will all have been trained and equipped with the necessary knowledge and skills to work with individuals who are experiencing mental ill-health and distress and to respond to that appropriately and effectively.

Scottish Legal Complaints Commission (Levy)

3. **Elaine Smith (Central Scotland) (Lab):** To ask the Scottish Government what discussions it has had with the Scottish Legal Complaints Commission regarding the 12.5 per cent increase in the solicitor levy. (S5O-00891)

The Minister for Community Safety and Legal Affairs (Annabelle Ewing): I draw members' attention to my entry in the register of members' interests, where they will find that I am a solicitor by profession and hold a current practising certificate, albeit that I do not practise.

Officials met the Scottish Legal Complaints Commission on 9 March to discuss the background to its proposed budget. The commission is an independent statutory body and operates independently of the Scottish Government and the legal profession. It is for the commission to determine the annual levy to be paid by the legal profession, in accordance with legislation. The Scottish ministers have no statutory powers regarding the commission and hence have no statutory role in operational matters.

Elaine Smith: I thank the minister for that response, but it will be rather disappointing to the many constituents who have approached me and, no doubt, other members, hoping that the matter can be raised in Parliament and that some action might be taken. It might be rather confusing for them to hear that answer since, in 2010, the then Minister for Community Safety, Fergus Ewing, wrote to the SLCC expressing strong views on a proposed increase in the solicitor levy. Why can the Scottish Government not do so now, particularly given that the Law Society of Scotland has remarked that the increase is "unacceptable" and given that, at that time, Fergus Ewing said that ministers would review the situation and see whether changes in the respective power of ministers and the commission were desirable?

Annabelle Ewing: Scottish Government officials have in fact written to the chief executive of the Scottish Legal Complaints Commission to raise the concerns that have been raised recently by members of the profession concerning, among other things, governance, the approach to efficiencies and the extent of non-core activities. That letter has been sent to the chief executive of the SLCC and we await his response.

On the wider issue of looking at the system as a whole and how it can be made to function better and with wider acceptance, the member might be aware that yesterday we announced the launch of an independent review of the regulation of legal services, which reflected our manifesto commitment to review the regulation of the legal profession. The complaints system is made up of a number of processes and actors, one of which is the SLCC and, further to the independent review, reviewers will be able to investigate what changes will be required to strengthen public trust in the system, and to modernise and simplify the system and the regulatory structure that underpins it.

Gordon Lindhurst (Lothian) (Con): I remind members of my register of interests and the fact that I am a practising advocate subject to the SLCC levy.

As part of the independent review, will the question arise of some mechanism whereby the SLCC levy setting should itself be subject to independent review? It seems somewhat ironic that a body that is meant to look independently and objectively at complaints against members of the legal profession should be able to set such a levy without reference to independent consideration of what the appropriate levy should be.

Annabelle Ewing: I remind the member that the statutory framework that we are talking about was introduced further to the Legal Profession and Legal Aid (Scotland) Act 2007—passed in this Parliament on 14 December 2006—and that the act provided for the Scottish ministers having no statutory role in the operation of the commission.

Looking to the future and the independent review of the regulation of legal services, it will be a matter for the chair of the review, Esther Roberton, and her panel to consider all the issues that they feel are relevant within the terms of reference that are set. For full details of the review, I refer the member to the inspired parliamentary question that was answered yesterday.

Rona Mackay (Strathkelvin and Bearsden) (SNP): Given that setting the SLCC levy is not a matter in which the Scottish Government has a role, does the minister agree that the attendance of both parties at a meeting last week was a positive step and that it enabled further discussion and an opportunity for the SLCC and the Law Society of Scotland to present their concerns directly to one another?

Annabelle Ewing: I was aware of Rona Mackay's excellent initiative and I commend the action that she took in seeking to facilitate dialogue between the SLCC and, in particular, the Law Society of Scotland. As the member will have heard, there have been a number of initiatives over the past few days that have sought to move the issue forward and to look to the future with regard to how we improve our statutory regulatory framework in the years ahead. I commend the action that the member took, at her own initiative, to move the issue forward.

Emergency Control Rooms (Coverage of Islands)

4. Tavish Scott (Shetland Islands) (LD): To ask the Scottish Government how effective emergency control rooms are in recognising island geography. (S5O-00892)

The Cabinet Secretary for Justice (Michael Matheson): The emergency services use a number of different tools to support them in the identification of incident locations. It is those tools, alongside extensive training and the utilisation of local knowledge that is held by response units, that support the delivery of a prompt and effective service to members of the public across the country, including in our island communities.

Tavish Scott: The cabinet secretary will be aware that, of late, the Scottish Ambulance Service sent a plane to Shetland rather than to Orkney, and that there have been a number of incidents with regard to fire control emergency response systems, including the fire service being called out to the island of Bressay when it should have been on the island of Yell. Would he be prepared at least to undertake an examination of the merits of a joint control emergency system for the islands to avoid them having to encounter such problems?

Michael Matheson: As the member will be aware, significant preparatory work has gone into the changes to the operational control arrangements for the Scottish Fire and Rescue Service. In recent times, the member has met the chief fire officer, Alasdair Hay, to discuss some of his concerns regarding the incident that he made reference to.

It is worth keeping in mind the fact that there has always been an element within the provision of operational control by some of our emergency services that means that the geographical location of the contact centre is not the key issue. It is the knowledge of the staff and the tools and equipment that they have in that particular facility that are important in making sure that resources are deployed to the appropriate area.

By way of illustration, before the Scottish Fire and Rescue Service control centre in Johnstone took in the Dumfries area when we moved to a single fire service, that centre covered almost 50 per cent of the calls that came into the fire service in Scotland, which were primarily for the Strathclyde fire service. It also covered approximately 29 island communities around our coasts. There was not so much of an issue with the centre in Johnstone being able to discharge its role effectively; we had to make sure that the staff were properly trained and had the necessary equipment to deploy resources appropriately.

That is the approach that is being taken by the Scottish Fire and Rescue Service and by Police Scotland. I have no doubt that those organisations will continue to look at what further improvements can be made to the way in which the contact centres and the operational control centres are working.

Edward Mountain (Highlands and Islands)

(Con): I will give two examples and limit it to that. The Lairg crew was called out to attend an incident in Skye, which is a two-hour journey and more than 100 miles away. On 22 December, the Raasay crew was called off island to attend a road traffic accident on Skye after the ferry had closed because it was deemed to be the closest station. The Raasay crew informed the Dundee control room that the call was inappropriate and the crew from Kyle was then called out.

Surely those examples support my contention that we should have a control centre in the Highlands that has the relevant and intrinsic knowledge of the Highlands to sort out the emergency incidents that happen there.

Michael Matheson: The member will recognise that the Inverness control centre has already moved to Dundee and that the chief inspector of the Scottish Fire and Rescue Service will carry out an inspection in the coming weeks to assure us that all the measures are in place that should be in place to ensure that the operational control centre responds to calls effectively.

The chief fire officer has responded to some of the specific incidents and explained how some of them came about and the way in which the fire service has addressed them. It would be fair to say that the chief fire officer has also disputed some of the media interpretations of the incidents.

I assure the member that the Scottish Fire and Rescue Service and Police Scotland do a significant amount of work to reassure us about the way in which their contact command and control centres are operating. That work will continue. Part of that is also about recognising notable incidents of things going wrong and making sure that they are properly identified and that the services learn from them so that they minimise the risk of them happening again. That work will continue to be taken forward by Police Scotland and the Scottish Fire and Rescue Service.

The Presiding Officer (Ken Macintosh): Question 5 was not lodged.

Scottish Police Authority

6. Monica Lennon (Central Scotland) (Lab):

To ask the Scottish Government when the Cabinet Secretary for Justice last met the chair of the Scottish Police Authority. (S5O-00894)

The Cabinet Secretary for Justice (Michael Matheson): I last met the chair of the Scottish Police Authority on 18 January 2017. *[Michael Matheson has corrected this contribution. See end of report].*

Monica Lennon: The cabinet secretary will be well aware of the SPA's terrible performance at last week's Public Audit and Post-legislative Scrutiny Committee's evidence session on Audit Scotland's damning report on the governance and financial management of our vital police services. There was a succession of secret meetings and a letter from Her Majesty's inspectorate of constabulary in Scotland that was hidden from members of the SPA. A board member was driven out in a despicable manner because she dared to scrutinise and carry out her duties. The reputation of the Scottish Police Authority is in crisis but the chair of the SPA says that he has no regrets. Is Andrew Flanagan capable of turning things around? He has already faced calls for his resignation. I ask the cabinet secretary: should he stay or should he go?

Michael Matheson: There is no doubt that the Public Audit and Post-legislative Scrutiny Committee will want to consider the evidence that it received at last week's meeting and which it will receive at future meetings.

I am clear about the need for the Scottish Police Authority, like any public body, to be open and transparent about the way in which it discharges its responsibilities. I have made that clear to the chair and to the Scottish Police Authority that the body needs to ensure that the processes and mechanisms that it has in place are open and transparent.

The member will also be aware that I have asked Her Majesty's chief inspector of constabulary in Scotland to bring forward a specific element—its statutory inspection, which was planned for the Scottish Police Authority this year—and to bring forward the governance aspect of that in order to ensure that we can have further assurance around the way in which the SPA is taking these matters forward. Once we have the HMICS report on the matter, we can consider any recommendations or findings that it contains.

I expect the SPA, like all public bodies, to make sure that it is open and transparent in the way in which it conducts its business and to address in an open manner any issues of concern that have been raised with it, so that people can see that it is learning lessons in relation to approaches that it has taken in the past and which are not the approaches that should be taken in the future.

Legislative Competence (Role of Lord Advocate)

7. Mike Rumbles (North East Scotland) (LD):

To ask the Scottish Government what role the Lord Advocate has in determining the competency of legislation. (S5O-00895)

The Lord Advocate (James Wolffe): I thank Mr Rumbles for giving me my first opportunity to exercise the privilege of speaking in the chamber since I was appointed last year.

By law and under the standing orders of this Parliament, the member who is in charge of a bill has to make a statement to the effect that, in his or her view, the provisions of the bill are within the legislative competence of this Parliament. In the case of a Government bill, the minister will give that statement.

Paragraph 3.4 of the Scottish ministerial code confirms that that statement will have been cleared with the law officers. The law officers consider the terms of every Government bill that is to be introduced in the Parliament and provide ministers with advice that enables them to make the statement that is required of them by law.

Law officers also consider legislation after it has been passed by this Parliament. I have the power, should I consider it appropriate to do so, to refer a bill to the Supreme Court of the United Kingdom at that stage.

Mike Rumbles: Does the Lord Advocate also believe that it would be his duty to refer to the Court of Session a Scottish Government bill that had, perhaps against his advice, been laid before the Scottish Parliament without having received a certificate from the Presiding Officer confirming that it is within the remit of the Scottish Parliament?

The Lord Advocate: The ministerial code makes it clear that a statement by a minister that a bill that is presented is within the legislative competence of the Scottish Parliament will have been cleared with law officers. The powers that I have to make references in relation to legislation are those that are set out in the Scotland Act 2016.

The Presiding Officer (Ken Macintosh): I am glad that I made time for one extra question. I apologise to members who wished to ask supplementary questions, but we must move on.

Culture, Tourism and External Affairs

The Presiding Officer: Question 1 is from Richard Lochhead—I am sorry, I mean Richard Leonard.

Tourism

1. Richard Leonard (Central Scotland) (Lab): To ask the Scottish Government when it will next meet representatives of the tourism sector. (S5O-00899)

The Cabinet Secretary for Culture, Tourism and External Affairs (Fiona Hyslop): I will be

chairing the tourism working group on 18 May. That high-level group has a strategic focus on the future development of tourism, and includes industry representation through the Scottish Tourism Alliance, as well as public bodies with a role in the development of tourism, such as VisitScotland, Highlands and Islands Enterprise and Scottish Enterprise. This morning, I visited the VisitScotland expo in Glasgow.

Richard Leonard: This week, at the Scottish Trades Union Congress's 120th annual congress in Aviemore, the Labour and trade union movement has been promoting a charter of rights for a key group of workers in Scotland's tourism industry: those who work in hospitality. As part of the "better than zero" campaign, Unite the union has organised a formal launch later this month of the charter of rights that has been drawn up by hospitality workers themselves, and the parliamentary launch of the charter is planned to take place here next month. Will the cabinet secretary join me in welcoming that, and will she commit her Government to supporting the fair hospitality charter, which includes payment of a real living wage, minimum-hour contracts, proper rest breaks, equal pay for young workers and the right for trade union access in order to organise all workers in Scotland's hospitality and tourism industry?

Fiona Hyslop: I listened to Richard Leonard's question with interest. I have not read the charter, but would be interested to see it. One of the big challenges is to ensure that we tackle low pay so that we can encourage more people into the sector, which has great career opportunities. We ought to ensure that the sector is a good place to work for everyone involved so, in that spirit, I would be interested in finding out a bit more about the charter.

On trade union work, Richard Leonard will be aware that the Scottish Government has committed £0.25 million to a trade union modernisation and fair work fund to help trade unions to embed the fair work framework in workplaces across Scotland. I intend to take forward that important agenda in relation to fair work in the hospitality and tourism sector. We want to see the sector grow, but everybody has to share in that growth.

Stuart McMillan (Greenock and Inverclyde) (SNP): Does the cabinet secretary agree that the themed years are a tremendous example of the Scottish Government and its agencies working together imaginatively to help not just the country but local communities, and that the year of coast and waters in 2020 can aid our marine tourism strategy?

Fiona Hyslop: Yes, I agree. Themed years have been a great opportunity for partnership

working. I commend the cross-party group on recreational boating and marine tourism, and Stuart McMillan, for their work on marine tourism. The work that was done on the “Awakening the Giant” strategy has helped us come to the decision to designate 2020 as the year of coast and waters. The marine industry and the marine tourism industry have a great opportunity to exploit that and ensure that our wonderful coast and extensive waters—lochs, rivers or whatever—can be seen by the many visitors who come not only from within Scotland and the UK, but from further afield.

UNESCO World Heritage Sites

2. John Finnie (Highlands and Islands) (Green): To ask the Scottish Government what value it places on locations in Scotland holding UNESCO world heritage site status. (S5O-00900)

The Cabinet Secretary for Culture, Tourism and External Affairs (Fiona Hyslop): The Scottish Government attaches great value to UNESCO world heritage site status. We are in the year of history, heritage and archaeology. On world heritage day, I took part in an event that celebrated the importance of one of our six world heritage sites—the Antonine wall, at which Picts and Romans were in evidence. There was even a great Roman bake-off. Using innovative and creative ways not just to preserve and conserve our heritage sites but to make them inviting places for people to visit is very important.

John Finnie: The cabinet secretary may be aware that north-west Highlands geopark is involved in a crowdfunding project, on which I asked for an update. I was told:

“We are weeks away from having no staff so the crowdfunder is our urgent attempt to stay afloat. Without staff, we will almost definitely lose our UNESCO status.”

The decision on Lochaber geopark has been deferred until such time as funding for staff can be secured.

The “Wider Value of UNESCO to the UK” report showed that geoparks each provide £3 million on average to the economy. In comparison, world heritage sites each contribute £2.2 million. Given the on-going challenges that the north-west Highlands geopark faces, will the cabinet secretary agree to meet me and Dr Laura Hamlet, the geoarchaeologist there, to discuss how we can resolve the issue for the longer term?

Fiona Hyslop: The basic fact of which John Finnie should be aware is that the geopark is not one of our world heritage sites, which are the subject of his first question. I have responsibility for world heritage sites; the Cabinet Secretary for the Environment, Climate Change and Land Reform has responsibility for the geopark in

question. There has been extensive investment in the geopark over many years, although I understand that there are currently problems. I will ask the minister who has the appropriate responsibility to respond to John Finnie. Geoparks are not the subject of his first question.

Gordon Lindhurst (Lothian) (Con): Will the cabinet secretary provide an update on the setting up, as part of the historic environment strategy for Scotland, of the skills and expertise group to resolve shortages in the traditional building sector? The sector carries out vital work on historic buildings in Edinburgh’s world heritage site.

Fiona Hyslop: Scotland’s first historic environment strategy, “Our Place in Time”, has been warmly welcomed across the sector, including not just Historic Environment Scotland—which is responsible for properties that are in the care of ministers—but the National Trust and private properties.

There is a skills group that has been established for some time. The work that we have embarked on in Scotland is very extensive. Gordon Lindhurst may not have visited Forth Valley College—he should visit it, if he has not—which is one place where we have invested in increasing the number of apprentices who are learning building skills. I think that Scotland is leading the UK in making sure that we are training people in those skills.

I also encourage the member to visit the Engine Shed in Stirling when it opens soon. It will be a beacon. Its development has involved work with the construction skills sector, on which Historic Environment Scotland has led, to ensure that we have a place that people can visit so that we can encourage people to take up building skills. The age profile of the people who have traditional building skills is such that we need to bring new people into the sector. I commend all those who have been involved in that project.

Tourism (Impact of Rise in Business Rates)

3. Rachael Hamilton (South Scotland) (Con): I draw members’ attention to my entry in the register of members’ interests; I am involved in a hospitality business.

To ask the Scottish Government what the impact on the tourism industry will be of the rise in business rates. (S5O-00901)

The Cabinet Secretary for Culture, Tourism and External Affairs (Fiona Hyslop): Recognising the value of tourism within the Scottish economy, we acted to cap non-domestic rates increases in the light of the revaluation. Specifically, we have targeted £37 million of additional rates relief within the hospitality sector this year. Hotels were facing an average 37 per

cent rates increase after this year's revaluation. That has now been reduced to around 12 per cent. That has, understandably, been widely welcomed by the sector, and we continue to engage with it regarding our longer-term approach.

Rachael Hamilton: I thank the cabinet secretary for that answer. Parliament was told by the Cabinet Secretary for Finance and the Constitution that there would be a cap on a business rates increase of 12.5 per cent. Now we learn that the real increase will be 14.75 per cent and that it will take 105 days for a decision to be made on any appeal. Why was the industry misled on rates and why does the Scottish Government continue to increase financial anxiety within the sector?

Fiona Hyslop: We have not increased financial anxiety. We have worked very swiftly to respond to requests. Rachael Hamilton should know, given that she declared her interest in the matter, that it was an independent rates revaluation. The response by the Scottish Government has been warmly welcomed. The member will also know that in establishing and setting the rate at which the relief would apply, we were consistent with what the UK Government does in making the announcement in real terms rather than in cash terms. That is consistent with the approach of the UK Treasury.

Clare Haughey (Rutherglen) (SNP): Does the cabinet secretary agree that it is a bit rich for Rachael Hamilton to come to the chamber and play politics over business rates when organisations including the Federation of Small Businesses called the measures that were announced in February "sensible"—which should provide some comfort for Scotland's vital tourism and hospitality industries—especially given that her own business will save more than £5,000 this year? Is it not about time that Rachael Hamilton stopped asking self-serving questions and started standing up for her constituents?

The Presiding Officer: I ask the cabinet secretary to keep her reply relatively brief. I ask members not to personally attack other members in the chamber. Every member has the right to ask a question in this chamber.

Fiona Hyslop: Clare Haughey set out her point very well. The point is that the industry has accepted and supports what we have provided. There is also an issue about the self-interest of parties and individuals in the chamber; it is up to them to declare their interests.

The Presiding Officer: I note that Rachael Hamilton declared her interest before asking her question.

Cruise Ships (Newhaven)

4. Ben Macpherson (Edinburgh Northern and Leith) (SNP): To ask the Scottish Government what impact cruise ships at Newhaven have had on tourism in the area and on Edinburgh as a whole. (S5O-00902)

The Cabinet Secretary for Culture, Tourism and External Affairs (Fiona Hyslop): The Scottish Government welcomes the investment that Forth Ports has made at Newhaven, which has enabled the harbour to play a growing role in the success of Edinburgh as a key cruise ship destination.

With the installation of new facilities this year to allow passengers to disembark more easily, a larger number of cruise passengers will be able to enjoy the numerous attractions that the city has to offer. The number of vessels is going up—there were six in 2016 and 12 vessels are due to call in 2017. Scottish Enterprise has recently awarded £79,000 to Cruise Forth as part of its tourism destination development fund. Cruise Forth works with Forth Ports and other partners to further the development of business opportunities from the cruise market.

Ben Macpherson: What is the Scottish Government doing to support enhanced cruise ship docking facilities and related commerce at both Newhaven and Leith?

Fiona Hyslop: I set out in my initial answer some of the investment that has been made. Obviously, the opportunity to develop the pontoon to make sure that more people can come ashore is one thing.

It is also important to think about the investments that we have had, such as that in the dazzle ship, which marked the battle of Jutland and which was in that area previously. The Britannia has provided an opportunity to attract visitors for many years. There is also Trinity House, as well as other opportunities such as Leith Links and other places.

Whether it is the Clan Tartan Centre at Leith Mills or the Scottish Design Exchange, we are seeing a shift and a movement whereby Leith is reclaiming its heritage and also promoting itself as a visitor destination, not just a gateway to the city of Edinburgh.

Jeremy Balfour (Lothian) (Con): I remind the chamber that I am a councillor in the City of Edinburgh Council. Clearly, people who arrive on cruise ships will want to visit Leith, but they might also want to visit other parts of the city. Is the Scottish Government committed to seeing the tram extended from where it ends at the moment down to Newhaven and, if so, is it willing to

provide finance and help to such a project in the next five years?

Fiona Hyslop: First I was asked about geoparks and now I am being asked about trams. I understand that transport infrastructure is quite often an integral part of making sure that tourists can visit all parts of the city and beyond. I hear the plea from the member and I will be sure to refer it to the Minister for Transport and the Islands.

Jacobite Trail

5. Iain Gray (East Lothian) (Lab): To ask the Scottish Government what discussions it has had with VisitScotland regarding the Jacobite trail. (S5O-00903)

The Cabinet Secretary for Culture, Tourism and External Affairs (Fiona Hyslop): The Scottish Government has not been directly involved in discussions with VisitScotland about the Jacobite trail, although this morning I attended the VisitScotland expo in Glasgow and had a chance to see the national museum of Scotland's stall on its exhibition about Bonnie Prince Charlie and the Jacobites, which accompanies the trail that the member is interested in.

I have been informed about the trail through the year of history, heritage and archaeology. The trail is primarily a marketing campaign that has been developed and funded by a partnership involving National Museums Scotland, the National Trust for Scotland, Historic Environment Scotland and the Royal Collection Trust, as part of their contribution to the year. The focus of the trail is on the properties and collections that are held by those organisations, such as Doune castle, the Glenfinnan monument and the Palace of Holyroodhouse. It has been supported by the VisitScotland growth fund. If Mr Gray would like additional information or to discuss the matter further, that would best be done with VisitScotland and the trail partners.

Iain Gray: I appreciate that the Jacobite trail is a promotion of the partners that the cabinet secretary describes, but I have to say that, for those of us in East Lothian, it seems ludicrous that the site of the battle of Prestonpans is entirely omitted from the trail. I am no Jacobite—then or now—but even I think that the site of Charles Edward Stuart's most famous victory should be a centrepiece of any Jacobite trail.

More to the point, the cabinet secretary must surely agree with me that that omission is a kick in the teeth for both the Battle of Prestonpans (1745) Heritage Trust and the tourist industry in East Lothian. In her discussions with those partners, will she take the chance to make that point?

Fiona Hyslop: The member's point is well made. As I said, the partnership is concentrated

on the properties, owned by those partners, that have a relationship with the Jacobite story.

The Battle of Prestonpans (1745) Heritage Trust submitted an expression of interest in the growth fund on 15 March and put in an application for the creation of virtual reality resources that could be used around Prestonpans. Unfortunately a meeting in March was cancelled by the trust itself. I encourage the meeting to take place to see whether there are any opportunities to involve the Prestonpans experience as part of the trail.

As I have said repeatedly, it is not for me, as cabinet secretary, to tell individual institutions what they should exhibit or curate or what they should not. However, in the spirit in which the member has made his request, I will make sure that the partners are alerted to the concerns that he raised today.

The Presiding Officer: Question 6.

International Development Organisations (Sri Lanka)

6. Bob Doris (Glasgow Maryhill and Springburn) (SNP): My apologies, Presiding Officer; I was caught on the hop.

To ask the Scottish Government what links it has established with international development organisations working in Sri Lanka. (S5O-00904)

The Minister for International Development and Europe (Dr Alasdair Allan): The Scottish Government is engaged with a wide cross-section of international development organisations working across the world, many of which are undertaking vital work in Sri Lanka. We fund the Network of International Development Organisations in Scotland, which in turn supports the Scottish international development organisations that work in Sri Lanka, which include Challenges Worldwide, Save the Children and the HALO Trust.

Between 2010 and 2013, the Scottish Government provided more than £1 million for our international development fund for several such projects in Sri Lanka through a number of Scottish organisations, including Police Scotland and Sightsavers. We published our new international development strategy in December 2016, which focused our partner country approach on Malawi, Zambia, Rwanda and Pakistan. Although Sri Lanka is not one of our development partner countries, we are building on the work that we supported in Sri Lanka in our new partner countries.

Bob Doris: I am delighted that we reached question 6.

I commend the Sri Lankan diaspora community group Glasgow Integrated Community

Empowerment and International Support and its chairperson David Nalaratnam. GICEIS raises funds to deliver action to tackle child hunger and boost child education in three rural communities in Sri Lanka. The positive role of the Sri Lankan diaspora in my constituency of Glasgow Maryhill and Springburn and across Scotland is to be encouraged.

I invite the minister to meet Mr Nalaratnam and representatives of GICEIS, which is based in Royston, to find out more about their excellent work and how we can encourage more use to be made of that model in supporting the communities that they left behind in their country of origin.

Dr Allan: I am very happy to commend the work of the Sri Lankan community in Scotland. As part of our consultation on the new international development policy, the Scottish Government held a specific round-table event to meet diaspora groups. I am following up on those meetings and I will be happy to include in them representatives of the Sri Lankan diaspora community, along with representatives of our partner countries. I look forward to organising such an opportunity to meet in the near future.

Richard Leonard (Central Scotland) (Lab): On a point of order, Presiding Officer. Before asking my question, I failed to direct members to my entry in the register of members' interests, which includes my membership of Unite the union. I apologise for that omission.

The Presiding Officer: Thank you—and I apologise for the misidentification. I wondered why Mr Lochhead was not in the chamber to ask his question.

Carers and Social Care

The Presiding Officer (Ken Macintosh): The next item of business is a debate on motion S5M-05312, in the name of Alison Johnstone, on carers and social care.

14:43

Alison Johnstone (Lothian) (Green): I am proud to lead a debate that calls for greater recognition and support for all those who provide care, whether by working in our overstretched social care sector or by providing unpaid care, and I am proud to commit to the principle that high-quality social care should ultimately be free at the point of use. I thank all those who have provided well-evidenced briefings, as well as the young and adult carers and staff who shared their experiences with me when I visited Edinburgh Young Carers Project this morning.

The introduction of free personal care for the elderly has rightly been regarded as a success, as it provides greater security and dignity to elderly people across Scotland. That is truly a case of Scotland leading by example. However, in previous debates, we have heard that social care charges for those who are under the age of 65 put people under financial strain and limit their independence. The Scottish Greens fundamentally believe that social care is essential to people's health, dignity and control.

Recently, the Scottish Government has committed to making social care at home free for those who are in the last six months of a terminal progressive illness. There have also been proposals to make social care free for all those who have conditions such as dementia and other degenerative neurological conditions. I applaud all the campaigners, charities and constituents who have pressed hard for those changes—not least Amanda Kopel, who has campaigned for Frank's law, and we cannot fail to pay tribute to Gordon Aikman, whose contribution cannot be overestimated.

Such steps are positive but, in the long term, we must be wary of moving towards basing entitlement to free social care on a particular medical diagnosis. Many people believe that that is discriminatory and cannot be justified. If a person needs the care, they need the care—it should not matter what condition they have or what age they are. That is why the Scottish Greens believe that we must commit to funding high-quality social care that is ultimately free at the point of use for all, regardless of age or medical condition.

We know that the Scottish Government has commissioned a feasibility study on extending free

personal care to under-65s—initially for people with dementia, but with consideration of all conditions. The Cabinet Secretary for Health and Sport previously told us that she would be happy to use that study as the focal point for cross-party discussions on extending free personal care to under-65s. I ask the Government to update us on the progress of that study and to tell us when it will share the findings. It is time for the discussions on progressive changes to social care policy to begin and for the Government to make clear its position on the abolition of all social care charges. The integration of health and social care strengthens the case for moving towards a truly cohesive health and social care system that is free at all points of use.

The debate is about unpaid carers, too. According to Carers Scotland, unpaid carers save the Scottish economy £10.8 billion, which is close to the cost of providing national health services in Scotland. Three out of five of us will become carers at some stage in our lives, but the value of the work that carers do is not recognised. Nobody should face poverty because of the care that they give, but research by Carers Scotland shows that a third of carers struggle to pay utility bills, 47 per cent have been in debt and half of carers struggle just to make ends meet.

Carers UK's caring and family finances inquiry found that, on average, carers lose £20,000 a year by choosing to care and about 35 per cent of carers who care for more than 25 hours a week are in poverty. The cost of caring goes on, because of lost earnings and lost opportunities to build up pension contributions. One of the young adult carers who I met this morning had to turn down a university offer because of caring, and another lost a job because of caring responsibilities. The impact of caring on earnings is very clear.

The Government made a manifesto commitment to increase carers allowance to the same level as jobseekers allowance and has been reviewing the "financial implications" of topping up carers allowance. We cannot allow support for carers to be delayed or reduced, so I invite the Government to make clear its plans to deliver that manifesto promise. That top-up does not go far enough—bringing carers allowance into line with jobseekers allowance does not recognise the vital work that carers do. That is why the Scottish Greens campaigned to lift carers allowance by 50 per cent, to £93.15 a week.

We want to secure a fair settlement with the United Kingdom Government and local authorities, so that any increase in the allowance will not interfere with the payment of other benefits or increase care charges that people pay. There should also be a premium for those who care for

more than one person. The Government intends to increase carers allowance for those who care for more than one disabled child; I urge it to take a broader view and consider everyone who cares for more than one person, no matter what age they are.

I am glad that the Government has agreed to consider introducing some form of young carers allowance, because we must provide better support for young carers and young adult carers. There are at least 29,000 young carers in Scotland with significant practical or emotional caring responsibilities. The demands of caring can have a detrimental impact on young people's mental health, educational attainment and overall wellbeing.

There is also strong evidence that the most financially vulnerable young people are disproportionately likely to have caring responsibilities. Recent research for the Children and Young People's Commissioner Scotland indicates that 27 per cent of young carers come from the most deprived 15 per cent of areas of Scotland. The Carers Trust stresses that young carers are always children, first and foremost. We should minimise their practical caring responsibilities wherever possible and provide additional support in a way that prioritises their education and personal development.

The Carers (Scotland) Act 2016 is a good step forward; there was broad cross-party support for that important piece of legislation, which put carers' entitlement to support and respite on a statutory footing. Regardless of a carer's age, the importance of access to respite and the positive impact that respite has cannot be overstated, and we have a duty to make sure that those rights are delivered in practice. Many people do not realise that they are carers and do not know that they are eligible for support.

I call attention to the role that employers can play in supporting carers. Juggling work and providing care is tough and, all too often, it gets too much. The organisation Employers for Carers points out that there are costs for companies when they lose staff because of their caring responsibilities. As our population ages, we need to develop more forward-thinking employment policies and make paid leave for carers widely available. So far, only five employers in Scotland have been awarded exemplary status by Carers Scotland and the power company Centrica is the only one in the private sector to have received it. It is therefore clear that employers of all kinds have a way to go.

I turn to the need to strengthen pay and conditions in the social care sector. The Government's commitment to paying social care staff the living wage was welcome and I am glad

that it has extended that commitment to personal assistants and social care workers in day centres. However, I am concerned—I would welcome clarification from the cabinet secretary or the minister on this—that there is no guarantee that social care staff who work with children will be entitled to the living wage. Moreover, the living wage does not reflect the incredible value of such work, its emotional demands and the deep commitment that carers bring to every care visit in every home and by every bedside.

Scottish Care's report "Trees that bend in the wind: exploring the experience of front line support workers delivering palliative and end of life care" provides an insight into the challenging role of social care staff who support people with progressive illnesses or people who need palliative care. Not only do those staff deliver increasingly complex care for the most vulnerable, but many have direct experience of being by people's sides as they die. Social care staff are a vital support for bereaved families and they have to manage feelings of loss themselves, but they are not afforded the recognition that they deserve. That is why the Scottish Greens want to pay all social care staff a living wage plus of £9.20 an hour. If we are serious about building a sustainable and compassionate social care system, pay for staff must reflect that.

I believe that the Government's long-term goal is for sleepovers to be paid at the living wage rate, but it would be helpful if we heard about a timescale for achieving that. I have heard from constituents who work in the social care sector that they are still not fairly paid for all the time that is spent travelling between shifts or for all the handover shifts that they do.

Appropriate pay and better working conditions are badly needed to help us to recruit social care staff and retain people with experience. Good pay progression and training opportunities for people who work in more senior roles are essential. Roles in social care should be seen as positions to aspire to. Carers should have more opportunities to specialise in particular forms of care and to work collaboratively with other health and social care professionals.

Carers and third sector organisations have told me that they are not adequately represented on integration joint boards. More joint planning is needed across the sector to ensure greater stability. Many of us will be aware of the worrying example in Kirkcudbright where a private sector provider pulled out of providing day care services in a care home, which left service users with nowhere to turn. The provider was able to exit the contract with 90 days' notice. It is wholly inappropriate that crucial services can be pulled away like that.

The rate of nursing vacancies in our care homes is incredibly high—up to 28 per cent of posts are vacant. In the past, NHS workforce planning has not reflected the need to fill posts across the social care sector, too. I hope that the new national health and social care workforce plan will change that, because we need more stability, especially when Brexit could throw this already precarious sector into jeopardy. Immigrants make a huge contribution to our social care sector and we must protect their rights to live and work here. We cannot forget, either, the need to improve pay and conditions for all the other staff, such as the cleaners and cooks who support the social care sector, which could not function without them.

Without carers, the independence and quality of life of many is diminished, human rights are not realised and the burden on our national health service becomes even greater. Few jobs are more important. Let us make it clear that we understand that by making sure that carers and all who work in the care sector have the recognition and support that they deserve.

I move,

That the Parliament believes that there remains a vast gap between the value of care and the support or pay that carers receive; further believes that nobody should face poverty because of the care they give; supports calls for the Scottish Government to provide more practical support to young carers, greater financial support to young adult carers in education and a carers allowance for unpaid carers that is increased in value, available more widely and does not count as income when assessing benefits and care charges; believes that quality social care is essential to many people's health, dignity and control; agrees to ensure that all who work in social care, including people working with children, are paid at least a "Living Wage Plus"; considers that better conditions and career opportunities are essential to recruiting and retaining experienced staff, particularly in light of Brexit, and commits to funding high-quality social care that is ultimately free at the point of use, and paid for by local tax reform and progressive national taxation, and not by care charges.

14:54

The Cabinet Secretary for Health and Sport (Shona Robison): I am pleased to take part in a debate that raises these important issues. The Scottish Government's vision of a healthier, fairer and wealthier Scotland places at its heart a preventative, person-centred and community-led approach to improving people's lives. I am sure that members agree that all our citizens, including children and young people, deserve good-quality and efficient health and social care services. However, we are aware of the challenges. People living longer is a success story, but as the population ages, the scale and complexity of demand for health and social care support is growing. Those changes mean that it is not sustainable to deliver services in the same way as has been done in the past. Radical service

redesign, including the integration of health and social care, is required to meet the challenges.

It is not just the ageing population that presents a challenge. Some 47 per cent of unpaid carers in the most deprived areas of Scotland care for 35 hours a week or more. If carers are not appropriately supported, such high-intensity caring can lead to increased social isolation and add to pressures on both the carer's finances and their health and wellbeing. It is clear to me that we must do more towards tackling the inequalities that are experienced by carers in those areas, while supporting the whole population with their health and social care needs.

Against the background of those challenges, we are continuing to make progress in improving the fairness of the system of charging for social care. Most recently, we have provided local authorities with £5 million to enable them to exempt veterans war pension payments from social care financial assessments from 1 April this year. Our next step is to undertake a feasibility study into the extension of free personal care to those who are under 65, building on the calls for Frank's law. I, too, pay tribute to the work of Amanda Kopel and others. Alison Johnstone asked for an update, and I note that discussions are under way. Indeed, officials will meet the Scotland against the care tax campaign next week as part of a wider engagement with stakeholders as we take that work forward.

We have already raised the threshold for charging, which we estimated would result in around 15,000 people paying fewer charges or being taken out of charging completely. As Alison Johnstone said, we have also ended charging for those who are terminally ill in the last six months of life.

This is a busy week for social security. Tomorrow, the Minister for Social Security will make an announcement to the Parliament on the Scottish social security agency, but today the focus is on carers, and rightly so. We are already committed to increasing carers allowance to the same level as jobseekers allowance. Over recent months, we have heard directly from carers, including young carers, about their day-to-day challenges and their experiences of social security. Some are well supported, but others face challenges to their health and wellbeing and indeed their education.

I want to see a Scotland where all our young people, including young carers, can reach their full potential. The Government is happy to work with any social security ideas that will improve the lot of the people of Scotland. I am pleased to report that we are making good progress in our commitment, which was initiated by the Scottish Green Party, to explore the introduction of a young carers

allowance for young people with significant caring responsibilities. Officials across Government have engaged with a wide range of representative organisations to identify gaps and opportunities in the current support landscape for young carers.

As the Parliament will be aware, the Carers (Scotland) Act 2016, which will come into force next April, establishes new duties to provide support and information to adult carers and young carers. New adult carer support plans and young carer statements will capture the support needs of carers, helping them to realise their personal outcomes, ensuring that they can continue to care if they so wish and helping to improve their own health and wellbeing. That will depend on meaningful conversations with carers of all ages. It is our ambition that children and young people be better supported to help to realise their own aspirations, including in work or education.

The 2016 act sits not in isolation but within the wider health and social care landscape. The new integrated health and social care partnerships are responsible for managing more than £8 billion of resources that NHS boards and local authorities previously managed separately. The planning, designing and commissioning of services in a more integrated way from a single budget allows partnerships to take a more joined-up approach, enabling resources to be shifted, based on local priorities, to target preventative activity.

In the coming year, almost £0.5 billion of additional investment in social care and integration will be transferred from the NHS. We will continue to shift the balance of care by increasing the share of the NHS budget that is dedicated to primary, community and social care in every year of the current session of Parliament.

Within the resource that the Cabinet Secretary for Finance and the Constitution has announced for 2017-18, we have made available £100 million to support sustainability in the care sector and the continued delivery of the living wage. That continued investment enables the real living wage, as set by the independent Living Wage Foundation, to be paid on a full-year basis and at the new rate of £8.45 an hour from next week, and it will give up to 40,000 people a well-deserved pay rise. Those people, who are mainly women, do some of the most valuable work in Scotland.

As announced last month, we will provide local authorities with additional funding to extend payment of the living wage to all childcare staff who deliver the funded early learning and childcare entitlement from the full roll-out of 1,140 hours in 2020. Up to 8,000 staff in the private and third sectors will benefit from that uplift.

That helps us to continue our work in raising the status and image of social care as a profession

and to help attract and retain the right people, which are central to our vision for social services in Scotland. We all agree that that is of vital importance, particularly in the context of the challenges posed by the prospect of Brexit. We know that if Scotland loses access to the single market due to Brexit—and, with it, freedom of movement—that could pose a serious recruitment challenge for social care.

Miles Briggs (Lothian) (Con): Will the cabinet secretary confirm whether housekeeping staff will also be paid the living wage?

Shona Robison: The focus has been on workers who deliver social care. It has been a very unusual step to have a Government putting public money into what are, in essence, private sector organisations. That does not happen for any other sector. Tens of millions of pounds have gone into private sector organisations to help them to deliver the living wage. As Miles Briggs will appreciate, that has focused on those who deliver social care to service users. It is, of course, for employers to address, as part of their business delivery, any consequential effects on the terms and conditions of their other staff. However, it is quite right that our focus has been on social care staff. Given that support has come from public money, we need to make sure that it delivers as much social care recruitment and retention as possible.

As part of our efforts to raise the status of social care, we are making important progress towards social care being a regulated profession. To maintain their registration, staff must continually update their skills and knowledge. That approach will continue to improve the delivery of social services and protect service users through ensuring a competent, confident and skilled workforce.

I do not have time to address the issue of sleepovers, so Aileen Campbell will do so in her closing remarks. I thank Alison Johnstone for moving the motion.

I move amendment S5M-05312.2, to leave out from “agrees” to end and insert:

“welcomes that work to explore the extension of free personal care to people under 65 who would benefit from it is under way; notes recent investments to make care charges fairer and calls on all local authorities to ensure that they are as flexible as possible in the withdrawal of charges; believes that all local authorities should ensure that all staff providing social care are paid at least the real Living Wage, as set by the independent Living Wage Foundation, with a view to providing better conditions and structures for career development to help recruit and retain staff, and further believes that, if Scotland loses access to the single market due to Brexit, and with it freedom of movement, that this will pose a serious recruitment challenge for social care.”

15:02

Annie Wells (Glasgow) (Con): I am pleased to speak in the debate today and to show my gratitude to the hundreds of thousands of social work staff members and unpaid carers who work tirelessly to support children and adults in need or at risk in Scotland.

Social care, which is an umbrella term for social work, personal care, protection or social support services for those who are in need or at risk—whether that arises from illness, disability, old age or poverty—has changed for the better over the past 50 years. As I am sure we will all agree today, health, dignity and control should always be at the centre of social care policy. We are moving in the right direction, despite fundamental concerns on which my colleagues and I will expand later.

Beginning with the wholesale transformation of social care for those with learning disabilities, support has shifted away from institutionalisation towards promoting independence in community-based settings. That move is still under way for mental health patients, and I welcome the progress that is being made to support people away from hospital and in truly person-centred surroundings.

The benefits of the process are unquestionable, and we hope that they will be extended even further through self-directed support, the legislation on which aims to give people control over their own support. Since the Social Care (Self-Directed Support) (Scotland) Act 2013, which came into force three years ago—obliging local authorities to offer people who are eligible for social care a range of choices over how they receive their support—people are assessed and a budget is awarded to meet their support needs. Service users have four options: to take a direct payment, which is a cash payment for them to purchase support directly; to choose a provider, but to have the council hold the budget; to have the council arrange their support in full; or a mixture of the previous three options.

As I said, the benefits of person-centred care are dramatic. I recently had the chance to speak to someone who worked for a social care provider and who was able to recite accounts that reinforced that opinion. One gentleman, who moved to supported living from hospital, would always leave his lights on—not because he was incapable of switching them off, but because, for most of his life, he had lived in hospital, where nurses switched the lights on and off for him.

In another case, a woman loathed showering, due to a hospital ritual whereby she had been forced to shower every morning straight after waking up from horrific nightmares. The freedom

that her move out of hospital gave her to choose when she wanted to shower—and a more soothing ritual of coffee and a cigarette afterwards, to help her to calm down—enabled her to overcome her fear.

Both people were mental health patients who had lost all sense of independence and control during a long period of hospitalisation, and whose lives were dramatically improved when they were offered choices and dedicated, personalised support.

Despite such positive steps, there are concerns, which many members share. There are grave issues with recruitment and retention—my colleague Donald Cameron will talk about that in more detail. There are fundamental issues to do with staff numbers and working conditions. We have an ageing social care workforce and an ever-increasing workload, and we need to provide the conditions and career opportunities in the sector that will support people.

Patrick Harvie (Glasgow) (Green): The member recognises the importance of social care work, as well as the challenges of recruitment and retention. Why, then, does the Tory amendment delete any reference either to the Green proposition for a living wage plus or to the real living wage itself? Why is a decent wage not a reasonable recompense for this important work?

The Deputy Presiding Officer (Christine Grahame): I should say that there is time in hand for all members who want to make interventions in the debate. We can be quite generous.

Annie Wells: I think that we all agree that the living wage is a good thing, but there are problems with its implementation. Providers are struggling to cover the increased costs and it does not yet seem to have had an impact on recruitment. There are still major issues with recruitment and retention.

We need to consider how best to improve, for example, free personal care provision—something on which my colleague Miles Briggs has campaigned tirelessly. We must also support Frank's law, which would extend free personal care to dementia patients under the age of 65.

Age Scotland reported this week that every year more than 8,500 elderly people are missing out on free personal care, because of delays to assessments and care arrangements. Alison Johnstone mentioned that.

It is important to consider what underpins all those concerns. In a report last year, Audit Scotland described the current model of care as "unsustainable". As a result of demographic change, the increasingly complex demands for care and support and policy commitments such as

the living wage, it is estimated that the annual bill in Scotland will reach more than £3 billion and that spending will need to increase by 21 per cent by 2020 unless new models of care are brought in.

That is a monumental issue, and we need to have serious discussions now on how best to develop new models of care that are fit for the future. Furthermore, although the integration of health and social care is certainly a step in the right direction, we need to do our utmost to ensure that communication channels are adequate in the formally integrated system. Although a proper assessment has not yet taken place, professionals are telling us that there are issues and we need to take action.

I reiterate my support for the work of social care workers and unpaid carers, who support hundreds of thousands of people in need across Scotland. Health, dignity and the ability to control one's support should always be at the heart of policy, and I am pleased that Scotland has made inroads in that regard. However, underlying issues remain in relation to unpaid carers and social work staff. The Carers (Scotland) Act 2016, which comes into force next year, will further support unpaid carers, who are often underrecognised. Unpaid carers' work is vital and alleviates a huge amount of pressure on social care services, but carers need to be supported. My colleagues Graham Simpson and Brian Whittle will talk about that in more detail.

I move amendment S5M-05312.1, to leave out from " , available more widely" to end and insert:

" ; calls on the Scottish Government to take action on Frank's Law; believes that quality social care is essential to many people's health, dignity and control; considers that better conditions and career opportunities are essential to recruiting and retaining experienced staff, and, following Audit Scotland's 2015 report, Health and social care integration, which concluded that 'current approaches...will not be sustainable in the long term', commits to developing new models of care to ensure that Scotland's social care system is fit for the future."

The Deputy Presiding Officer: I call Colin Smyth. Mr Smyth, I can give you a generous six minutes—which means that you will get more than six minutes.

15:09

Colin Smyth (South Scotland) (Lab): Thank you very much indeed, Presiding Officer.

I refer members to my entry in the register of members' interests. I am a local councillor, and I was previously employed by Parkinson's UK.

It is a privilege to open this debate on carers and social care on behalf of Labour. It is a debate that we very much welcome. The provision of social care in Scotland has changed rapidly over the past few years. In its early days, this

Parliament introduced landmark legislation, for example to provide for free personal care for the over 65s, but with the introduction of self-directed support, the integration of health and social care and the introduction of legislation to support carers, the way in which social care is delivered will unquestionably change even more in the years ahead. There will be a greater level of personalisation, and the principles of pooled budgets and strategic commissioning across health and social care will become more embedded.

However, it would be wrong to think that this area of public policy is secure and cohesive—far from it. Scotland's population will change in the next 15 years, with a projected 86 per cent increase in those aged 75 years and over between 2012 and 2037, and a 151 per cent increase in the population aged 85 years and over. With that change, the balance between the tax base and the demand for services will also change. The working population will become smaller and the need for care will grow larger—all against the current backdrop of austerity. More people are living with long-term conditions such as dementia, there are greater numbers with physical health problems caused by Scotland's obesity crisis, there is a rise in the number of cancer diagnoses and more people than ever before are living with multiple conditions. Whatever else changes in the provision of health and social care over the next few years, those trends will require a significant increase in investment. Part of that investment will need to be directed towards the social care workforce to deal with the current recruitment and retention crisis that we face.

I was instrumental in ensuring that my own council became the first council in Scotland to gain living wage accreditation and I proposed that the living wage be paid to adult social care workers some years ago. Therefore, I welcome the introduction of the living wage for adult social care workers from October last year. I also welcome the commitment to extend that to childcare workers in the private and third sectors who deliver childcare on behalf of local authorities.

There is still unfinished business. Six months since the introduction of the living wage, no deal has yet been agreed for so-called sleepover shifts, so carers who provide overnight support do not receive the living wage. I therefore look forward to the minister updating Parliament on the matter when she sums up at the end of the debate.

We need to build on the living wage not only by having fair pay but by ensuring that all care staff are paid for travel costs and travel time, that no one working in social care is left on a zero-hours contract and that our social care workforce is provided with adequate training and the time to

care. Indeed, I commend Unison's ethical care charter as a template for the fair and ethical employment practices that we would all like to see.

We must ensure that for those who choose to work in social care a proper career structure is developed that connects to professional occupations such as nursing and social work. Furthermore, unpaid carers must be properly recognised as partners in the provision of support. Those carers are the unsung heroes of our country. There are in Scotland nearly 750,000 adult carers and nearly 30,000 young carers dedicating their lives to caring for others—as Alison Johnstone pointed out, they save the Scottish economy £10.8 billion a year because of their selfless care and attention.

Carers Scotland recently reported that a third of those carers are struggling to pay utility bills, 47 per cent have been in debt and half are struggling to make ends meet, cutting back on food and heating as a result. Bringing carers allowance in line with jobseekers allowance would increase a carer's income by £600 a year. The Scottish Government has had the power to deliver that increase since last September. In March, new powers to overhaul carers and disability benefits were devolved to the Scottish Parliament. Those new powers give us a chance to build a truly fairer Scotland, but we need to move past the warm words of support and on to real action. I hope that the minister, in summing up, will give those carers the certainty and respect that they deserve by telling Parliament when the Government will bring forward plans to top up the carers allowance.

As well as a better deal for those who provide care, we need one for those who receive that care. It is now 14 years since the previous Labour-led Government introduced free personal and nursing care for everyone over the age of 65. Today in Scotland, around 77,000 older people benefit from that policy. However, to use words on the Frank's law campaign website,

"no disability, illness, condition or disease waits until a person reaches the age of 65, then strikes."

Across Scotland, 90,000 people are living with dementia, but not all of them are over the age of 65. In fact, more than 3,000 are under the age of 65. As we all know, if any of those 3,000 people require personal care, they are financially assessed by their local authority to determine whether they should make a financial contribution towards that care. Where they live often determines how much they pay. It is the same for other long-term conditions, including motor neurone disease, Parkinson's, multiple sclerosis, cancer and many others. In our election manifesto, Scottish Labour made a commitment to work towards the abolition of such care charges for all

those under the age of 65—to go beyond Frank's law. I reiterate that commitment.

I began my speech by saying that health and social care will require a significant increase in investment. That means an end to cuts to local councils. Since 2011, more than £1.5 billion has been cut from council budgets by the Scottish Government. The consequence is a social care system that is already under pressure without the growing demand that we know is on its way.

Last week, Age Scotland revealed that more than 8,500 people a year in Scotland wait longer than six weeks for a care assessment. Scottish Care's survey showed that three quarters of care homes had vacancies for staff and that 90 per cent of care-at-home and housing support services had positions lying empty. Since the cabinet secretary promised to eradicate delayed discharge in May 2015, 680 people have died in hospital while waiting to be discharged.

We need to stop the cuts to local councils now—all of them, not just some of them. The Parliament can do that. We have the powers to make different choices, to be progressive and to say that, if we want decent social care, we need to fund it properly. That means being honest with the public and saying that those with the broadest shoulders will have to pay more to fund that extra social care.

I move amendment S5M-05312.3, to leave out from “believes that quality” to “control” and insert:

“calls on the Scottish Government to give carers the certainty and respect that they deserve by confirming a date when carers allowance will be increased; believes that quality social care is essential to many people's health, dignity and control, and expresses concern at the impact on social care of cuts to local government budgets”.

The Deputy Presiding Officer: We now move to the open debate. As I have said, we have time in hand.

15:16

James Dornan (Glasgow Cathcart) (SNP): There can hardly be a job that is more important than providing care for the most vulnerable members of society. The home carers workforce is among the most adaptable and committed workforces in the country. Home carers have a complex role that requires a wealth of knowledge. A home carer might be asked to work with children or those with a disability or, of course, to assist our elderly.

I recently read a carer's post on Facebook, which went viral. Facebook is an online thing that people contact one another through, Presiding Officer.

The Deputy Presiding Officer: You should not antagonise me so early in your speech: I can be vindictive.

James Dornan: I am kind of hoping that you will cut my time.

The post sums up the feeling that has been outlined in the debate. It was by a carer—Jessica Gentry—in England, but carers from throughout England, Northern Ireland, Wales and, of course, Scotland commented on how accurate it was and how it resonated with them. Jessica Gentry said that she looked for signs of a stroke and waited for an ambulance, gave out 15 lots of medication, supported relatives, made 25 cups of tea, locked 17 doors, checked food supplies, and reassured patients with dementia. The list continued. When I saw that post, which was shared by carers in my constituency and throughout Scotland, I was deeply touched by it. To be frank, I was once again in awe of the amazing work that those people commit themselves to so diligently.

If a relative of mine was in need of care, I would hope that they would receive the best care that we were able to provide. In order for us to provide a full and comprehensive care package to those who are most in need, we must support those carers who are on the front line when it comes to provision.

Recently, I had a meeting with a group of home carers in my constituency. They are a passionate and committed group of carers who are determined to do the best for those they care for, but they are also determined to ensure that they get a fair deal. That meeting prompted me to ask the Government

“what action it can take to ensure that local authorities meet their moral and legal obligations in settling equal pay claims, and what discussions it has had with Glasgow City Council regarding this.”

That extremely hard-working and committed group of carers was being treated as though they were less than equal to men. I will go on to talk about gardeners and grave-diggers who work for the council. I completely accept that they do a very difficult job, but they are graded higher than those people, who maybe do some of the most difficult, and certainly some of the most important, jobs in society.

Homecare Glasgow became an arm's-length body a number of years ago, and many of those involved in the equal pay fight claim that that was Glasgow City Council's way of excluding those carers in the fight for pay equality. If that was the case, the council has been unsuccessful, as the home carers have become an integral part of the equal pay movement and are determined to get what is rightfully theirs.

I have spoken to Mark Irvine, who is one of the leading advocates for that campaign. He told me that part of the problem is that the carers provide a “Cinderella service and ... they don’t have a traditional place of work which makes it harder for them to bring together involved parties such as outside bodies, family members and of course the client requiring care”.

As the demands on carers seem to be getting greater, it seems that authorities such as Glasgow City Council are more resistant to matching the demands with resources. Studies that campaign groups have done show that home carers are still not paid as well as those in more traditional male council roles, such as the gardeners and grave-diggers I mentioned. That is grossly unfair, and it is just not conducive to providing the best possible care for those who need it most. It is more than clear that those carers deserve the best support, pay and recognition that authorities have to offer.

I want to go back to the answer that Annie Wells gave Patrick Harvie. If you do not think that carers should be entitled to the living wage, and if attracting carers is not about pay and conditions, what do you think can be done to make the job more attractive to people? If you think that we need to attract people, as we clearly do, why did you vote against the £100 million that could have made caring more attractive for people? I am more than happy to take an intervention if you have a response to that.

The Deputy Presiding Officer: I remind the member to use the member’s name rather than “you”, for the *Official Report*.

James Dornan: Sorry. I was addressing that to Annie Wells, Conservative MSP for the Glasgow region.

The Deputy Presiding Officer: That is just a wee bit cheeky—

James Dornan: While we are discussing—

The Deputy Presiding Officer: No—sit down, Mr Dornan. You are verging on being a wee bit cheeky, and it is not going down well with me.

James Dornan: Sorry, Presiding Officer. You asked me to identify her.

While we are discussing care, it would be wrong of me not to mention home carers who are not employed by a governing body but who do it because they are a family member, friend or partner. Many people are unable to seek employment because they are committed to the care of a loved one. That is not only a vocation but a role that takes considerable strain off local authorities and organisations. Young carers in my constituency are among the most remarkable young people I have ever had the privilege of meeting. They often do a job that is beyond their years while trying to study and plan for their future.

That is why I am thrilled that the Scottish Government is looking at a young carers allowance, which is another way of ensuring that the cared for and the carer are supported in equal measure.

When I was first elected as a councillor in 2007, my first official duty was to attend an event for young carers at Glasgow south-east carers centre. Before then, I just never had a clue. Honestly, I was completely blown away by what those young people had to do, the responsibilities that were placed on them and the way that they stood up to the challenges and took them on their shoulders while at the same time looking to better their lives. I am therefore really pleased that the Scottish Government is doing all that it can to ensure that those young people benefit and can go on to complete their education and, we hope, do whatever they want to do with their lives.

As has been mentioned, the Government has committed to taking carers allowance up to the level of jobseekers allowance, which will mean that carers will receive an extra £600 a year, which is an 18 per cent rise. The Tory cuts to disability benefits have had a catastrophic effect on many of those in Scotland who should be most looked after and protected by the system. In order for the Scottish Government to do that properly, it has to continue with appropriate consultation. I look forward to seeing legislation on the measure being passed following the proper parliamentary procedure.

I have to take Colin Smyth up on his point about that. The Opposition knows fine well that the Scottish Government has to do that in consultation with the Department for Work and Pensions. The Opposition knows that the Government is already in that process and that, until there is agreement with the DWP for that to be rolled out, it is very difficult to do it. The Opposition cannot ask for a date when we are in the process of trying to get the procedures in place.

Earlier this year, I saw a dig at the Scottish Government in the *Evening Times* by one of Mr Smyth’s colleagues, who seemed keen to criticise the Government, which is committed to getting it right when it comes to the new powers. However, I agree with Mr Sarwar when he said:

“Carers are the unsung heroes of our country. Thousands of people dedicate their lives to caring for others and save the government, particularly our NHS and social care system, billions of pounds because of their selfless care and attention.”

I should probably challenge Mr Sarwar on that. If he feels so strongly about carers, what about the carers who are paid by Glasgow City Council and who are being treated with what seems to me like complete and utter contempt in their fight for equal pay? When we stand up for carers, we must stand

up for all of them, because no one role is worth more than another. That applies to those in private sector and third sector organisations, kinship carers and many more who are ensuring not only that the most vulnerable in our community are looked but that they continue to play a worthy and functioning part in that fairer Scotland that we all seek.

15:24

Graham Simpson (Central Scotland) (Con): I thank the Greens for bringing the issue to Parliament, because it is important that we discuss social care and carers. It is an issue that affects people directly and which will continue to impact on them when the Carers (Scotland) Act 2016 comes into force next year.

One in six of Scotland's population is an unpaid carer. There are 759,000 adult carers and 29,000 young carers. In 20 years' time there could be 1 million carers in Scotland. Those are extraordinary statistics.

Carers do what they do not for money but for love. There might be many of us in the chamber who are carers, or who become carers, know a carer or need a carer at some point in our lives. It is important that the selfless people who look after others are given the rights and entitlements that flow from the act, such as the right to support if they qualify for it.

It is vital that sufficient resources are available to implement the new duties fully. The problem is that we do not know with any degree of certainty what that will cost. What we can be certain of is that the majority of costs—94 per cent—will fall on councils, which, as most of us know, have seen year-on-year cuts in their budget from the Scottish Government.

I will first talk about the broad financial scenario around social care before I come back to carers themselves. Audit Scotland said last year that current approaches to delivering social work services will not be sustainable in the long term. There is a clear risk that reducing costs further could affect the quality of services. It is pretty obvious that if the SNP squeeze on councils continues, some could simply change the rules on eligibility to make sure that fewer carers qualify for help. A well-meaning act of this Parliament could end up causing a worse situation.

The Minister for Public Health and Sport (Aileen Campbell): The member is articulating a case that services require more investment. This Government has given local government a fair settlement. What is the member's view of the fact that the Government has to spend £100 million mitigating the worst impacts of the welfare reforms

that his party at Westminster has put on to Scotland?

Graham Simpson: The impact on councils comes from the money that this Government gives them, which has been cut year on year—that affects carers.

The number of adults in need of care is expected to increase by 30 per cent in under 10 years. That could place an intolerable strain on carers, with many simply giving up. Given that social care is already struggling to cope with the £1.1 billion of cuts made between 2010 and 2015, councils will find it increasingly difficult to find adequate resources to support carers and their families.

Funding for social care is in crisis and the Scottish Government has to do something about it.

Stuart McMillan (Greenock and Inverclyde) (SNP): Will the member take an intervention?

Graham Simpson: Not just now.

There are huge challenges. Audit Scotland said:

"Social work departments are facing significant challenges because of a combination of financial pressures caused by a real-terms reduction in overall council spending, demographic change, and the cost of implementing new legislation and policies. If councils and IJBs continue to provide services in the same way, we have estimated that these changes require councils' social work spending to increase by between £510 million and £667 million by 2020."

Shona Robison: The member has said on three occasions that he thinks that local government should get more money. Will he say how much more money and where that money has to come from?

Graham Simpson: The cabinet secretary knows that that is a matter of choice. The SNP Government—her Government—has taken the choice year on year to cut councils' budgets. That is a choice—the SNP Government has chosen to penalise councils across the country.

I turn to carers. There is a financial impact on people if they become a carer. One third of carers are struggling to pay utility bills, 47 per cent have been in debt and half are struggling to make ends meet. They cut back on essentials such as food and heating. The main carers benefit is worth just £62.10 for a minimum of 35 hours a week, yet carers' value to us all is huge. In 2015, a Carers UK report estimated that the value of carers' contributions in Scotland was £10.8 billion.

In the Scottish Conservative 2016 manifesto we called for carers allowance to be aligned with jobseekers allowance, benefiting 60,000 more people. Carers Scotland agrees with that, and I thank it for its useful briefing ahead of the debate.

Many carers find that their career and promotion opportunities are affected, and that they have to reduce their hours or give up work altogether. Carers who have given up work to care also find it difficult to return to the workplace. Almost a third have been out of the workplace for 10 years or more. A quarter of the carers not currently in work say they would like to return to work, and almost two thirds would like to return when their caring role has ended.

Carers care, and we should care for them. They deserve a break now and then. Providing short break opportunities for carers and those they care for is vital, but the availability and choice of short breaks for carers across Scotland vary considerably. There is growing evidence of significant cuts to existing levels of service provision.

I close by quoting from a briefing sent in by Marie Curie that sums it up:

“Caring for those with long-term illness and coming to the end of life can be all-encompassing. Carers face increasing demands and challenges on their time as the condition of the person they care for deteriorates. Many carers of people with a terminal illness do not see themselves as carers but simply as people looking after loved ones.”

Carers deserve our full support.

15:31

Kate Forbes (Skye, Lochaber and Badenoch) (SNP): A person who was far better and wiser than I am said:

“The true measure of any society can be found in how it treats its most vulnerable members.”

In today’s debate, I want to push that further and say that how we support those who care for our most vulnerable people, and who give so much of their time, energy and care to those who need it most, demonstrates how much we value our most vulnerable people. For too long, carers have been undersupported, undervalued and underpaid, which is an indictment of how we have cared for those who care, both paid and unpaid.

My two sisters work as carers and I am absolutely in awe of their hard work. Last summer, after I was first elected, I was asked by a friend how busy I was, as I stood next to my sister, who had been doing 12-hour shifts of backbreaking, emotionally intensive and pressured work. I thought, “Ask her! She’s the hero here.” Then last Sunday, as I was getting ready to go to my nice warm bed, my other sister was travelling across Edinburgh at 10 pm to do a sleepover, which probably had very little to do with sleep. I think that my sisters are pretty incredible, but I respect them even more for the work that they do for the sake of others. It is not easy, but it is of enormous value. My sisters, and

all other carers in Scotland—paid and unpaid—are absolutely brilliant.

I am sure that our rhetoric is caring and supportive, but our actions are what really count. That is why it is not only unfair that support, in the form of carers allowance, is the lowest of all working-age benefits; it also demonstrates that our actions have fallen seriously short of caring for carers. I am really pleased that we will, when our Government gets the power to do so, increase carers allowance. I am also pleased that the Scottish Government will allocate an additional £100 million for continuing delivery of the living wage to adult care workers for sustainability in the sector. I hope that that attracts more people into the vital role of caring, and that it sends a message to current carers that they are greatly valued and we could not do without them. I also hope that it raises the status and the image of social care as a profession further.

Lack of carers is certainly a challenge in the Highlands, as we have seen recently in the news, when the Haven care home in Uig announced that it is closing because of difficulty in finding carers. That is a challenge for other residential care homes, especially in the Highlands and the smaller rural places, where there being fewer beds makes it harder to make ends meet. The challenge is then for the elderly people who may have to move quite a distance away from home or, perhaps, away from a partner who might not be able to travel to visit them. Our attracting and retaining the right people in the right places goes right to the heart of treating people with dignity, respect and fairness when they need care, wherever they live.

Delivery of community-based services through integration of healthcare and social care means that rural residents can get the care and support that they need, and can stay in their homes for longer. That takes on greater importance in the rural Highlands because there are other challenges for the people who care in the community—not the least of which is their having to travel many miles in a day. Support for carers should therefore recognise the added pressures of working in rural areas, if we are to recruit enough carers to care for the people who need care in the Highlands.

Each carer is unique and meets the unique needs of the people for whom they care. Almost one in five of Scotland’s adult population is a carer, and there are, according to Carers Scotland, almost 30,000 young carers under the age of 16—4 per cent of the under-16 population. Those figures do not include the hidden carers who have not been identified and are not being supported by services.

The caring role of unpaid carers is usually an extension of their love for family, friends and neighbours. However, they still experience the sleepless nights, the heavy physical work, the potential for loneliness and isolation, and the unlikelihood of a break or a holiday. On top of that, they perhaps also have a full-time job or are in full-time studies, and perhaps struggle to pay utility or food bills.

For young carers, there are real challenges in continuing with education in school, college or university, so it is important that we do everything that we can to support those young people so that they do not lose out because of the demands of their caring role. That is why the Scottish Government funded the College Development Network to design and deliver an online resource for learners who have caring responsibilities. Although we do not collect annual data on the number of young carers who are in part-time study, an action planning tool is available to help colleges to improve identification of and to meet the needs of student carers, so that we can support them as much as possible.

With the devolution of more social security powers, it is important that we not only consider the people who receive care, but think about how we support the people who deliver that care. I am proud to be part of a Parliament, and to support a Government, that puts dignity, respect and fairness at the very heart of how we care for those who need care, and of how we care for those who deliver care.

15:37

Mark Ruskell (Mid Scotland and Fife) (Green): I declare an interest in that I am a councillor. This is probably the final time that I will declare that interest. I also declare my financial contribution of the final year of my council salary that I made to Stirling Carers Centre, which is a wonderful organisation that supports young people who cope with the most unimaginable level of responsibility in their lives.

Alison Johnstone told us earlier that unpaid carers save the Scottish economy £10.8 billion every year. Carers allowance is a small recognition of the value of unpaid care work, but it is paid at far too low a rate and is subject to a set of hugely complex rules. Under carers allowance, caring for no less than 35 hours a week equates to £1.70 an hour at current rates. That drops to just pennies for carers who provide 24/7 care. No wonder many carers describe feeling insulted by the level of carers allowance that they receive.

I very much welcome the Scottish Government's plans to increase the value of the benefit to match jobseekers allowance, at £73. However, JSA is

intended to be a short-term payment, and about 90 per cent of claimants claim for only a matter of months. Recipients of carers allowance tend to claim for many years, and incur a range of additional costs in the course of caring. Carers allowance, which is formally intended only to replace income that is lost through the carer not being able to work, does not reflect that.

For these reasons, the Green Party's Holyrood manifesto pledged to increase carers allowance by 50 per cent, to £93. I encourage the Scottish Government to consider a two-part benefit, as is advocated by Carers Scotland among others, which would replace lost income and cover additional costs, with a premium being available for people who care for more than one person.

However, that is not the only change that is needed. Carers allowance is riddled with complexities and unfairness. For example, if a person is paid carers allowance, the person whom they care for loses their severe disability premium in their applicable amount for means-tested benefits. That means that it may not always be financially worth the carer's while to claim, which partly explains the low take-up. It would help enormously to ensure that the Scottish carers allowance does not count as income when benefits and care charges are being assessed.

I turn to the important role of the waged care sector and the contribution that dedicated workers make to the daily care of tens of thousands of people across Scotland. A few short years ago, we saw much criticism of the state of homecare services across the UK, but there was little, if any, consideration of the experiences of the people who work in the sector. In order to understand those experiences better, Unison launched a major survey of care workers and published a report entitled "Time to Care". The report revealed the shocking state of the sector, with poor pay and working conditions driving down the morale of a dedicated but downtrodden workforce.

Four out of five workers experienced what is called call cramming, whereby appointments are stacked with not enough time to meet clients' needs, or even to factor in travel from one appointment to the next. The frustration and shame of workers who were being forced to leave clients before their needs had been met was leading many carers selflessly to support clients in their own unpaid time.

The survey found that over half of workers were not paid for time between visits, which was potentially breaching minimum wage laws. More than half of workers were paid between the basic minimum wage and only £8 an hour. Many workers saw the impacts on their clients as they were switched from one worker to another, which

caused distress, particularly among clients with dementia.

Added to those problems were a lack of formal routes through which to report clients' concerns, little training on specific medical conditions and lack of contact time with fellow co-workers, so it is understandable that recruitment and retention was a major problem. For many people, a job in the supermarket was better paid, with better terms and conditions.

On the back of "Time to Care", Unison launched the ethical care charter for councils to sign up to. It set a new minimum baseline for the safety, quality and dignity of care. It acknowledged that to deliver better services we need more sustainable pay, conditions and training for workers. The Scottish Government has moved on the living wage element of that by ensuring that since last year a budget has been delivered to pay adult social care workers the Scottish living wage. However, there are still questions about whether people who work in child social care are getting the living wage. I hear repeatedly, around the doors, anecdotal evidence that some care workers are not receiving the living wage, and I have been hearing concerns about the lack of contract monitoring of some councils. I would like the minister to address those points directly.

The ethical care charter needs to be implemented in full by every council in Scotland, so I congratulate North Ayrshire, North Lanarkshire and Renfrewshire councils, which have signed up to do that. I pushed the charter hard in my council in Stirling, and although it has stopped short of signing up in full, it is 95 per cent of the way there. The remaining legacy contracts will be addressed in the months ahead.

Putting the needs of clients first in how services are timed and delivered, while supporting the training and support of care workers, matters. Applying a decent living wage of £9.20 an hour, ensuring sick pay and ending zero-hours contracts and unpaid travel time will build a workforce that is respected and valued for the incredible work that it does. Our carers, waged and unwaged, are unsung heroes. They deserve the support of us all in Parliament and in council chambers across Scotland.

15:43

Donald Cameron (Highlands and Islands) (Con): This has been an extremely interesting debate on a significant and important matter, so I am delighted to contribute to it. I join other members in paying tribute to those who work in the social care sector and those who care for loved ones, often unpaid and thanklessly, because of their love for and commitment to the person for

whom they care. It is right that we dedicate a parliamentary debate to carers and the role that they play, so I commend the Scottish Green Party for doing so. Although our amendment takes a different tack to the Green Party motion, there is much on which we can agree.

This type of debate may be technical at times, but our actions always affect a real person—a care worker, a young person caring for a parent or a parent caring for a vulnerable child.

This week is multiple sclerosis awareness week, and carers play a huge role in caring for people with MS. I draw attention to George Adam's members' business debate, which will follow decision time. I look forward to participating in it, and I hope that many other members also participate.

I will focus on social care, and I will cover an area that has for some time come under close scrutiny: retention and recruitment of staff. The subject is pertinent across Scotland, but because I represent a particularly rural area I am acutely aware of issues around the need to find car drivers for carers, issues about travel to and from appointments during working hours, sleepovers, and the pressure around keeping remote and rural care homes open. Kate Forbes mentioned one such care home; I must mention Auchinlee care home in Campbeltown and Struan lodge care home in Dunoon—I recently visited and met staff there.

On staffing, this month *The Herald* ran a story focusing on research that was carried out by the voice of the independent care sector, Scottish Care, which found that more than three quarters of care homes have unfilled staff vacancies and that nine in 10 care-at-home service providers say that they have difficulty in filling positions. That should not come as a surprise—members of the Health and Sport Committee heard evidence last September from representatives of the care sector and carers. I will touch on a few of the issues that were raised at that meeting, because I believe that it is vital that we take on board the opinions of those who work in the care sector and those who represent the workforce.

Donald Macaskill, who is the chief executive of Scottish Care, spoke about the difficulty in recruiting new staff due to the fact that

"many individuals do not find working with people in care attractive. Society—and Scotland as a whole—does not value those who work in caring for old people".—[*Official Report, Health and Sport Committee*, 13 September 2016; c 4.]

Scottish Care has also highlighted the shortage of nurses in care homes and the vacancy rates. Given the large proportion of care that is provided

by the independent care sector on behalf of local authorities, that is highly concerning.

Annie Gunner Logan from the Coalition of Care and Support Providers in Scotland argued that how care is currently delivered in Scotland is not sustainable. She was critical of workforce planning and how care is procured by care providers. In her evidence, she said that it has become very difficult for care providers to plan ahead on the basis of existing framework contracts, which, as she stated,

“means that they have no sense of ... the number of people they might have to support in future or the number of hours of support that they might have to provide.”

It is clear from that evidence that working in care is often seen as unattractive. Given the issues that that raises for the workforce and care providers, we have a system that is in many ways unworkable and unmanageable.

An interesting point that others have made this afternoon, and to which Annie Gunner Logan referred, is the startling and worrying claim that

“it would not be ... much longer before every single school leaver would have to go into the care sector if it was to be kept afloat.”—[*Official Report, Health and Sport Committee*, 13 September 2016; c 4, 5.]

Similarly, evidence that was presented to the Health and Sport Committee last September suggested that 60,000 new social care workers are required in order to meet the demands of the ageing population. That is a particularly stark point. It is also true to say that the staffing issue cuts across both the independent and the public care sectors.

On staff morale, a survey that was carried out by the Institute for Research and Innovation in Social Services showed that the workforce in Scotland is not only increasingly ageing but is increasingly overburdened. In the survey, 62 per cent of carers said that they had to do additional work most weeks, and almost nine in 10 said that they had seen a reduction in the amount of support that was available to service users. As other members from across the chamber have pointed out, in layman's terms that means that the people on the ground have less time to do what they do best, which is to care for some of the most vulnerable people in our society. As one carer put it in the survey,

“Staff are pushed more and more and more”.

Carers Scotland noted that 80 per cent of carers feel that their personal health is worse because of their job.

Given that the current average rate of staff turnover sits at 22 per cent, it is clear that there is a major problem that requires solutions. I have been in Parliament for almost a year now, and a

large part of my debating time has been spent highlighting the staffing crisis across the NHS and the social care sector. Recruitment and retention have been highlighted time and again by professional bodies and in the Health and Sport Committee, and the Scottish Government urgently needs to put in place a plan to deal with the issues.

It is clear that we need to make caring a more attractive career option, and that we need to break down the barriers that stop people from entering the profession. We need now more than ever to listen to the professionals in order to learn why the problems persist and are, increasingly, being exacerbated.

Above all, we have an opportunity in this Parliament to set social care on the right footing so that it can operate to the benefit of staff and, most important, of the people for whom they care.

15:49

Bob Doris (Glasgow Maryhill and Springburn) (SNP): The motion that is before us and the Scottish Government amendment mention Brexit. The Local Government and Communities Committee, which I convene, has heard serious concerns about the potential impact of Brexit on carers and social care. We conducted a number of evidence sessions in which we heard from various organisations, including the Convention of Scottish Local Authorities and the Scottish Trades Union Congress. We heard that it can be difficult to recruit and retain staff in social care and to have staff view social care as a first-choice career that is of significant value to society.

Carers in the social care sector are worth their weight in gold, but they are not always paid their weight in gold—that is for sure, and we have heard concerns about that today. That is why the move towards the real living wage, which is underpinned by £125 million of funding, is a significant step forward by the Scottish Government. It is wonderful that there are aspirations to go further, but let us acknowledge the fantastic success that the Scottish Government has achieved.

In that context, we view Brexit with associated concerns about the end of the freedom of movement of people, particularly because of its impact on key sectors such as social care. In her evidence, Helen Martin of the STUC said:

“In local government, one of the key areas that are at risk is social care, in which many foreign nationals work. It is, potentially, at particular risk of not being able to fill roles if we do not have access to EU labour.”

The Conservatives have spoken about the staff crisis in social care, yet they will stymie access to one of our biggest sources of quality labour that is

required to meet the needs of older people. That is a ridiculous dichotomy that the Conservatives cannot explain.

The head of COSLA, Councillor David O'Neill, said:

"Within our health service, the number of people who come from outwith the UK is critical. An awful lot of childcare workers and other care workers are from outwith the UK. If such people lose the ability to come to Scotland, it will be a really big problem for us".—[*Official Report, Local Government and Communities Committee*, 14 December 2016; c 32, 31.]

It is not me as a Government back bencher who is saying that on behalf of the Government; it is COSLA and the STUC that are saying that. It is also the Conservatives that are saying that, but they are causing the problem with Brexit.

I will say a bit about my family's care experience, which I know from my constituency casework is not uncommon. Older citizens often live in a household of two carers, as people in couples support and care for each other. Partners who are both in frail health provide care for each other; a co-dependency model is the case in many a household.

My mother was elderly and frail and had vascular dementia. Although my father was younger, he had various health conditions over many years, as well as long-term mobility issues. My mother lived the last year of her life in a care home. My father was still at home until he eventually went into a hospice and passed away from lung cancer six months later.

Hindsight is a wonderful thing for all of us. Although, to be fair, West Dunbartonshire Council provided a high level of at-home support, I suspect that my mother would have benefited from a residential support placement far earlier than she got it—and that applies to my father, too. I am not sure what models of residential support exist in such circumstances. The model of residential support needs to be advanced.

Why would we not consider identifying a joint care home placement for a couple who are hurtling towards an obvious need for residential care? Why would we compound bereavement in a family by tearing one lifelong partner away from the other in order to put one of them in residential care? When the second partner needs residential care, the opportunity of having a co-located care placement is almost non-existent, and the two people must live in different care homes.

That was not the situation in my mother and father's case, but I know that it occurs, because I have such a constituency case at the moment. I have not asked the person involved whether I can share the full details, so I will say merely that I have a constituency case in which it looks as if

that might become the situation. I am not criticising the local authority or the integration joint board. I am not sure whether models are available to work that one out, but we have to do that as an imperative going forward, with an ever-ageing population.

It is a good thing that we have an ever-ageing population but, when people are living to be older and more frail, why do we separate them from lifelong partners? That is the wrong thing to do. We must build models of residential support that can address that. I hope that, at some point, the Scottish Government can do that.

I will say a little about health and social care integration and restate some of the housing issues that I raised in the debate last week that was led by Neil Findlay, as convener of the Health and Sport Committee. Those issues link into the care tax, personal care that is free at the point of need, and the increasing and advancing of free personal care.

I have a couple of constituency cases in which the only way to keep the people concerned—who own their house but are on a low income—at home would be to build an extension. We must put in financial models that can make that happen. As I said last week, I understand the issue that there is equity in such houses. Models need to be available that can sustain such people at home while protecting the public purse.

I have another constituent who owns their flat and desperately needs ground-level accommodation. We must make sure that health and social care services and the housing association in question—I hope that it will buy back the flat—work seamlessly to ensure not only that my vulnerable constituent is protected but that the public purse is protected and the arrangement is sustainable.

I am trying to be consensual by suggesting ways in which we could develop the system. I genuinely feel that we have not had such suggestions from Labour or Conservative members, who have talked about council cuts.

I will make a point in relation to alleged council cuts. The leader of Glasgow City Council, Councillor Frank McAveety, talks about cuts in that local authority area, but he never includes the additional moneys for health and social care integration. In evidence to the Local Government and Communities Committee as part of the budget process, he said:

"£33 million was the element of IJB resource allocation that was made to the council. Half of that had to meet the living wage obligations"—

that is a good thing; those are my words, but I am sure that Mr McAveety thinks that it is a good thing, too—

"the other half was for pressures in social work services."—
[*Official Report, Local Government and Communities Committee*, 9 November 2016; c 5.]

In Labour's figures, that £33 million does not count, but the leader of the largest council in Scotland told our committee that that money is making a difference.

As for the Conservatives, who relentlessly cut resources to Scotland, shame on them for calling for more money for local social services when they will not say where a penny of it would come from.

In my speech, I have sought to challenge my party's Government on areas in which the system must be improved. In doing so, I have sought to be consensual, and I hope that other members will continue in the same vein.

15:57

Alex Cole-Hamilton (Edinburgh Western) (LD): I thank the Scottish Green Party for lodging such an important motion for debate, and I assure it of our support. I also declare an interest in respect of the fact that, before I entered Parliament, I worked for the children's charity Aberlour, which provides a range of support services to children with disabilities and their families.

I share the sentiments of every member who has spoken in the debate of their belief that carers in Scotland are without question the unsung heroes of our nation. We rely on them to fill the gap that we cannot meet in the delivery of health and personal care services to the tune of somewhere north of £11 billion a year. We rely on them to respond with flexibility and speed to the needs of the people they care for when the situation deteriorates, and we rely on them to accept the monumental disruption that late-night emergencies, protracted hospital stays and red tape in the welfare system can all cause in their daily lives.

Every week, I seek to help constituents who are working their hearts out to provide care for the children they love, which they seem to do in near isolation. I am talking about people such as Khalida Hussein, who was relieved to finally get a diagnosis for her severely autistic son a year ago, only to discover that that meant joining an even longer waiting list for assessment and resource allocation, which she is yet to receive; Elspeth Martin, who is keen to use her own resources to provide an additional support worker for her son to support his learning in school, but who has been told that she cannot because of a council policy that does not even exist; and Caroline Muir, whose teenage son has ricocheted from school to school following exclusion after exclusion as a result of challenging behaviour that is linked to Asperger's,

to the point that I have helped her to submit a section 70 complaint to the Scottish ministers, so badly has she been let down. I add that each of those constituents has given me their express permission to name them.

Our knowledge that such people will not turn away from loved ones, even though they often exist on the edge of poverty, isolation and sometimes even surrender, amounts to a kind of exploitation, whereby we as policy makers in this place, by not fully meeting the calls of carers and organisations, are complicit.

We answered some of those calls in the Carers (Scotland) Act 2016 in the previous parliamentary session, but we have still a great distance to travel, particularly on access to meaningful respite. It is a failure that is most stark when we consider Scotland's young carers. We estimate that there are 29,000 young carers under the age of 16 in Scotland. I say "estimate" because identification is a problem—many young people who care for either a parent or a sibling may not realise that the duties that they carry out at home are not normal, or that they are deserving of greater support. Many soldier on in the shadows, and we identify them through chance encounters through teachers, general practitioners or social workers. We need to train our workforce better to close that gap and identify young carers sooner, and equip them with the tools to answer the needs of those vulnerable young people.

We put far too little value on the service that is provided by the 750,000 friends, family members and neighbours who, on any given day in Scotland, provide a caring role. We seldom offer them thanks and, more often than not, when the needs and the demands of their role increase, we meet that change in circumstance with indifferent expectation. Those people deserve to be treated with dignity and to have adequate recognition for the grace, compassion and dedication that they show in the service that they provide. I ask the minister in her closing remarks to act on the sentiment of the Labour Party amendment, make good on the SNP manifesto commitment and name the date on which this Parliament will use its new powers to increase the level of carers allowance. The minister has the votes of the majority of members—we lack only the opportunity to cast them.

Sandra White (Glasgow Kelvin) (SNP): Alex Cole-Hamilton mentioned the increase in carers allowance. I will mention that in my contribution later, but the reason why it has not been introduced now is that we have to work with Westminster at the moment. We cannot just introduce it straight away. We all want to introduce it but, speaking as convener of the Social Security

Committee, I know that we cannot do that just now.

Alex Cole-Hamilton: I absolutely recognise the role that Westminster has in the delay. However, I would like to see a clearer understanding of the timetable that the Scottish Government favours for introducing the increase.

How much we value care in our society is discernible from the criminally low levels of pay that are offered to our professional care workforce, which in turn is linked to resource allocation to families who commission care either directly or through the local authorities. Although local authorities cite a balance in favour of quality over cost when it comes to commissioning, there are examples up and down the land of providers paring back cost to the bare minimum to meet their contractual obligations, incorporating travel time into the hourly rate—a particular problem in rural areas—and paying staff poverty wages while taking a mark-up skim from the advertised rate.

On a number of occasions, my fellow members of the Health and Sport Committee have met members of the workforce who cite the compassion that they have for those for whom they care as the only reason why they do not jack the whole thing in and stack shelves in a supermarket for the same money. No wonder the market is so barren; caring should be a career of the highest esteem, enriching both in the interpersonal warmth that passes between caregiver and receiver and in the financial recompense that caregivers receive for that role. We want primary school children to fantasise about growing up to be a caregiver and we want foreign workers to see Scotland as a country of choice to relocate and enter the profession. We need a culture shift at every level of government in Scotland to make that happen, and it is only the lack of political will to do so that stands in our way.

I was asked this morning on “Good Morning Scotland” how we would pay for that approach. The answer is blindingly simple: when my constituent stays an extra 150 nights in Liberton hospital because there is not a social care package available for him to go home to, the cost of that failure is self-evident and that blockage in social care capacity then impacts on every other level of our health service.

John Mason (Glasgow Shettleston) (SNP): Will the member give way?

Alex Cole-Hamilton: I am in my final minute.

Put simply, we cannot afford not to.

I would like to finish with a personal tribute to the carers in our society—to those known personally and related to me and to those grafting away in homes up and down this country. They

are the backbone of health and social care in our society and they are the pride of our nation.

16:04

Stuart McMillan (Greenock and Inverclyde) (SNP): I am pleased to speak in the debate. I am also one of those who has had the opportunity to speak with a number of carers and care providers in their constituency, particularly in the past year. I believe that it is only by meeting carers and hearing from them at first hand that we can appreciate the specific challenges that they face and understand how their lives can be improved. This point was touched on earlier, but it needs to be stressed: anyone can be a carer at some point in their life. I think that we all know someone who is a carer—I certainly do. When I was a young boy, my grandmother came to live with us and my mother became her carer.

Dementia is unfair; it does not discriminate and it can take anyone. In that regard, Kopel's law has been mentioned a few times in the debate. I welcome the research that the Union of European Football Associations has commissioned into the possible link between heading a football and getting dementia. Many members will be sympathetic to the Kopel's law campaign, as I am. I am sure that the research will be very advantageous when it is published and I welcome the fact that Scotland is the first country in the world to produce national guidance on dealing with concussion in sport.

I will address a number of points that colleagues have made in the debate. James Dornan spoke in his contribution to the debate about the Tory cuts agenda. I thought that that was a strong point to make, bearing in mind the mitigation measures that the Scottish Government has had to introduce to deal with Tory cuts and policies in recent years. The more mitigation measures the Scottish Government has to undertake, the less money is available to invest in other areas that the Scottish Parliament would want money to go into.

Graham Simpson used the phrase “a matter of choice” when referring to some of the Scottish Government's decisions. I genuinely believe that that was an off-the-cuff remark by Mr Simpson, but it came 24 hours after we debated the rape clause, which is a Tory Government policy that Mr Simpson voted in favour of yesterday.

Graham Simpson: Will the member take an intervention?

Stuart McMillan: I will take one in a moment.

Mr Simpson also used the phrase “a matter of choice” with regard to the issue of carers. However, the Scottish Government has been told that the UK Government's current eligibility criteria

for carers allowance limits carers' ability to work or study. That is a matter of choice for the UK Government.

Graham Simpson: Stuart McMillan will have heard me talking about the choice that the Scottish Government has made to cut councils' budgets year on year. That is what I was referring to. Surely he must admit that that is a fact.

Stuart McMillan: No. I referred to Mr Simpson using the phrase "a matter of choice". He will agree that every Government has to make decisions and that the Government in London, which he supports, introduced the heinous policy that we debated in the chamber yesterday.

Donald Cameron referred to the Scottish Government needing to put "a plan in place" and set things on "the right footing". However, what Mr Cameron did not do was offer any options for doing that or say where the money would come from. Alex Cole-Hamilton at least indicated in his closing comments an area for savings to the health service.

Miles Briggs: Will the member take an intervention on that point?

Stuart McMillan: Do I have time, Presiding Officer?

The Deputy Presiding Officer (Linda Fabiani): I can allow time for the intervention, Mr McMillan.

Miles Briggs: The Scottish Government will receive £800 million from additional Barnett consequentials this year, which is extra money that can help pay for health and care policies. Does the member not want to acknowledge that fact? Obviously, it does not fit his political agenda, but the fact is that the Scottish Parliament is receiving £800 million in Barnett consequentials.

Stuart McMillan: Mr Briggs is forgetting, or omitting, to tell the chamber and anyone listening about the level of cuts that the UK Government has imposed on the Scottish Parliament and Government over many years.

Carers are often the unsung heroes in our country, and the thousands of people who dedicate their lives to caring for others save the Government—in particular, our national health service and social care system—billions of pounds a year through their selfless care and attention.

We have heard that there are just under 800,000 registered carers, but a matter that is raised with me time and again when I talk to carers is the number of carers who are not registered. The actual number of carers will be well in excess of 800,000, and we in the Parliament need to recognise that. The same applies to young carers. We have 29,000

registered young carers, but the actual number will be higher. A young carer is any child or young person below the age of 18 who takes on caring responsibilities, and I genuinely believe that society owes all those who take a caring role a massive debt of gratitude.

I am conscious of the time, although I did take a couple of interventions. The provisions in the Carers (Scotland) Act 2016 will ensure that there is better and more consistent support for carers and young carers so that they can continue to care, if they so wish, in better health and also have a life alongside caring.

Despite what we have heard from some of the Conservative members today, the Scottish Government is working with councils and health boards to agree what needs to be done to shape the future of health and social care over the next 20 years, and the Scottish Government is determined to make a real difference to people's lives with the responsibilities that we have. This Government and certainly the members on these benches recognise the vital role that carers fulfil in our society in caring for family, friends and neighbours, including some of the most vulnerable people in our society.

16:12

Brian Whittle (South Scotland) (Con): I welcome the opportunity to speak in the debate and I thank the Greens for bringing it to the chamber. I would like to focus on the role of young carers and the challenges that they face. There are certainly tens of thousands of young carers in Scotland, although some estimates suggest that there might be upwards of 100,000. Most of those young carers are still in school and take on the role of carer not by choice but by circumstance. No one looking on could tell them apart from any other teenager—but, then again, they are still normal teenagers. They are full of hopes and aspirations for the future, they are ambitious to continue their education and build careers in the world of work, and they want to spend their weekends and evenings in the company of their friends.

With colleagues from across the Parliament, I attended the Scottish young carers festival last year, and I think that it is fair to say that we were blown away by the energy and enthusiasm that greeted us. I have to be honest and say that, until I had the opportunity to attend that event, speak to young carers, listen to what they had to say and mix with them, it was an area that I did not know enough about. Like many members, I knew what a young carer was, but I did not know who they were.

During the event, we watched as young carers acted out real situations that happen to them daily. We heard how, every day, they can be late for school, not get the chance to complete homework or arrive at a class tired, and myriad other issues can arise through no fault of their own because they have caring duties for a family member at home.

One of the biggest issues for young carers is not the effects of those responsibilities but others' lack of knowledge and the lack of understanding that they sometimes receive from others. When teachers and classmates do not understand a young carer's situation or make allowances for their added responsibility, it can make life that much harder for them. When lateness is perceived as rudeness, or a failure to do homework is written off as laziness, it only increases the feelings of isolation and loneliness that are all too often a feature of the life of a young carer.

The flip side of that coin is that just a little bit more understanding of the role of young carers can make a big difference to their experiences. Many young carers are fortunate and already have teachers, friends and even employers who understand their situation and adapt to it, but there is little by way of consistency across the country. Teachers have a vital role to play in the lives of all their pupils, but for young carers they can also be a vital source of support and advice for people who have had to grow up that little bit too fast. Understanding costs nothing, but it can make a huge difference to young carers.

Like all of us in the chamber, I regularly receive emails from charities and other organisations, with briefings about issues such as social care. Indeed, I received a number of them before this debate. Although such briefings can be very useful and informative, I do not believe that there is a better way to understand an issue such as this one than to sit down and listen to the personal experiences of people who live with it every day.

At the young carers festival, a round-table discussion gave young carers the chance to speak to MSPs and tell us more about how we could help them—and, boy, did they tell us. Frankly, when it comes to holding politicians to account and asking difficult questions, they could teach some of us in the chamber a thing or two. However, that only helped to reinforce both the importance of the issue and the incredible resilience of young carers. To hear the practicalities of what they face on a day-to-day basis is exactly what we need. Hearing someone tell us that they have to take the bus to the chemist to pick up a prescription and pay for the round trip out of their own pocket cannot help but have an impact on the way we think. We can sit and read reports all day, but few of them will be as compelling as listening while a younger

person—in that case, someone younger than my own daughter—talks about the sacrifices that they have made to care for someone else.

It is only right to acknowledge that the Government has made significant changes to social care during its time in office. I recognise, from across the chamber, its willingness to continue to improve the lives of carers. It is also fair to say that one of the biggest issues facing carers is lack of income. The Scottish Conservatives have called for carers allowance to rise to in line with jobseekers allowance—a move that would benefit more than 60,000 people. However, perhaps there are ways, other than through carers allowance, in which we can support and value young carers. For example, I would like to look at the possibility of free public transport for young carers—both to reduce the costs associated with their roles as carers and to make life a bit easier for them beyond caring. In education, can we provide more opportunities for flexible or distance learning, giving not just young carers but all carers the chance to learn and to improve their career chances?

We cannot simply walk down a street and pick out the people who are most likely to be a carer; they are all different. Just as carers do not fit any particular mould, we should not be too prescriptive or narrow in how we choose to support them. By all means, let us increase carers allowance. Let us do everything that we can to make sure that they are not at a financial disadvantage through being carers, but let us also think beyond just how we can improve the lives of carers with money.

Aileen Campbell: Will the member give way?

Brian Whittle: I am in my last minute—I am sorry.

Aileen Campbell: Is there any flex?

Brian Whittle: Presiding Officer, is there any flexibility on time to enable me to take an intervention?

The Deputy Presiding Officer: There is if you wish it, Mr Whittle.

Brian Whittle: I will happily give way to Ms Campbell.

Aileen Campbell: I thank Brian Whittle for some of the views, opinions and concerns that he has raised. What does he feel about the UK Government taking away Motability cars from some of the most vulnerable people in our society?

Brian Whittle: If it is all the same to the minister, I will stick to the task in hand. I understand that her question speaks to her political persuasion to try to attack the Conservatives as much as she can. Perhaps she

will take that point into another debate; let us stick to this one.

Parliament needs to do more to improve public knowledge of the role of carers and, through that, to encourage greater flexibility and understanding for carers in everyday life. The role of the Scottish Government and the Scottish Parliament is not just to care for carers but to make sure that others care about them. Charles Dickens said:

"No one is useless in this world who lightens the burdens of another."

Just as carers lighten the burden of those they care for, it is surely up to us to lighten their burden.

The Deputy Presiding Officer: The last of the open debate speeches will be from Sandra White.

16:18

Sandra White (Glasgow Kelvin) (SNP): I thank Alison Johnstone for bringing to the chamber this very important issue for debate including, as mentioned in the Scottish Green Party motion, the issue of young adult carers—particularly those who are in education. I know, from visiting the many colleges and universities in my constituency in Glasgow Kelvin, that that is a very real issue for students. There are over 6,000 students who identify themselves as carers. Obviously, there will be more, but there are about 6,300, I think, who identify themselves as students with caring issues.

I congratulate the students' groups that I have met and that carry out work to address the very important issue of student carers. I also want to highlight the College Development Network, which is funded by the Scottish Government and delivers an online resource for learners. That is most welcome, but students who have caring responsibilities have told me that they would dearly love to be able to attend college or university. If my memory serves me correctly, one student told me that attending gives them a sense of normality. I think that we can all understand that, so I look forward to the day when we can enable them to do so.

Miles Briggs: How does the member think that the Scottish Government cutting 120,000 part-time college places will help carers to get into training?

Sandra White: We hear from the caring Tories again. Perhaps if the Tories who are sitting over there did their homework, they would see that those places were not cut. Why has no Tory MSP mentioned that the Tories voted against the provision of £100 million for a wage rise for carers? No one has mentioned that. I ask the Tories please to stop this caring-Tories approach—we saw the toxic version yesterday, and I am sure that the Tories have not changed much since then.

I am grateful for the work of the College Development Network. If we want students to participate and enjoy the sense of normality that that student told me about, we need to ensure that facilities and support packages are in place for them, as many members said.

That brings me to the young carers allowance. We need to provide extra support for young people who have caring responsibilities, and we need to increase carers allowance to the level of jobseekers allowance.

Let me respond to Colin Smyth's comments and the call in the Labour amendment for the Government to confirm when carers allowance will be increased. As convener of the Social Security Committee, I agree with members of the committee and groups who have given evidence to the committee that the increase is a key policy that must be delivered. However, we need to work with the Westminster Parliament on that, as I said in my intervention during Alex Cole-Hamilton's speech—he is not in the chamber at the moment. The Social Security Committee and the Scottish Affairs Committee in Westminster have met—we have met twice, which is historic—to try to iron out some of the issues in the benefits system in relation to the transfer of powers. I should say that powers in relation to only 15 per cent of social security spend are being transferred. There have been some sticky moments and letters have gone back and forth to ministers, including joint letters from Pete Wishart, who is chair of the relevant Westminster committee, and me. In one letter, we said that we wanted a review of the agreement between the Scottish Government and the DWP, to ensure that

"claimants do not lose out through the transfer of welfare powers and that they benefit when new powers are exercised."

We need to deliver the policy as soon as possible, but I think that we all agree that we must deliver it properly. That is a key point. We should not build up people's hopes when we cannot deliver something tomorrow or next week; we must ensure that there is a smooth transition and that people do not fall through the cracks—I know that Mr Smyth did not mean to do that in his comments or in the Labour motion. However, we need to look at the policy and get it right.

Colin Smyth: Will the member explain what the delay is? The minutes of the meeting in February seem to imply that the minister wanted to consider information from the DWP. What exactly is causing the delay in bringing proposals to this Parliament?

The Deputy Presiding Officer: Mr Smyth's microphone did not appear to be working properly—oh, I see that Mr Smyth had not put his

card in the console. Ms White, did you hear his intervention?

Sandra White: I did. Mr Smyth mentioned the February meeting. The delay is on the Westminster side. We need to ensure that we have this absolutely right; my understanding is that the delay is on the Westminster side, which is why the Scottish Government has asked the DWP to take forward a feasibility study to consider the best way to deliver the policy. I know that Mr Smyth and the Labour Party do not mean to cause unnecessary distress to claimants, but we really must get this right, and we should not be suggesting to people that we are dragging our feet.

I know that I am running out of time, but I turn once again to an allowance that we have perhaps all forgotten about—and that we should perhaps be reminding the Tories about. Apart from the fact that they voted against raising the wage of carers, let us not forget about attendance allowance. When this Parliament first introduced free personal care, the Westminster Government stopped attendance allowance for the very many people to whom we were giving free personal care. That should not have been allowed. We repeatedly asked for it, and we still have not had it back. I will bat that back over to the Tories, and perhaps they can write to their ministers and ask why we have not received the many millions of pounds that we would have been receiving from attendance allowance, which is rightfully the people's and the Scottish Parliament's.

The Deputy Presiding Officer: We now move to the closing speeches. I am disappointed to see that there are a couple of people who contributed to the debate who have not come back into the chamber in time for the closing speeches.

It is perfectly acceptable for people to request to leave the chamber outwith the Presiding Officer's protocol, and I am okay with that. However, I ask that, when you send a note up, you give the reason why, rather than just broad generalisations.

16:26

Monica Lennon (Central Scotland) (Lab): I thank Alison Johnstone for lodging the motion for debate. It has been a really good debate and lots of members have taken part, which is always to be welcomed. I confirm Scottish Labour's support for the motion, and I am grateful for any support that we get for the amendment in the name of Colin Smyth—I should clear up on his behalf that it is pronounced like Smith, not Smythe. He has been very polite in just nodding along.

There have been some excellent speeches today. The key thing is that we put on record our gratitude to and respect for carers, whether they

are waged or unwaged. There have been some genuine contributions from members in doing that. We have heard some moving accounts of members' constituents and people who are close to us who are carers. For example, Kate Forbes referred to both her sisters, and I hope that they are pleased that the Parliament recognises their important work.

The value of the work that carers do is immeasurable, and we simply could not run our NHS or our social care services without them. Yet the support or pay that carers receive is still so far removed from the value of their work—there is still such a gap. That is why Labour supports the plans to uprate carers allowance using the powers of the Scottish Parliament, and I echo Colin Smyth's words earlier in the debate and in the Labour amendment calling on the Scottish Government to give carers the certainty and respect that they deserve by confirming a date when carers allowance will be increased.

People have been at pains not to be too party political today, but we are here to make choices and to advocate positions. Yesterday we had a debate that moved some members to tears. I know that, sitting behind Kezia Dugdale, I was one of them. Some of the policies that have come from the UK Government and the whole austerity agenda are the complete opposite of my politics. In fact, that is why I came into politics—to try and put an end to Tory Governments.

It is a bit rich for Graham Simpson to have said what he did. I should declare that I am still—for a few more days—a serving councillor on South Lanarkshire Council, where Graham Simpson has been a member for longer than I have. We cannot just talk about Tory austerity and have a go at the Scottish Government without being honest about it. Equally, I say to James Dornan and others that we cannot be in denial about the cuts that have been passed down to local government. In fact, the STUC has passed a motion today asking us to be honest in that regard. When we have these discussions, we cannot pretend.

I say to the minister, Aileen Campbell, that we on these benches do not accept that local government is getting a fair deal. Others have said that there are no cuts. We have to be completely honest. We do not all agree about where we are getting to, but we have to be honest that there are cuts coming down from the UK Government and from the Scottish Government.

James Dornan: One thing that comes across from the Conservatives and Labour is the talk of priorities. Surely they must accept that the same applies at the local council level, that it is about priorities, that we are all working under restrained budgets, that we have to make the best of that, and that, if Glasgow City Council had dealt with

equal pay claims a long time ago, as it should have done, it would not be in the situation that it is in just now.

Monica Lennon: Perhaps the discussion is moving on. Of course we all have to be accountable for our choices, but I go back to the point that local services have been cut. There are not enough carers, and people are under a lot of pressure now.

Graham Simpson: Will the member take an intervention?

Monica Lennon: I think that we have time, so I will be generous.

The Deputy Presiding Officer: There is not an awful lot of time left.

Graham Simpson: I will be very quick. Does Monica Lennon agree that local councils throughout Scotland have been hit by the Scottish National Party Government and that budgets have been cut year on year, which has made things increasingly difficult for councillors, including Monica Lennon and me?

Monica Lennon: Local government and local services are having a really rough time. I am on record as having said that, and I am very clear about that. I do not think that I have ever agreed with Graham Simpson about anything in my life, but it is undeniable that local services have been cut. We can debate who we think is responsible for that, but we need to take ownership of the issue. *[Interruption.]* A debate is going on behind me.

As a local councillor, I have tried to go to where people are, to listen to their experiences, to understand, and not pretend to have all the answers. I have held dedicated carers surgeries at Lanarkshire carers centre—I went to where carers were. Some of the problems that were put in front of me were so complicated and difficult that I did not know where to start. I have worked in the Scottish Government and in local government and am used to the system, and it is clear to me that the system too often works against people. Services are supposed to support people, not try to push them back.

I realise that we have opened up a discussion, and I need to wind up.

I am pleased that we have put on record our appreciation of and support for carers, particularly young carers—I know that Brian Whittle and others have made great efforts to do that—but there is a postcode lottery when it comes to services. Whoever is elected to run our councils or to be in government in the Scottish Parliament or in the UK Parliament really has to stand up for carers. I think that we all recognise that, with our demographic challenges, we have a very long way

to go, and no one here can sit back and say that they are doing enough.

16:33

Miles Briggs (Lothian) (Con): I am pleased to close this debate on social care for the Scottish Conservatives. I thank the Green Party for bringing this important issue to Parliament.

Colleagues across the chamber have highlighted the vital work that social care services in Scotland do to support older and vulnerable people, and also the struggles and pressures that those services face now and that they will face in the future.

Annie Wells discussed the huge progress that has already been made to move away from institutional care settings and to start to deliver person-centred care in an environment that allows people maximum independence and to be involved in their own support. The Scottish Conservatives welcomed and were supportive of the roll-out of self-directed support, which can, if it is delivered properly, offer people real choice and control over their support. We also support health and social care integration, which aims to encourage joined-up thinking between NHS boards and local councils, to prevent unnecessary admissions and delayed discharges, and to reduce variations and inefficiencies. However, it is clear that the policy has not yet gone far enough or started to deliver the change on the ground that all members want to see.

Graham Simpson spoke about the Carers (Scotland) Act 2016, which is due to come into force in April 2018. That act sets out the support that carers are entitled to, including their own access to self-directed support and the waiving of support charges. The Scottish Conservatives believe that carers require financial as well as emotional and practical support, particularly the more than 170,000 people who provide care for over 35 hours a week.

As a number of speakers have mentioned, it is acknowledged that carers in Scotland save our Scottish public sector and the Scottish economy £10.8 billion. That is why we have called for carers allowance to be aligned with jobseekers allowance, which will benefit more than 60,000 carers. I am pleased that we have heard cross-party support for that measure today.

Brian Whittle discussed the more practical support that can be provided to unpaid carers. The Scottish Government has estimated that there are 44,000 carers under the age of 18 in Scotland. Young carers require targeted support through schools, colleges and specialised support services.

I want to use this opportunity to highlight a campaign that I have been involved with for the past year, since being elected as an MSP—the Frank’s law campaign. The 16th of April marked the third anniversary of Frank Kopel’s death. It is a shocking indictment that, in some parts of Scotland today, terminally ill patients under the age of 65 are being charged for the help that they need with basic things such as washing, dressing and feeding themselves. Scottish Conservatives want that to change. I was pleased that all Opposition parties in the Parliament committed to supporting a policy change. However, campaigners are becoming frustrated with the lack of progress in the area. The Government announced a feasibility study, which I welcomed, but charities in the field have told me that they have not been contacted and already have major concerns. I am concerned that the feasibility study will be ill-informed and limited. I seek a meeting with the minister on that.

Shona Robison: As Miles Briggs will be aware, I said in my opening remarks that officials are already meeting with a number of organisations. Next week, they are meeting with Scotland Against the Care Tax. The door is open for meetings with a range of organisations. The feasibility study will be completed in the summer. I hope that Miles Briggs will relay that information to allay people’s concerns if they raise the issue with him.

Miles Briggs: I have done so. I have tabled a number of written questions to the minister to find out which organisations have been involved from the outset. I had hoped that the minister and the Government would have gone out to speak to people and not expected people to come to them. Will ministers commit today to ending, in this session of the Parliament, the age discrimination that exists for people in Scotland under the age of 65? I am happy to take an intervention if the minister wants to confirm that that will be ended.

Shona Robison: We should surely wait for the feasibility study, which will inform us about how that can be done. As I said to Miles Briggs, I am willing to do that on a cross-party basis, but let us get the information first.

Perhaps Miles Briggs could answer a question from me. In addition to the spending commitment on free personal care for the under-65s, which we need to take forward and find resources for, his back benchers have today called for more money for local government. If Miles Briggs, as a front-bench spokesperson, supports those back-bench calls for more money for local government, in addition to more money for free personal care for the under-65s, can he explain where that money will come from?

Miles Briggs: As I said, there is £800 million of additional Barnett consequential funding coming to the Parliament in the financial year 2017-18.

Frank’s law is needed today and it was needed yesterday. We cannot let the SNP or the Government kick the issue into the long grass.

We need the Scottish Government to provide real reform, explore alternative service models and ensure that integration is fully enacted. We need a shift in the balance in healthcare towards the community so that we lay the foundations for strong and personalised social care services that are capable of delivering what we all want, which is support for an ageing population in Scotland and delivery of the vital services that Scotland desperately needs.

16:38

The Minister for Public Health and Sport (Aileen Campbell): I welcome the opportunity to close the debate on behalf of the Government. The debate gives us the opportunity to reiterate, as others have done, our gratitude to carers right across the country for their selfless actions, which are motivated by compassion and love. The debate also provides us with a chance to highlight our commitment to progress improvements for carers, to provide them with the support that they need and deserve and to ensure that they can have a life alongside caring.

Stuart McMillan and Bob Doris spoke movingly about their life experiences, and I want to add the experience of my family, particularly my mother, who had to care for my late granddad. She would not have been able to do so without the support of Crossroads Caring Scotland. Even though that was more than 20 years ago, the story and the sentiment remain the same—families require support so that they can have a life alongside their caring responsibilities.

Over the lifetime of the Scottish Parliament, significant and transformative progress has been made in policy and legislation on caring and carers. We have had the introduction of free personal care for the elderly, the integration of social care and health, the development of self-directed support and the increasing personalisation of care to empower carers and those who are cared for to get bespoke and tailored help. I hope that that goes some way towards allaying the concerns that were expressed in Miles Briggs’s final comments, as we are on a journey to ensure that people feel empowered and much more in control and in charge of the support that they deserve.

There is much more that we need to do and there are challenges that we must face and overcome, not least the challenge of the ageing

population and our ability as a nation to respond while ensuring dignity, respect and appropriate and timely support for people.

Many members have raised important issues and I hope to cover and address as many as time allows.

There has been much discussion of our commitment to increase the levels of carers allowance and jobseekers allowance. Administration of carers allowance in Scotland will be the responsibility of the new social security agency once it is established and, in parallel with the work to establish the agency, we are working hard to deliver the increase to carers allowance on an earlier timescale. We have asked the DWP to explore whether existing systems and processes could be used to pay the increase, although Sandra White and others articulated the challenges in that process. We are currently working with the DWP on feasibility studies, which should be concluded by the end of April. We are also actively considering whether the Scottish Government could make the payments in advance of setting up the social security agency. To give comfort to the members who raised the issue, I can say that we are exploring every option and looking at every way of advancing our commitment as quickly as possible.

Mark Ruskell raised more general concerns about the interaction of carers and their allowances and the DWP, and he was right to raise that, because we must gather views as we develop our approach to social security benefits for carers. Experience panels consisting of carers, including young carers, with direct experience of the benefits system are being established to help us to achieve that aim. The panels will start this summer and run for four years, using the principles of working, designing and developing together to create a social security system that better meets the needs of those who will be in receipt of benefits. As part of the fiscal framework, we have agreed with the UK Government that any new benefits or discretionary payments that the Scottish Government introduces that provide additional income for a recipient will not be offset and result in an automatic reduction by the UK Government in the recipient's entitlement elsewhere in the UK benefits system.

Further, we want to ensure that people take up the financial help that they deserve. The most recent figures suggest that there could be more than 500,000 individuals in Scotland who are not claiming the support that they deserve and need. That is why we are taking action to support people to take up benefits, which will include action that specifically targets younger carers during carers week in June.

Colin Smyth, Alison Johnstone and other members raised issues and concerns about sleepovers and the living wage. The Government has consulted stakeholders on that commitment, as delivering it successfully and making sure that it is done right will require partnership and collaboration. We intend to extend our commitment to the living wage to include sleepovers during 2017-18 and, as part of the £100 million investment, we have allocated £10 million for that.

Patrick Harvie: Will the minister take an intervention?

Aileen Campbell: In a minute.

We have identified a programme of work to support reforms in respect of sleepovers to allow us to get into a position to meet our ambition of all hours being paid at the living wage, and we will continue on the basis that, when a care worker is sleeping, their hours are compliant with the working time regulations and their waking hours are paid at the living wage.

Patrick Harvie: That is a very welcome commitment. However, the Government's amendment says that

"all staff providing social care"

should be

"paid at least the real Living Wage"

and the current budget makes provision only for those providing adult social care, so does the Government intend to extend provision to those who provide social care for children, too?

Aileen Campbell: The Government has already made a number of commitments, statements and announcements about ensuring that as many people as possible can get paid the living wage. The most recent was made in the spring of this year by the First Minister in her commitment to early learning and childcare. As a Government, we will continue to do what we can, unlike the Conservatives, who seem to have blanked out the living wage from its amendments and today's debate. We will do what we can to ensure that the people who work in the care sector get the support and pay that they deserve for the work that they do.

Colin Smyth: Will the minister take an intervention?

Aileen Campbell: Yes.

The Deputy Presiding Officer: There is less than a minute of your speech left.

Aileen Campbell: Okay, I will move on with the rest of what I want to say. I want to touch briefly on the issue of young carers. It is the responsibility of communities everywhere to be aware of the needs

of their young carers. It is important that delivery partners are equipped to better understand how to recognise who is a young carer and to ensure that information is widely available to help young people to self-identify as young carers. That requires a great deal of leadership.

For example, when I visited the new Portobello high school in January to mark young carers awareness day, I met young carers and staff from the Edinburgh Young Carers Project, which runs the school awareness-raising campaign. Through that, more than 350 previously hidden young carers have been identified across the city. I encourage all local authorities to develop that type of working and to build relationships with our young carers.

I would have liked to have covered many other areas, particularly Carer Positive, which Alison Johnstone raised, which ensures that employers are as flexible as they can possibly be and understand the value of the assets that they have in their workforce if they have caring responsibilities.

The Deputy Presiding Officer: You must come to a close.

Aileen Campbell: While there is much more that we need to do, it should also be noted that other parts of the UK are seeking to learn from Scotland.

We have had another opportunity today to recognise the contributions of care workers and unpaid carers to this country but we need to do more. As we create the fairer country that we all seek, we need to make sure that carers are very much part of the dialogue and debate.

16:46

Patrick Harvie (Glasgow) (Green): I thank the members who have chosen to take part in today's debate.

As members from across the spectrum have recognised, people caring for one another is fundamental to our society and economy. It is fundamental to human existence and the human experience, and it always has been.

The Greens chose to bring this topic for debate because the way in which we organise and provide for social care in our society today is clearly lacking. As our motion says, there remains a vast gap between the value of care and the support or pay that carers receive. We believe that nobody should face poverty because of the care that they give.

We have reached a degree of consensus, because none of the other political parties' amendments to the motion delete those two

central elements: the gap between the value of care and the support that society provides to carers; and the principle that no one should have to face poverty because of the care that they give. I welcome the consensus that has been reached on those points.

We also agree that raising carers allowance must be part of the necessary action. Colin Smyth was quite right to call for a timescale, and even though ministers have set out some of the technicalities around how we reach that, if we are moving towards feasibility studies at the end of this month, surely it is appropriate that, once those are published, we begin to set dates for the implementation of something that we all agree is necessary.

Mr Smyth also made a clear case against excessive care charges and recognised that long-term reductions in local government funding are incompatible with the progress that we need to make. For those reasons, we will support Labour's amendment today.

All parties also agreed on the need to improve practical support for younger carers and to provide greater financial support to young carers who are in education. That is progress. A young carers grant was a Green Party manifesto pledge, but it was originally an initiative of the Scottish Youth Parliament by Lauren King. The First Minister pledged to explore that in one of her first parliamentary speeches of the current parliamentary session and we now have consensus on taking it forward. The Carers Trust has come up with a number of ways in which that can be delivered, and I urge all members to look at its proposals.

Shona Robison spoke of many of the steps forward that have been taken, but there are aspects that so far remain on paper only and we need clear commitments on timescales and additional resources, year by year, in Scottish Government budgets to ensure that we close the vast gap between the value of care and the support that is provided.

We brought this debate to the chamber also to highlight the inequities in care. Paid and unpaid care is work that is most often performed by women and which has a significant impact on women's lives. Some 84 per cent of the social care workforce in Scotland are women and that rises to 96 per cent in the childcare sector, many of them earning below the living wage even still. The impacts on young people are also particularly acute—an estimated 44,000 people under the age of 18 provide unpaid care. I am glad that we have consensus on those aspects.

I have to admit that I had mixed feelings as I listened to Brian Whittle wax lyrical about

providing decent support to young people and even quoting Dickens. How did it go, again?

"No one is useless in this world who lightens the burdens of another."

Let us hope that the young person is not unlucky enough to have committed the crime of being the third child in their family.

Brian Whittle: Will the member take an intervention?

Patrick Harvie: Yes. I am glad that so many Conservatives have remembered how the political convention of interventions operates in the chamber, and I am delighted to give way.

Brian Whittle: I thank the member for that lecture, and for taking the intervention. I just want to point out that I have three children, and none of them will be defined by whether they get a tax credit or not with regard to how much I love them.

Patrick Harvie: I wish only that the member extended that respect to the rest of society, rather than just his own family.

I will come to the Conservative amendment in a moment. The Scottish Government amendment would delete our support for a living wage plus, which would go beyond the living wage, and the case against care charges. Therefore, although I recognise the steps forward that the Scottish Government has made and which it is keen to talk about, we will not support its amendment, because we believe that the case needs to go further.

The Conservative amendment contains the following quote:

"current approaches ... will not be sustainable in the long term".

It presents that as a direct quote from Audit Scotland's 2015 report, "Health and social care integration". However, the quote is not from that report; it is from Audit Scotland's 2016 report, "Social work in Scotland". That report, to which the Conservatives should have attributed the quote, refers to low pay as being the key cause of the social care sector's recruitment and retention issues, yet the Scottish Conservatives still will not support the provision of even the living wage as a basic requirement. Annie Wells tells us that providers are struggling; I say to her that it is people working on poverty wages in our society who are struggling. James Dornan made efforts to elicit from the Conservatives some defence of those poverty wages, but I regret to say that he made no more progress than the rest of us. One of the Conservative members spoke about the importance of respite care. I suspect that if the Conservatives are returned with a bigger majority at Westminster, many people will require respite from the Tory Government rather than anything else.

Bob Doris was not the only member who talked about the context and the challenges that Brexit will present for the retention and recruitment of the high-quality, talented and dedicated staff that our social care services need. Brexit makes only more urgent our need to address the chronic and long-term undervaluing of care services and to give proper recognition, resources and support to the women and men who do that work in our society.

We need to rethink our society and economy and the way in which we value work. That means that we must make a commitment to funding high-quality paid social care that is, ultimately, free at the point of use for all, regardless of age or medical condition; it means paying all social care staff at least a living wage plus and providing them with the resources that they need to ensure that they are able to do their job to the best of their abilities, as they all want to do; it means lifting carers allowance by 50 per cent to more than £93 a week, as the Greens propose, and introducing a premium for those who care for more than one person; and it means that all of that must be done without interfering with the payment of other benefits or increasing any care charges that people currently pay. That would be dramatic investment in our social infrastructure.

That investment is urgently needed and is worth it. It would generate new employment and close the gap—not only the gender pay gap but the gap of inequality in our society.

Kate Forbes talked about hidden carers and I am sure that she was referring to those who are not included in our records and statistics, who are important people to recognise. However, all care work is generally too hidden in our society. We are not given the clear opportunity to see and value the work that is being done throughout society. What are too often regarded as the highest-profile forms of productive work—running a business, producing our food and even being a politician or a legislator—are dependent on unpaid, and often unseen, caring labour behind the scenes. All of us are able to be here today because we, our families and our communities have been and are supported by people doing unpaid caring labour.

Outside of employment, many of us provide support and care for others and our loved ones receive support from people working in social care. Quite rightly, we want them to have the best care, provided by a high-quality workforce that is appropriately rewarded and supported for the work that it does.

Caring for one another is fundamental to our society and to human nature. Without it, we simply would not function. I am pleased that all political parties are recognising the need for proper valuing of the paid and unpaid care in our society, but we are a long way away from achieving that. It is past

time that we turned that recognition into action, so that the next time that we debate these issues in the Scottish Parliament, we are able to look back at meaningful progress.

Business Motion

16:57

The Presiding Officer (Ken Macintosh): The next item of business is consideration of business motion S5M-05332, in the name of Joe FitzPatrick, on behalf of the Parliamentary Bureau, setting out a business programme.

Motion moved,

That the Parliament agrees the following programme of business—

Tuesday 2 May 2017

2.00 pm Time for Reflection

followed by Parliamentary Bureau Motions

followed by Topical Questions (if selected)

followed by Environment, Climate Change and Land Reform Committee Debate: Deer Management in Scotland

followed by Rural Economy and Connectivity Committee Debate: Review of Priorities for Crofting Law Reform

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Wednesday 3 May 2017

1.30 pm Parliamentary Bureau Motions

1.30 pm First Minister's Questions

2.15 pm General Questions

2.35 pm Portfolio Questions
Education and Skills

followed by Business Motions

followed by Parliamentary Bureau Motions

3.15 pm Decision Time

Tuesday 9 May 2017

2.00 pm Time for Reflection

followed by Parliamentary Bureau Motions

followed by Topical Questions (if selected)

followed by Scottish Government Business

followed by Business Motions

followed by Parliamentary Bureau Motions

5.00 pm Decision Time

followed by Members' Business

Wednesday 10 May 2017

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions
Health and Sport

followed by Scottish Government Business

followed by Business Motions
followed by Parliamentary Bureau Motions
 5.00 pm Decision Time
followed by Members' Business
 Thursday 11 May 2017
 11.40 am Parliamentary Bureau Motions
 11.40 am General Questions
 12.00 pm First Minister's Questions
followed by Members' Business
 2.30 pm Parliamentary Bureau Motions
 2.30 pm Scottish Government Business
followed by Business Motions
followed by Parliamentary Bureau Motions
 5.00 pm Decision Time—[Joe FitzPatrick.]

Motion agreed to.

Parliamentary Bureau Motion

The Presiding Officer (Ken Macintosh): The next item of business is consideration of a Parliamentary Bureau motion. I ask Joe FitzPatrick to move motion S5M-05333, on the approval of a Scottish statutory instrument.

Motion moved,

That the Parliament agrees that the International Organisations (Immunities and Privileges) (Scotland) Amendment Order 2017 [draft] be approved.—[Joe FitzPatrick.]

16:57

John Finnie (Highlands and Islands) (Green): In the previous parliamentary session, I challenged the International Organisations (Immunities and Privileges) (Scotland) Amendment Order 2015, in respect of the Asian Infrastructure Investment Bank. The draft order that we are considering today amends certain legal immunities and privileges in connection with the European Organisation for Astronomical Research in the Southern Hemisphere—or ESO for short. It is an international project and its Edinburgh base has 20 full-time equivalent posts, with work split between 40 to 50 individual staff members.

The Justice Committee was told that

“To enable the organisation to fulfil its purposes and carry out its functions, privileges and immunities apply by virtue of a practical protocol to the convention that was signed in 1974.”—[Official Report, Justice Committee, 18 April 2017; c 1-2.]

There is agreement that this is a complex area of law. Articles 7 to 19 of the protocol require member states to grant a number of privileges and immunities to the organisation, its officers and staff. The majority of those relate to reserved matters and are dealt with in the parallel United Kingdom order.

The draft order's purpose is to correct an error that was inadvertently made to the principal order, which came to light because the ESO pointed out that some of its staff were not receiving the reserved tax exemptions to which they are entitled. When officials reviewed the Scottish order last autumn, they discovered a different mistake that was unrelated to taxation, which was that in one instance too many immunities and privileges were being granted.

I raised various points with the minister when she brought the draft order to the Justice Committee, and I am grateful for her replies—not least when she said that this is a “complex area” of law. It is known that the ESO's staff are exempt from UK income tax, and I await the minister's letter on the full list of tax exemptions.

With regard to criminal immunity, I asked the minister what might apply and she suggested that

“assault and other crimes of that type”

would not be covered, but that

“white-collar crime might fall within the scope of the immunities and privileges.”

There is also the issue of inviolability of residence.

There has been no consultation on the order and no impact assessment. There is no information on the total number of persons in Scotland who are covered by it. The information from the Scottish Government is:

“We understand that the discrepancies in the Scottish order have given rise to no practical issues”.—[*Official Report, Justice Committee*, 18 April 2017; c 5, 2-3.]

I do not know how that statement could be made. I understand that this is about long-standing conventions, but my view and my party's view is that such conventions must be constantly evaluated. I consider that it is fundamentally wrong for any Government minister to come to a Justice Committee meeting extolling the virtues of any person being immune from the criminal or civil law and exempt from taxation, and their residence or premises being inviolate.

The last time that I spoke about the matter was in relation to the 2015 order, when I said:

“It is clear that the approach is intended to be business as usual, but that is not the new politics that I understood the Scottish Parliament to want to deliver.”—[*Official Report*, 25 November 2015; c 74.]

I encourage all members to vote for a system in which everyone in Scotland adheres to the law of the land and pays the taxes due by opposing the order.

The Presiding Officer: Thank you, Mr Finnie. I call Annabelle Ewing to respond.

17:01

The Minister for Community Safety and Legal Affairs (Annabelle Ewing): The draft International Organisations (Immunities and Privileges) (Scotland) Amendment Order 2017 amends various legal immunities and privileges in connection with the European Organisation for Astronomical Research in the Southern Hemisphere, otherwise known as the European Southern Observatory or ESO.

The ESO is developing a giant telescope which is in an advanced stage of design by astronomers and industry across Europe, led by the ESO. To enable the organisation to fulfil its purposes and carry out its functions, certain privileges and immunities apply by virtue of a protocol to the convention that was signed in 1974. The conferral

of immunities and privileges on officers of the organisation is in effect a condition of membership. As part of the UK's membership of the ESO, the agreement has to be effective throughout the UK. That includes the privileges and immunities, some of which relate to devolved matters in Scotland.

There are indeed, as Mr Finnie referred to, 20 full-time equivalent posts at the Royal Observatory in Edinburgh—in fact, in total there are around 40 to 50 staff who potentially may be entitled to privileges and immunities because of their work for the ESO.

I know that John Finnie has concerns about the privileges and immunities in relation to civil and criminal law that are accorded to international organisations generally as far as their operations in Scotland are concerned, and I will be answering a written question from him on that subject. However, I fear that he may have slightly misunderstood the legal position of officials who are engaged in work for international organisations in Scotland.

Such officials will usually be entitled to immunity from legal action, whether criminal or civil, but such immunities apply only when the relevant officials are engaged in their functions for the international organisation—and that within the limits of their authority. For example, those officials will be exempt from direct taxes but only in respect of the work that they do for the international organisation.

John Finnie: Will the minister give way?

Annabelle Ewing: I am afraid that I have only a few seconds left.

There is, however, an exception to that position in the case of motor traffic offences committed by such officials or of damage caused by motor vehicles belonging to or driven by them.

If such privileges and immunities were not extended to officials of international organisations in Scotland, all that would happen would be that such organisations would not carry out any work in Scotland, to the detriment of the Scottish economy and the general standing of Scotland in the international community.

There is also the fact that the privileges and immunities are reciprocal, so Scottish and other UK officials working for international organisations abroad will be entitled to equivalent benefits.

To the extent that the privileges and immunities relate to devolved matters in Scotland, conferral of those rights falls to the Scottish Parliament and it is therefore right that this Parliament should follow the Justice Committee's recommendation and approve the order.

The Presiding Officer: The question on the order will be put at decision time.

Decision Time

17:04

The Presiding Officer (Ken Macintosh): The first question is, that amendment S5M-05312.2, in the name of Shona Robison, which seeks to amend motion S5M-05312, in the name of Alison Johnstone, on carers and social care, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Adam, George (Paisley) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Campbell, Aileen (Clydesdale) (SNP)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Constance, Angela (Almond Valley) (SNP)
 Crawford, Bruce (Stirling) (SNP)
 Cunningham, Roseanna (Perthshire South and Kinross-shire) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Evans, Mairi (Angus North and Mearns) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fabiani, Linda (East Kilbride) (SNP)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Freeman, Jeane (Carrick, Cumnock and Doon Valley) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Harper, Emma (South Scotland) (SNP)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lochhead, Richard (Moray) (SNP)
 Lyle, Richard (Uddingston and Bellshill) (SNP)
 MacDonald, Angus (Falkirk East) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Derek (Renfrewshire North and West) (SNP)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAlpine, Joan (South Scotland) (SNP)
 McArthur, Liam (Orkney Islands) (LD)
 McDonald, Mark (Aberdeen Donside) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 Neil, Alex (Airdrie and Shotts) (SNP)

Paterson, Gil (Clydebank and Milngavie) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Ross, Gail (Caithness, Sutherland and Ross) (SNP)
 Rumbles, Mike (North East Scotland) (LD)
 Scott, Tavish (Shetland Islands) (LD)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Stewart (Banffshire and Buchan Coast) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Todd, Maree (Highlands and Islands) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Watt, Maureen (Aberdeen South and North Kincardine) (SNP)
 Wheelhouse, Paul (South Scotland) (SNP)
 White, Sandra (Glasgow Kelvin) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Baker, Claire (Mid Scotland and Fife) (Lab)
 Balfour, Jeremy (Lothian) (Con)
 Beamish, Claudia (South Scotland) (Lab)
 Bowman, Bill (North East Scotland) (Con)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Peter (North East Scotland) (Con)
 Corry, Maurice (West Scotland) (Con)
 Davidson, Ruth (Edinburgh Central) (Con)
 Dugdale, Kezia (Lothian) (Lab)
 Finnie, John (Highlands and Islands) (Green)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Golden, Maurice (West Scotland) (Con)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Iain (East Lothian) (Lab)
 Greene, Jamie (West Scotland) (Con)
 Greer, Ross (West Scotland) (Green)
 Hamilton, Rachael (South Scotland) (Con)
 Harris, Alison (Central Scotland) (Con)
 Harvie, Patrick (Glasgow) (Green)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Johnstone, Alison (Lothian) (Green)
 Kerr, Liam (North East Scotland) (Con)
 Lamont, Johann (Glasgow) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Lindhurst, Gordon (Lothian) (Con)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Scott, John (Ayr) (Con)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Elaine (Central Scotland) (Lab)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Smyth, Colin (South Scotland) (Lab)
 Thomson, Ross (North East Scotland) (Con)
 Tomkins, Adam (Glasgow) (Con)
 Wells, Annie (Glasgow) (Con)
 Whittle, Brian (South Scotland) (Con)
 Wightman, Andy (Lothian) (Green)

The Presiding Officer: The result of the division is: For 66, Against 44, Abstentions 0.

Amendment agreed to.

The Presiding Officer: I remind members that, if the amendment in the name of Annie Wells is agreed to, the amendment in the name of Colin

Smyth falls. The next question is, that amendment S5M-05312.1, in the name of Annie Wells, which seeks to amend motion S5M-05312, in the name of Alison Johnstone, as amended, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Balfour, Jeremy (Lothian) (Con)
 Bowman, Bill (North East Scotland) (Con)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Peter (North East Scotland) (Con)
 Corry, Maurice (West Scotland) (Con)
 Davidson, Ruth (Edinburgh Central) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Golden, Maurice (West Scotland) (Con)
 Greene, Jamie (West Scotland) (Con)
 Hamilton, Rachael (South Scotland) (Con)
 Harris, Alison (Central Scotland) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Lindhurst, Gordon (Lothian) (Con)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Scott, John (Ayr) (Con)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Thomson, Ross (North East Scotland) (Con)
 Tomkins, Adam (Glasgow) (Con)
 Wells, Annie (Glasgow) (Con)
 Whittle, Brian (South Scotland) (Con)

Against

Adam, George (Paisley) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Beamish, Claudia (South Scotland) (Lab)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Campbell, Aileen (Clydesdale) (SNP)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Constance, Angela (Almond Valley) (SNP)
 Crawford, Bruce (Stirling) (SNP)
 Cunningham, Roseanna (Perthshire South and Kinross-shire) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dugdale, Kezia (Lothian) (Lab)
 Evans, Mairi (Angus North and Mearns) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fabiani, Linda (East Kilbride) (SNP)
 Finnie, John (Highlands and Islands) (Green)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Freeman, Jeane (Carrick, Cumnock and Doon Valley) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)

Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Iain (East Lothian) (Lab)
 Greer, Ross (West Scotland) (Green)
 Harper, Emma (South Scotland) (SNP)
 Harvie, Patrick (Glasgow) (Green)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Johnstone, Alison (Lothian) (Green)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lamont, Johann (Glasgow) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Lochhead, Richard (Moray) (SNP)
 Lyle, Richard (Uddingston and Bellshill) (SNP)
 MacDonald, Angus (Falkirk East) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Derek (Renfrewshire North and West) (SNP)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAlpine, Joan (South Scotland) (SNP)
 McArthur, Liam (Orkney Islands) (LD)
 McDonald, Mark (Aberdeen Donside) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 Neil, Alex (Airdrie and Shotts) (SNP)
 Paterson, Gil (Clydebank and Milngavie) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Ross, Gail (Caithness, Sutherland and Ross) (SNP)
 Rumbles, Mike (North East Scotland) (LD)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Scott, Tavish (Shetland Islands) (LD)
 Smith, Elaine (Central Scotland) (Lab)
 Smyth, Colin (South Scotland) (Lab)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Stewart (Banffshire and Buchan Coast) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Todd, Maree (Highlands and Islands) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Watt, Maureen (Aberdeen South and North Kincardine) (SNP)
 Wheelhouse, Paul (South Scotland) (SNP)
 White, Sandra (Glasgow Kelvin) (SNP)
 Wightman, Andy (Lothian) (Green)
 Yousaf, Humza (Glasgow Pollok) (SNP)

The Presiding Officer: The result of the division is: For 28, Against 82, Abstentions 0.

Amendment disagreed to.

The Presiding Officer: The next question is, that amendment S5M-05312.3, in the name of Colin Smyth, which seeks to amend motion S5M-05312, in the name of Alison Johnstone, as amended, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Baker, Claire (Mid Scotland and Fife) (Lab)
 Balfour, Jeremy (Lothian) (Con)
 Beamish, Claudia (South Scotland) (Lab)
 Bowman, Bill (North East Scotland) (Con)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Peter (North East Scotland) (Con)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Corry, Maurice (West Scotland) (Con)
 Davidson, Ruth (Edinburgh Central) (Con)
 Dugdale, Kezia (Lothian) (Lab)
 Finnie, John (Highlands and Islands) (Green)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Golden, Maurice (West Scotland) (Con)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Iain (East Lothian) (Lab)
 Greene, Jamie (West Scotland) (Con)
 Greer, Ross (West Scotland) (Green)
 Hamilton, Rachael (South Scotland) (Con)
 Harris, Alison (Central Scotland) (Con)
 Harvie, Patrick (Glasgow) (Green)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Johnstone, Alison (Lothian) (Green)
 Kerr, Liam (North East Scotland) (Con)
 Lamont, Johann (Glasgow) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Lindhurst, Gordon (Lothian) (Con)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 McArthur, Liam (Orkney Islands) (LD)
 Mitchell, Margaret (Central Scotland) (Con)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Rumbles, Mike (North East Scotland) (LD)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Scott, John (Ayr) (Con)
 Scott, Tavish (Shetland Islands) (LD)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Elaine (Central Scotland) (Lab)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Smyth, Colin (South Scotland) (Lab)
 Thomson, Ross (North East Scotland) (Con)
 Tomkins, Adam (Glasgow) (Con)
 Wells, Annie (Glasgow) (Con)
 Whittle, Brian (South Scotland) (Con)
 Wightman, Andy (Lothian) (Green)

Against

Adam, George (Paisley) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Dr Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Campbell, Aileen (Clydesdale) (SNP)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Constance, Angela (Almond Valley) (SNP)
 Crawford, Bruce (Stirling) (SNP)
 Cunningham, Roseanna (Perthshire South and Kinross-shire) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Evans, Mairi (Angus North and Mearns) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fabiani, Linda (East Kilbride) (SNP)
 FitzPatrick, Joe (Dundee City West) (SNP)

Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Freeman, Jeane (Carrick, Cumnock and Doon Valley) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Harper, Emma (South Scotland) (SNP)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lochhead, Richard (Moray) (SNP)
 Lyle, Richard (Uddingston and Bellshill) (SNP)
 MacDonald, Angus (Falkirk East) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Derek (Renfrewshire North and West) (SNP)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAlpine, Joan (South Scotland) (SNP)
 McDonald, Mark (Aberdeen Donside) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 Neil, Alex (Airdrie and Shotts) (SNP)
 Paterson, Gil (Clydebank and Milngavie) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Ross, Gail (Caithness, Sutherland and Ross) (SNP)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Stewart (Banffshire and Buchan Coast) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Todd, Maree (Highlands and Islands) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Watt, Maureen (Aberdeen South and North Kincardine) (SNP)
 Wheelhouse, Paul (South Scotland) (SNP)
 White, Sandra (Glasgow Kelvin) (SNP)
 Yousaf, Humza (Glasgow Pollok) (SNP)

The Presiding Officer: The result of the division is: For 48, Against 62, Abstentions 0.

Amendment disagreed to.

The Presiding Officer: The next question is, that motion S5M-05312, in the name of Alison Johnstone, on carers and social care, as amended, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Adam, George (Paisley) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Beamish, Claudia (South Scotland) (Lab)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Campbell, Aileen (Clydesdale) (SNP)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)

Constance, Angela (Almond Valley) (SNP)
 Crawford, Bruce (Stirling) (SNP)
 Cunningham, Roseanna (Perthshire South and Kinross-shire) (SNP)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dugdale, Kezia (Lothian) (Lab)
 Evans, Mairi (Angus North and Mearns) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fabiani, Linda (East Kilbride) (SNP)
 Finnie, John (Highlands and Islands) (Green)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Freeman, Jeane (Carrick, Cumnock and Doon Valley) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Iain (East Lothian) (Lab)
 Greer, Ross (West Scotland) (Green)
 Harper, Emma (South Scotland) (SNP)
 Harvie, Patrick (Glasgow) (Green)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Johnstone, Alison (Lothian) (Green)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lamont, Johann (Glasgow) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Lochhead, Richard (Moray) (SNP)
 Lyle, Richard (Uddingston and Bellshill) (SNP)
 MacDonald, Angus (Falkirk East) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Derek (Renfrewshire North and West) (SNP)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)
 Matheson, Michael (Falkirk West) (SNP)
 McAlpine, Joan (South Scotland) (SNP)
 McArthur, Liam (Orkney Islands) (LD)
 McDonald, Mark (Aberdeen Donside) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 Neil, Alex (Airdrie and Shotts) (SNP)
 Paterson, Gil (Clydebank and Milngavie) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Ross, Gail (Caithness, Sutherland and Ross) (SNP)
 Rumbles, Mike (North East Scotland) (LD)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Scott, Tavish (Shetland Islands) (LD)
 Smith, Elaine (Central Scotland) (Lab)
 Smyth, Colin (South Scotland) (Lab)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Stewart (Banffshire and Buchan Coast) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Todd, Maree (Highlands and Islands) (SNP)
 Torrance, David (Kirkcaldy) (SNP)
 Watt, Maureen (Aberdeen South and North Kincardine) (SNP)

Wheelhouse, Paul (South Scotland) (SNP)
 White, Sandra (Glasgow Kelvin) (SNP)
 Wightman, Andy (Lothian) (Green)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Balfour, Jeremy (Lothian) (Con)
 Bowman, Bill (North East Scotland) (Con)
 Briggs, Miles (Lothian) (Con)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Peter (North East Scotland) (Con)
 Corry, Maurice (West Scotland) (Con)
 Davidson, Ruth (Edinburgh Central) (Con)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Golden, Maurice (West Scotland) (Con)
 Greene, Jamie (West Scotland) (Con)
 Hamilton, Rachael (South Scotland) (Con)
 Harris, Alison (Central Scotland) (Con)
 Kerr, Liam (North East Scotland) (Con)
 Lindhurst, Gordon (Lothian) (Con)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Mitchell, Margaret (Central Scotland) (Con)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Scott, John (Ayr) (Con)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Thomson, Ross (North East Scotland) (Con)
 Tomkins, Adam (Glasgow) (Con)
 Wells, Annie (Glasgow) (Con)
 Whittle, Brian (South Scotland) (Con)

The Presiding Officer: The result of the division is: For 82, Against 28, Abstentions 0.

Motion, as amended, agreed to,

That the Parliament believes that there remains a vast gap between the value of care and the support or pay that carers receive; further believes that nobody should face poverty because of the care they give; supports calls for the Scottish Government to provide more practical support to young carers, greater financial support to young adult carers in education and a carers allowance for unpaid carers that is increased in value, available more widely and does not count as income when assessing benefits and care charges; believes that quality social care is essential to many people's health, dignity and control; welcomes that work to explore the extension of free personal care to people under 65 who would benefit from it is underway; notes recent investments to make care charges fairer and calls on all local authorities to ensure that they are as flexible as possible in the withdrawal of charges; believes that all local authorities should ensure that all staff providing social care are paid at least the real Living Wage, as set by the independent Living Wage Foundation, with a view to providing better conditions and structures for career development to help recruit and retain staff, and further believes that, if Scotland loses access to the single market due to Brexit, and with it freedom of movement, that this will pose a serious recruitment challenge for social care.

The Presiding Officer: The final question is, that motion S5M-05333, in the name of Joe FitzPatrick, on the approval of a Scottish statutory instrument, be agreed to. Are we agreed?

Members: No.

The Presiding Officer: There will be a division.

For

Adam, George (Paisley) (SNP)
 Adamson, Clare (Motherwell and Wishaw) (SNP)
 Allan, Alasdair (Na h-Eileanan an Iar) (SNP)
 Arthur, Tom (Renfrewshire South) (SNP)
 Baker, Claire (Mid Scotland and Fife) (Lab)
 Balfour, Jeremy (Lothian) (Con)
 Beamish, Claudia (South Scotland) (Lab)
 Beattie, Colin (Midlothian North and Musselburgh) (SNP)
 Bowman, Bill (North East Scotland) (Con)
 Briggs, Miles (Lothian) (Con)
 Brown, Keith (Clackmannanshire and Dunblane) (SNP)
 Burnett, Alexander (Aberdeenshire West) (Con)
 Cameron, Donald (Highlands and Islands) (Con)
 Campbell, Aileen (Clydesdale) (SNP)
 Carlaw, Jackson (Eastwood) (Con)
 Carson, Finlay (Galloway and West Dumfries) (Con)
 Chapman, Peter (North East Scotland) (Con)
 Coffey, Willie (Kilmarnock and Irvine Valley) (SNP)
 Cole-Hamilton, Alex (Edinburgh Western) (LD)
 Constance, Angela (Almond Valley) (SNP)
 Corry, Maurice (West Scotland) (Con)
 Crawford, Bruce (Stirling) (SNP)
 Cunningham, Roseanna (Perthshire South and Kinross-shire) (SNP)
 Davidson, Ruth (Edinburgh Central) (Con)
 Denham, Ash (Edinburgh Eastern) (SNP)
 Dey, Graeme (Angus South) (SNP)
 Doris, Bob (Glasgow Maryhill and Springburn) (SNP)
 Dornan, James (Glasgow Cathcart) (SNP)
 Dugdale, Kezia (Lothian) (Lab)
 Evans, Mairi (Angus North and Mearns) (SNP)
 Ewing, Annabelle (Cowdenbeath) (SNP)
 Ewing, Fergus (Inverness and Nairn) (SNP)
 Fabiani, Linda (East Kilbride) (SNP)
 FitzPatrick, Joe (Dundee City West) (SNP)
 Forbes, Kate (Skye, Lochaber and Badenoch) (SNP)
 Fraser, Murdo (Mid Scotland and Fife) (Con)
 Freeman, Jeane (Carrick, Cumnock and Doon Valley) (SNP)
 Gibson, Kenneth (Cunninghame North) (SNP)
 Gilruth, Jenny (Mid Fife and Glenrothes) (SNP)
 Golden, Maurice (West Scotland) (Con)
 Grahame, Christine (Midlothian South, Tweeddale and Lauderdale) (SNP)
 Grant, Rhoda (Highlands and Islands) (Lab)
 Gray, Iain (East Lothian) (Lab)
 Greene, Jamie (West Scotland) (Con)
 Hamilton, Rachael (South Scotland) (Con)
 Harper, Emma (South Scotland) (SNP)
 Harris, Alison (Central Scotland) (Con)
 Haughey, Clare (Rutherglen) (SNP)
 Hepburn, Jamie (Cumbernauld and Kilsyth) (SNP)
 Hyslop, Fiona (Linlithgow) (SNP)
 Johnson, Daniel (Edinburgh Southern) (Lab)
 Kerr, Liam (North East Scotland) (Con)
 Kidd, Bill (Glasgow Anniesland) (SNP)
 Lamont, Johann (Glasgow) (Lab)
 Lennon, Monica (Central Scotland) (Lab)
 Lindhurst, Gordon (Lothian) (Con)
 Lochhead, Richard (Moray) (SNP)
 Lockhart, Dean (Mid Scotland and Fife) (Con)
 Lyle, Richard (Uddingston and Bellshill) (SNP)
 MacDonald, Angus (Falkirk East) (SNP)
 MacDonald, Gordon (Edinburgh Pentlands) (SNP)
 MacGregor, Fulton (Coatbridge and Chryston) (SNP)
 Mackay, Derek (Renfrewshire North and West) (SNP)
 Mackay, Rona (Strathkelvin and Bearsden) (SNP)
 Macpherson, Ben (Edinburgh Northern and Leith) (SNP)
 Maguire, Ruth (Cunninghame South) (SNP)
 Martin, Gillian (Aberdeenshire East) (SNP)
 Mason, John (Glasgow Shettleston) (SNP)

Matheson, Michael (Falkirk West) (SNP)
 McAlpine, Joan (South Scotland) (SNP)
 McArthur, Liam (Orkney Islands) (LD)
 McDonald, Mark (Aberdeen Donside) (SNP)
 McKee, Ivan (Glasgow Provan) (SNP)
 McKelvie, Christina (Hamilton, Larkhall and Stonehouse) (SNP)
 McMillan, Stuart (Greenock and Inverclyde) (SNP)
 Mitchell, Margaret (Central Scotland) (Con)
 Mountain, Edward (Highlands and Islands) (Con)
 Mundell, Oliver (Dumfriesshire) (Con)
 Neil, Alex (Airdrie and Shotts) (SNP)
 Paterson, Gil (Clydebank and Milngavie) (SNP)
 Robison, Shona (Dundee City East) (SNP)
 Ross, Gail (Caithness, Sutherland and Ross) (SNP)
 Rumbles, Mike (North East Scotland) (LD)
 Scott, John (Ayr) (Con)
 Scott, Tavish (Shetland Islands) (LD)
 Simpson, Graham (Central Scotland) (Con)
 Smith, Elaine (Central Scotland) (Lab)
 Smith, Liz (Mid Scotland and Fife) (Con)
 Smyth, Colin (South Scotland) (Lab)
 Somerville, Shirley-Anne (Dunfermline) (SNP)
 Stevenson, Stewart (Banffshire and Buchan Coast) (SNP)
 Stewart, Kevin (Aberdeen Central) (SNP)
 Sturgeon, Nicola (Glasgow Southside) (SNP)
 Swinney, John (Perthshire North) (SNP)
 Thomson, Ross (North East Scotland) (Con)
 Todd, Maree (Highlands and Islands) (SNP)
 Tomkins, Adam (Glasgow) (Con)
 Torrance, David (Kirkcaldy) (SNP)
 Watt, Maureen (Aberdeen South and North Kincardine) (SNP)
 Wells, Annie (Glasgow) (Con)
 Wheelhouse, Paul (South Scotland) (SNP)
 White, Sandra (Glasgow Kelvin) (SNP)
 Whittle, Brian (South Scotland) (Con)
 Yousaf, Humza (Glasgow Pollok) (SNP)

Against

Finnie, John (Highlands and Islands) (Green)
 Greer, Ross (West Scotland) (Green)
 Harvie, Patrick (Glasgow) (Green)
 Johnstone, Alison (Lothian) (Green)
 Ruskell, Mark (Mid Scotland and Fife) (Green)
 Wightman, Andy (Lothian) (Green)

The Presiding Officer: The result of the division is: For 104, Against 6, Abstentions 0.

Motion agreed to,

That the Parliament agrees that the International Organisations (Immunities and Privileges) (Scotland) Amendment Order 2017 [draft] be approved.

Multiple Sclerosis Awareness Week 2017

The Deputy Presiding Officer (Christine Grahame): The next item of business is a members' business debate on motion S5M-04021, in the name of George Adam, on multiple sclerosis awareness week. The debate will be concluded without any question being put.

Motion debated,

That the Parliament notes that MS Awareness Week 2017 will run from 23 April to 1 May; welcomes this opportunity to put multiple sclerosis (MS) on the agenda and raise awareness and understanding of the neurological condition that affects more than 11,000 people in Scotland, including in Paisley; celebrates the significant role that health professionals play in helping people with MS manage their condition, in particular the MS-specialist nurses who often provide frontline support; understands that, due to factors such as improved diagnosis, consensus around early treatment, and increased monitoring requirements, the role of the nurse has changed significantly over the years; believes that the provision of these nurses is vital to ensuring that there is appropriate support for people across the country; is concerned that some areas however might not have adequate provision; commends charities such as the MS Society Scotland and the MS Trust for championing the cause of people living with the condition, and notes the calls for members of all parties to get loud for tackling MS during the awareness week.

17:10

George Adam (Paisley) (SNP): I welcome members to what has become known as Stacey's Scottish Parliament MS awareness week debate. My colleague Gordon MacDonald says, "You say that every year." That is because I have been happily married for 21 years and I know my place.

Last year, we were not able to have a debate on the subject because of the Scottish Parliament elections, but the cross-party group on MS has always been extremely focused. Ever since it was first convened, we have set goals for what we can achieve. Over the years, we have debated many issues that affect people who live with MS. In recent years, we have debated the devastating impact of the Tories' so-called welfare reform, through which people with MS have been singled out by the Westminster Government.

This year, I want to talk about the work of specialist MS nurses, who are a very important support for everyone who has MS—indeed, many cite their MS nurse as their key contact for treatment, care and support. Before I go on to talk about their work in more detail, I want to talk about multiple sclerosis in general and how it is an important part of the lives of Stacey and me.

As I have said in just about every debate that we have had on the subject, MS does not define

Stacey and me as a couple. It is true that Stacey has had an incurable condition since she was 16 years old, but no one talks about her as “that woman with MS”. In fact, the opposite is true. Recently, Stacey has explained to people that she is a vulnerable adult. Technically, she is, but to her disappointment, people whom she knows and colleagues tend to laugh when she mentions it, because no one sees her that way. No matter how bad her disability gets, no one really sees her as a vulnerable adult. I know that that irritates Stacey, but I think that it is a great compliment to her fighting spirit. She never backs off from a challenge or—unfortunately for me—a fight.

On 9 June this year, Stacey and I will have been married for 21 years. I am led to believe that the local bookies in Paisley gave odds against us lasting six months, but here we are—we proved them all wrong. On the day of our marriage, Stacey walked down the aisle; today, she is more likely to be seen buzzing about the Parliament in her scooter. Life has changed, but her spirit has not.

On that day 21 years ago, my mother-in-law, Rosemary, said that I was always a very likeable young man. *[Interruption.]* Mr Dey has not heard the punchline yet. She said that I was not what she wanted for her daughter, but that I was a very likeable young man. I probably did not help on that occasion by giving her absolute pelters in my groom’s speech.

How have we dealt with all the challenges that we have faced over the years? Well, as the old song goes, “Love grows where my St Mirren goes.” I will probably pay for that later, because my mother-in-law is called Rosemary. We have taken on board the mantra “One town, one team” to such an extent that, along with Gordon Scott and 1,300 other fans, we bought the team. We might have had to deal with the many ups and downs of that great team, but it is a love that we both share. The tie that I am wearing is the limited edition anniversary tie that celebrates St Mirren’s great Scottish cup win 30 years ago. On Saturday, we will both be at the Paisley 2021 stadium. It is probably our friends from football who have noticed the biggest difference in Stacey’s condition. We have gone from sitting among all our friends in the stadium to having to ensure that we can get access for Stacey’s wheelchair—but that is a completely different issue for a different debate on another day.

As Stacey’s condition has progressed, her reliance on her MS nurse has become greater. Multiple sclerosis is such a complex condition that everyone’s symptoms are different, so it is necessary to have the specialist care that an MS nurse provides. There are always new treatments available, but unless a person has access to that

expertise, they may miss out. The MS nurse can monitor a person’s condition and help to ensure that, when they meet their consultant, they get more out of the meeting.

The current problem is that there are not enough MS nurses in Scotland. There are 11,000 people in our country living with MS, and they need that specialist support. The MS Trust recommends a sustainable caseload of 358 people with multiple sclerosis per full-time specialist nurse. At present, only five of the 11 mainland health boards are deemed to have sustainable MS specialist nursing provision. Across Scotland, that is currently 25.9 full-time equivalent MS specialist nurses. For once I can say that Greater Glasgow and Clyde NHS Board has a good record—as the MS Society has said, it has recommended a sustainable model of MS specialist nurse case load that is actually more than that board currently needs. However, that is not the case in other areas.

The very idea of the MS nurse plays into the important role of self-management policies that the Scottish Government promotes. The MS nurse helps to reduce acute admissions through monitoring and understanding of the condition. The situation has changed dramatically since Stacey was diagnosed 28 years ago. The Scottish multiple sclerosis register’s national report in 2016 showed that 63 per cent of newly diagnosed patients had contact with an MS nurse specialist within 10 days of their diagnosis. That provision can be patchy throughout Scotland, which raises concerns about capacity in MS nursing provision and the levels of support that MS nurses are given to do their job. I understand that neurological standards are being reviewed at the moment, and I look forward to the MS Society playing a leading role in helping to shape future provision, because its expertise will be vital.

One problem area is NHS Lanarkshire, which recently had only one MS specialist nurse to deal with 1,200 patients—well in excess of the recommended 358 patients. She has since moved on to another role—within the MS community, luckily—and works with Revive MS Support in Glasgow. However, that leaves no provision for anyone in Lanarkshire who has MS. That situation must be addressed. NHS Lanarkshire, for its part, has been unhelpful when the cross-party group has asked questions about updates on the current position. In NHS Lothian, there are two MS nurses who have a caseload of 1,200 patients. That is still too much for them, but it is better than the situation in NHS Lanarkshire.

When she was asked in a recent MS Society Scotland video what her MS nurse means to her, Stacey said: “She helps me, she gives me valuable advice and we have a laugh when we

shouldn't." Those specialist nurses are a resource that we must keep, because they will in the long term save our national health service money. They will continue to work with families who are living with MS and help to manage that horrible condition by ensuring that people with MS get access to disease-modifying drugs—DMDs—that will improve their quality of life.

As I said, MS affects more than 11,000 people in Scotland; it is often painful and exhausting and can cause problems with how people walk, move and see. With Stacey's condition, I think that I have mentioned that two weeks after we were married, she turned round to me one day and said, "George, I can see two of you at the moment." I said, "Life just gets better and better for you, Stacey." MS can also affect how people think and feel.

In MS, a coating around the nerve fibres called myelin is damaged; it is a condition that the person will have for the rest of their life. There is no cure, but the research is progressing fast and there is still hope that one day a cure will be found. I think that that will happen a long way into the future, but that will not stop Stacey and me living our lives. We will carry on fighting and arguing—I am sorry: that was not in the script. We will carry on for the rest of our lives, and for the next 21 years, watching St Mirren, crying about St Mirren, arguing about St Mirren, along with spending time with our family, our children and our beautiful grandkids. No matter what life throws at us, it will not get us down. We both have far too much to be happy about. *[Applause.]*

The Deputy Presiding Officer: Thank you, Mr Adam. You are a brave man—your wife is in the gallery listening to you and taking notes. We move to the open debate.

17:19

Fulton MacGregor (Coatbridge and Chryston) (SNP): It is great that we have this opportunity today to talk about MS during MS awareness week, and I thank George Adam for bringing this members' business debate to the chamber. I know how much the issue means to him and his family, and it is clear from what he has said, here and to others, that he is recognised across the country as a champion for people with MS. I first met George long before I was an MSP, when he came to a meeting in Coatbridge. In his speech that night, he talked about MS and what he was doing about it in Parliament. It is for him a long-standing issue that he continues to take forward.

As George has said, MS is a lifelong neurological condition that affects more than 11,000 people in Scotland, with 600 new cases

being identified each year. It is vital that we educate ourselves about the impact that the condition has on sufferers and their families. MS treatments and diagnoses have evolved and advanced in recent years, which has changed how we view and treat MS. However, the condition is still unpredictable; symptoms vary from day to day and from person to person. People who are newly diagnosed or who are struggling with changes in their symptoms can experience a confusing and lonely time.

MS is a condition that has a particularly high incidence rate in Scotland. The reason for that is still unknown, although many theories are circulating, including its being because of a lack of vitamin D. In any case, Scotland should take the lead in tackling the issue.

As other members will, I take this opportunity to acknowledge the fantastic and invaluable work that health professionals play in aiding people with MS and helping them to manage the condition. That is especially the case with the MS specialist nurses who provide front-line support, about whom George Adam talked. However, I will spend what remains of my speech talking about people in my local area who have been affected by MS.

A gentleman whom I have known for many years—Mr Clive Whiteside, who I believe is in the gallery—received his diagnosis in 2002. He probably will not mind my saying that my earliest memories of him are of him chasing me and my friends when we were kids because we were playing football on the wee bit of grass next to his house. When he received his diagnosis, Clive was immediately put in touch with an MS nurse, who was able to give him the advice and support that he needed to cope with the shock, and to explain to him the reality of the condition. That nurse is still Clive's first port of call on living with MS. The nurse was able to provide helpful and vital networks for Clive by putting him in touch with other people who are living with MS. That nurse became a lynchpin in his life, along with his wife, Linda.

Clive received counselling at St Andrew's Hospice in Airdrie and got to know the nursing staff well. Some of the nurses discussed setting up a group locally to support MS sufferers, and the head nurse, Anne Marie Toland, asked Clive whether he would like to become involved with it. Both Clive and Linda were keen to do that, and started to gauge what support there would be for it by leafleting doors, speaking with family and friends, and using social media and the local press. Two pilot meetings of the group were set up in December 2012 that a few people attended, so it was decided that the group should meet monthly. Further work was done to raise awareness of the group; they nearly ran out of

chairs for its third meeting. The group continued to meet and became the St Andrew's Hospice MS self-support group, or SAMS, in early 2013. Although independent of St Andrew's Hospice, the SAMS group has its support and blessing, and continues to be a success.

Another interesting part of Clive's story concerns Tim the MS bear, who some members might know about from social media. Tim was gifted to Clive and Linda, and rather than have him sitting about the house, Clive decided to put him on social media to raise MS awareness. Tim went out and about with Clive and Linda, and his adventures were posted on social media. Clive did not anticipate the following that Tim would generate; he started to receive messages about him from other MS sufferers and their families, including a lady in America, who got in touch about her husband, who was extremely unwell, and said that Tim had made her husband laugh. She then shared her story with Clive. Others did the same, and Tim has become very successful in breaking down barriers and opening up discussion about the reality of living with MS. Clive tells me that when Tim is photographed on his travels, people often ask "What's the bear all about?" and that provides the opportunity to discuss MS.

The Presiding Officer is indicating that I should finish my speech. I was going to speak about MS specialist nurses in NHS Lanarkshire, which George Adam mentioned, but I know that other members will speak about that in their speeches. Needless to say, on behalf of Clive Whiteside and others, I will continue to fight, along with George Adam and other MSPs, for more MS specialist nurses in Lanarkshire. NHS Lanarkshire has now committed to providing two MS nurses, but I hope that it will do more and commit to having at least three, which is what is needed.

The Deputy Presiding Officer: Thank you, Mr MacGregor—Many members wish to speak in the debate.

17:24

Miles Briggs (Lothian) (Con): I, too, congratulate George Adam on securing today's debate and I pay tribute to his consistent campaigning on issues around MS and his passion for this important subject. In addition, I thank the MS Society Scotland for its useful briefing ahead of the debate.

I agree with George Adam that we should commend the role of all health professionals who are involved in supporting people with MS, particularly MS specialist nurses; and I share his concern that there are simply not enough MS specialist nurses in Scotland right now.

In my Lothian region, the two MS nurses have to manage a combined case load of more than 1,200 individuals. The MS Trust recommends a sustainable case load of 358 people with MS per whole-time nurse, but Lothian's nurses are having to deal with almost twice as many patients. That means that too few MS patients who are newly diagnosed with the condition can be seen by a specialist nurse within the target contact time of 10 days after diagnosis. That is concerning and unacceptable, and it is why I have called on the Scottish Government to undertake a review of all specialist nurses and nursing teams in Scotland.

As George Adam said, we need a major improvement in enhanced specialist nursing capacity and care across Scotland. I hope that, in responding to the debate, the Minister for Public Health and Sport will outline whether the Scottish Government will commit to a specialist nursing review in Scotland.

MS nurses play such a vital part in allowing MS sufferers to self-manage their condition, and the nurses' monitoring and specific understanding of individual patients can help to reduce acute admissions. If we invest in specialist nurses, we can make savings by reducing the pressure on the acute care in hospitals that patients sometimes need.

I also want to highlight some of the world-class research into MS that is being conducted here in Edinburgh at the University of Edinburgh's centre for MS research, which George Adam mentioned. The centre was founded in 2007 with funding from the MS Society, which was renewed for a further five years in 2015. The research by academics such as Dr Veronique Miron has the potential to increase vastly our understanding of MS, provide better modelling of the condition and help to find new and effective treatments. The work is vital and I wish all the academics and researchers who are involved every success. We understand the cause of MS, and although we may be some way off finding a cure, research is progressing fast. I am pleased that Edinburgh and Scotland are at the global forefront of that fantastic work.

Before closing, I wish to talk about the potential benefit that the implementation of Frank's law would have for MS sufferers in Scotland who are under 65. As with dementia and other life-limiting, degenerative conditions, it seems patently unfair that the current care support system actively discriminates against people with these illnesses who are under 65. I hope that MSPs from all parties, including Scottish National Party members, will get behind the Frank's law campaign and support me in pressing the Scottish Government to put it into practice.

I welcome this important debate and thank George Adam for bringing it to the chamber. Many

of my constituents in Lothian are involved in MS awareness week and I wish them success with the awareness-raising and fundraising efforts that they are undertaking across the Lothian region.

17:27

Clare Haughey (Rutherglen) (SNP): Sharon is a woman with the same responsibilities as many of us. She works—she is a nurse—and, like many parents, she has to balance home life with work. She is also a cherished daughter, wife to her husband and mother of two wonderful children. But Sharon has MS, and that makes everything so much harder. She is in the public gallery today to watch this debate.

Although I have known Sharon for many years, this is the first time that she has told me what it is really like to live with MS. She said:

“The biggest issue I have found is people’s perception of what MS is. MS is an invisible illness, and I’ve had people say to me, ‘You don’t look disabled’, as I don’t use a wheelchair. They always expect you to be using a wheelchair. I suppose it’s hard enough, knowing that I have a disease that does significantly impact on my life and my family’s, but when other folk don’t see an obviously unwell person, they don’t recognise that the level of support required can still be significant.

What’s also difficult is that my family are always alert to my condition, and look for signs and symptoms that might mean my MS is getting worse.”

Sharon was diagnosed when her son was four years old. He has grown up always knowing that mum cannot do certain things. She has mobility issues and cannot always do the usual, simple things that a mum wants to do with her children, such as playing in the park or running after a ball. Sharon can struggle with things that other mums are lucky enough not to struggle with. Not only is that physically painful, but it takes an emotional toll, too.

Sharon also spoke about her experience of fatigue and “brain fog”, as she puts it, which is where concentration and focus become extremely difficult—that is all too common for those with MS. She has days when she feels fine, but also days when she can hardly move or focus. Most people have a reserve of energy that is used up throughout the day—especially for those juggling a home life and a job. However, for those with MS, that reserve can run out far more quickly than most people appreciate.

Sharon also feels pressure about benefit reviews and fitness assessments, and she is fearful that she will lose the blue badge that is vital for her work and her private life.

We should all work to make the lives of people like Sharon easier, not harder. MS affects 11,000 of our fellow Scots. As we have heard, it is a condition that impacts them not just physically, but

mentally and socially. We in this chamber should listen to the voices of those, like Sharon, who live with MS, and we should learn what they need to make their lives easier.

I, too, am concerned that NHS Lanarkshire, which covers my constituency, is currently without an MS nurse. To have had a service based on one individual is not sustainable, as was evidenced when the one and only MS nurse in the area resigned her post. While I have been reassured that NHS Lanarkshire is looking to recruit two nurses, with the second post initially being funded by the MS Trust, that still leaves a gap in provision in Lanarkshire until those nurses are in place. However, both nurses will be paid at band 6, while MS Trust nurses throughout the UK are paid at band 7. In fact, NHS Lanarkshire is the only Scottish mainland NHS board that does not employ band 7 MS nurses.

The previous MS nurse in Lanarkshire had a case load of around 1,100, as we have already heard, while the MS Society says that a case load of around 350 is more realistic. Having two nurses in the service will still not be enough to meet the needs of people with MS in Lanarkshire, but it is at least an improvement.

For MS nurses to have career progression and for there to be succession planning in the field, health boards must look at their skills mix in such services and make them sustainable, so that they continue to be able to provide the service that those with MS deserve.

The Deputy Presiding Officer: Thank you very much. Ms Haughey, if I looked a bit distracted it was because a member had not pressed their request-to-speak button and they have now done so. I am not naming you, Mr Finnie. I call Monica Lennon, to be followed by Mr Finnie, who has now pressed his button.

17:32

Monica Lennon (Central Scotland) (Lab): I begin by thanking George Adam and paying tribute to him for the way in which he has championed the MS community. Sometimes, it feels as though MS awareness week happens more than once a year—although Paisley and St Mirren get an awareness day on every day that George Adam is in Parliament.

Yesterday, George Adam and I had a nice chat, ahead of this debate, because, like him, Clare Haughey, Fulton MacGregor and others, I am very concerned about the picture in NHS Lanarkshire. That is not because of what has emerged in the *Daily Record* this week, which was very upsetting for me, because Emma Smith is a friend.

The Deputy Presiding Officer: I have a wee thing about props.

Monica Lennon: I will put the newspaper down.

It has been well known for some time that to have only one nurse in NHS Lanarkshire with a case load of over 1,200 patients is not sustainable, safe or desirable, by anyone's standards. I am among the first to defend the NHS—not just the people in the front line, but the big bosses too, because they have difficult jobs to do. However, I was very upset, on behalf of constituents of mine, who were themselves very upset that, in making remarks to try to reassure the public that it is taking every step possible, the NHS spokesperson had a go and accused unnamed people of scaremongering and raising anxiety. After that, I soon received phone calls from MS patients in my area.

I emailed NHS Lanarkshire, and it has promptly replied. I want to say this so that any patients who have been speaking out and speaking to MSPs know that NHS Lanarkshire says that the comment was not aimed at them and that it apologises to any patients who have been offended.

Several patients have been speaking to me, and they are content for me to share their testimonies, but I will not do that and I will not name them. We have seen one newspaper story and I do not want people to feel concerned that they cannot speak out.

It is clear to me that everyone in Lanarkshire who has been a patient of the nurse who recently resigned has nothing but the highest praise for her. We certainly wish her well and we are pleased that she will remain in the MS community.

However, it is not acceptable that things got to this stage. There seems to have been an awful lot of defensiveness and secrecy from NHS Lanarkshire. I have talked to the MS Society a few times this week, because it has a stall in the Parliament, which is great, and I understand that people are still concerned about the issue. I hope that in her closing speech the minister will pick up on some of the genuine concerns and anxieties that people have.

Of course, this week is about celebrating MS nurses and raising awareness. Other members have done that effectively. We need to see the person, rather than just the illness. This morning, it was fortunate that the MS Society stall was right outside a meeting room in the garden lobby, because I had to greet—at quite short notice—a group of young people and their teachers who were visiting from Sweden. The students asked me about a typical day in the Parliament and what I was doing today, and I was able to point to the MS Society stall and explain that this is an open

Parliament, where people can come and talk to MSPs and lobby them, and where we can come together to have a debate such as this one in which we celebrate the fantastic work that our MS nurses do.

We need more MS nurses. I hope that the minister will take that on board, because 29.5 full-time equivalents is simply not enough when we consider the scale of the challenge that faces MS patients in Scotland.

I thank George Adam again for bringing this debate to the chamber. I hope to be able to contribute to such debates in years to come and I wish George and Stacey a happy anniversary, when it comes.

The Deputy Presiding Officer: I call John Finnie. Please do not take my earlier remarks badly, Mr Finnie. I forgot to put my card in the console, so I did worse than you.

17:36

John Finnie (Highlands and Islands) (Green): Thank you, Presiding Officer. The one way to guarantee that the sun will go away is to move out of the sun—that is why I had moved seats. I apologise for that.

I congratulate George Adam on a number of things: on the motion; on his role in the cross-party group on MS, which works effectively with the assistance of the MS Society; on his promotion of the positive aspects of dealing with the pernicious thing that is MS; and on his generally positive outlook, which I imagine is an essential characteristic of the St Mirren fan. I wish him—if not his team—very well.

The motion

“welcomes this opportunity to put ... MS ... on the agenda”.

To many people in the chamber, and to about 11,000 people in Scotland, their carers and loved ones, MS is never off the agenda. I had forgotten that we did not have a debate last year, because such debates seem to have been a regular feature, but I have been reflecting on what might have happened to people in the past year, given the undulating nature of the condition, which George described very well.

Presiding Officer, if I were able to use a prop, I would hold up a newspaper with the headline:

“MS sufferer slams ‘awful’ benefits chiefs who axed her Motability car in favour of £65,000 taxis”.

There is no doubt that the welfare reform that the cruel and heartless Tory Government at Westminster has foisted on us has had an impact on everyone, not least the woman in the article, whose car was one of the 800 Motability cars that are being taken away every week. The decision

was reflected on, and the same Government department ruled that the woman qualified for help to get to her work, so the Government is now paying £19,000 a year for taxis. That is the economics of the madhouse. The decision is deeply offensive to the woman in question, and it shows a heartlessness that we really do not want to see.

What we want to see, of course, is independence and mobility. There are many practical issues in that regard, with which I deal regularly, as I am sure that other members do. I was keen to support the National Union of Rail, Maritime and Transport Workers case against driver-only operation and the loss of the safety-critical train guard, particularly when I heard that wheelchair-bound people are often carried beyond their stop because there is no assistance for them. The problem was eloquently explained to me by Gale Falconer, a friend in the Highlands who is an MS sufferer. In a meeting, she described the frustrations of travel, the planning that needs to go into it and the advice and support that are needed.

I am also dealing with someone with mobility issues in relation to the repeated failure of a lift at a ferry terminal. If we want to take a collaborative approach to the issue, we need to get such small things sorted. There are also challenges to do with bus travel, which are well known.

Although I have very limited time, I also want to talk about the challenges of recruiting specialists, be they neurologists or MS nurses. That has been touched on with regard to the situation in Lanarkshire. I am particularly concerned about the retention of specialist staff given the threat posed by Brexit.

There is a lot to be very positive about. I will not reiterate what was said in this afternoon's carers debate, but there is a lot of common ground. Setting aside the partisan nature of some of the amendments that were lodged for that debate, there is a lot of recognition of the real benefit that carers provide.

The motion for this debate commends the charities, MS Society Scotland and the MS Trust, and I know about the good work that is happening across my area. In particular, I am aware of some innovative work in Moray. In fairly recent times I have visited MS therapy centres in Inverness, Kirkwall, Oban, Lochgilphead and Portree. There is much to be positive about and there are a lot of challenges, but people who suffer from MS need to know that the people in the chamber give them their unqualified support.

Once again, I thank George Adam for lodging the motion.

The Deputy Presiding Officer: Four members still wish to speak. I am therefore minded to accept

a motion without notice, under rule 8.14.3, to extend the debate by up to 30 minutes. I invite George Adam to move a motion without notice.

Motion moved,

That, under Rule 8.14.3, the debate be extended by up to 30 minutes.—[George Adam]

Motion agreed to.

17:41

Ben Macpherson (Edinburgh Northern and Leith) (SNP): I, too, warmly congratulate my colleague George Adam on his motion and on securing this important debate. I also send warm congratulations—I am sure that fellow members would, too—to Dean Reilly, who ran the London marathon on Sunday for the MS Society under his campaign, Dean vs MS. He completed the marathon and raised significant funds, and we should all send him our congratulations.

During MS week we all have the chance to reflect on the effects of MS, with its 11,000 sufferers in Scotland; to think about what more action can be taken to help our constituents who suffer MS to manage the symptoms that they deal with on a daily basis; and to think, collectively and collaboratively, about how we can support initiatives on finding a cure for the disease.

Fellow members have already raised the point about support and funding for MS specialist nurses. George Adam and Miles Briggs made points about NHS Lothian. The MS Society points out that NHS Lothian has the second-highest MS patient to MS specialist nurse ratio in Scotland, and the MS Trust has highlighted NHS Lothian's need for two additional MS nurses to achieve a sustainable, ideal patient case load ratio. I wish to draw attention to and raise awareness of that point.

Most significantly, I want to support and raise awareness of local grass-roots MS organisations throughout Scotland. I draw particular attention to the MS Therapy Centre Lothian, which is based in Leith in my constituency. I should declare an interest, in that I am patron of the charity, which has supported individuals with MS for as long as I have been alive—since 1984. Centres such as the MS Therapy Centre Lothian do significant, important and meaningful work to support people living with MS by providing a range of support and services across different aspects of their lives. For example, the centres provide oxygen treatment, also known as hyperbaric oxygen therapy, using oxygen tanks. They also provide physiotherapy, yoga, pilates and other ways of helping those who have MS with self-management.

There is increased demand on some of the statutory services that support individuals with MS,

and those local grass-roots organisations play a key role. They include organisations in the third sector and the not-for-profit sector. It is important to raise awareness of the great work that they do and to inquire whether we could do more to support them.

Finally, it is important to emphasise and celebrate the great work that is going on at the University of Edinburgh in working towards finding a cure for the disease. Miles Briggs alluded to that. The laboratory and clinical research that it does is pioneering and world leading. As we all work towards helping individuals, constituents and individuals whom we know who suffer from the disease, we are also trying to work towards a scenario in which we do not just manage the symptoms of this awful disease, but have medical solutions to cure it and alleviate the suffering completely.

17:45

Donald Cameron (Highlands and Islands) (Con): I thank George Adam for lodging the motion and allowing us to debate MS in the chamber.

As a member of the cross-party group on MS, I am keenly aware of George Adam's role in convening that group, which is a truly cross-party one, and his long-standing interest in MS. I can give witness to the fact that he is ably supported by Mrs Adam. I am also keenly aware of the work of the MS Society Scotland, which acts as the secretariat of the group and has done sterling work in promoting awareness of MS and what we can do, not least this week.

In many debates, especially those about health conditions, members often describe their personal involvement with a certain condition. I find that, given that their contribution is coloured by private or family experience, it is often—or almost always—all the more powerful. In that vein, I want to talk about my father.

My father has suffered from MS for 32 years. He learned that he had the disease in the mid-1980s, when knowledge of the condition was still at an early stage. Luckily, he has been cared for well and, although the disease's progression has been steady, it has been slow. He was diagnosed at the age of 40, which is my age now, so I find myself thinking about him a lot in this debate. I can just about remember him without the disease. I remember playing football in the park with him and having a race with him, but my memory of him for almost all of my life is of his living with MS. I pay tribute to his courage in living with MS and to his positive and optimistic attitude. He has never let it get him down, and I have never heard him complain.

What have I learned from that experience? I have learned that, like other diseases, MS of course affects the person who has it, but it also affects other members of the family. I have seen at first hand the effects on my father, his movement and walking and, especially as he gets older, the complications that it has with other conditions or sicknesses. I have seen the difficulties that he faces in everyday life in filling a car with petrol or travelling on the trains in Scotland. I have seen at first hand that having MS in a rural setting provides its own challenges. Ben Macpherson talked about grass-roots MS organisations. I could not agree with him more. The MS Society group in Lochaber is the one that I know best.

As the MS Society briefing for NHS Highland says, one of the issues is long travel times involved in reaching outlying areas. For example, the MS specialist nurse in Argyll and Bute splits her post between MS and Parkinson's care. She will have a case load of 150 people with MS. That case load for a 0.5 specialist is called a sustainable one, but that assumes that the nurse has three days of administrative support. Such a nurse also needs professional development.

There are other pressures. Eighty per cent of respondents to the MS Society's survey are still seen in hospital, despite the move to care in the community, which we all support.

The need for neurological conditions to move up the list of priorities for integration joint boards has been raised in the cross-party group. Integration is too often about governance, structures, finance and strategy. We must quickly also start to concentrate on specific conditions and make integration work in practice.

MS affects 11,000 people in Scotland and three times as many women as men. It remains a huge issue that I want to stay close to while I am an MSP.

I have great pleasure in supporting the motion. The issue is very close to my heart. I have grown up with the disease, lived with it and watched it, and I now find myself explaining to my children why their grandfather cannot walk. He is unstintingly optimistic and enjoys life to the full. I thank him publicly for the example that he has set me in life. He has never been defined by MS. He lives with it, but I always like to think that he has defeated it.

17:49

Liam McArthur (Orkney Islands) (LD): I join others in thanking George Adam for again giving Parliament the opportunity to raise awareness of MS; to acknowledge the very particular way that the disease affects the 11,000 sufferers in Scotland and its effect on their family, friends,

colleagues and others around them; and to pay tribute to the health professionals and many others who provide the necessary care and support.

Back in 2013, I led a similar debate on MS. St Mirren probably had a crucial mid-week fixture that evening, but there was good reason for me to lead the debate and to take part in many debates on the subject over the years. That is because Orkney has the dubious honour of having the highest incidence of MS not just anywhere in Scotland but anywhere in the world. When I led that debate in 2013, I referred to research that had been carried out by teams at the University of Edinburgh and the University of Aberdeen. At that stage, the incidence of MS in Orkney was found to have almost doubled since the 1980s and, since then, it has continued to rise. There are now almost 100 sufferers in a population of just over 20,000, with a particularly high rate among women. The reason for that is not yet abundantly clear. As Dr James Wilson, who himself is an Orcadian and who leads the research at the University of Edinburgh, has said,

"These findings may reflect improved diagnostic methods, improved survival or rising incidence."

No doubt, that is a plea that more research is needed, and indeed it is.

I am pleased that the debate has focused on the critical role that is played by health professionals, and in particular MS nurses, in providing support. In Orkney, that is Moira Flett, or at least 40 per cent of Moira Flett, in terms of full-time equivalence. The role is an invaluable and wide-ranging one that involves initiating and monitoring treatment for people with relapsing forms of MS, providing information and support on how best to manage MS, co-ordinating care and providing vital emotional support. That is hugely appreciated. One of Moira's patients has said:

"My MS nurse is great because she listens carefully to any problem big or small and helps come up with the strategies to make a life with MS that little bit easier and manageable for myself and my family".

George Adam talked about gaps in provision across the country. I am pleased to say that NHS Orkney, working closely with colleagues in Aberdeen, appears to be meeting the MS standard for service provision. That is partly due to the impressive development of telehealth over the years. However, that is not to say that there is not more that can and should be done. According to the MS Society, to which I am grateful for its briefing, much more can be done in allowing MS sufferers in Orkney greater ability to participate in physical activity and exercise opportunities. I will be working with Moira and others locally to help to deliver that.

I want to pay tribute to someone else this evening. In past debates, I have talked about the fantastic work that was done by Angela Monteith on behalf of the MS community in Orkney and more generally through her work with the MS Society. Sadly, Angela, who was an MS sufferer, recently passed away. She was a stalwart in raising money for and awareness about MS, and she never missed an opportunity to brief me on the latest issues. A particular example that springs to mind was when she pointed to the specific challenges for MS sufferers and their families in an island community in getting together and providing support for each other, given the logistical challenges. Angela is greatly missed, but she has left a lasting legacy. No doubt, that is in part played out in the decision by pupils at Stromness academy and Westray junior high school to donate £3,000 from each school through the excellent youth and philanthropy initiative—about which we should hear more in the Parliament—to support MS sufferers and the MS Society.

I thank George Adam for allowing Parliament to get back to having an annual debate on the issue and to playing a role in raising awareness of MS, recognising the efforts of all those who are involved in supporting people with MS and, most important, taking steps to meet the needs of MS sufferers and their families, friends and colleagues wherever they may live in Scotland.

The Minister for Public Health and Sport (Aileen Campbell) *rose—*

The Deputy Presiding Officer: That just shows your enthusiasm, minister, but I call Clare Adamson.

17:54

Clare Adamson (Motherwell and Wishaw) (SNP): I thank George Adam for securing the debate, if for no other reason than that it has allowed me to play a small part in the George and Stacey show.

I commend the work of the cross-party group on MS, of which I am a member and which I know works tirelessly to make sure that understanding of MS stays at the top of the agenda in this place and in the wider community.

The theme of the debate has been NHS nurses. Given that I am the MSP for Motherwell and Wishaw, the situation in Lanarkshire is of some concern to me, as it is to my constituents. I first learned of the situation when it was brought to my attention in December 2016. Some of the group in North Lanarkshire were told that NHS Lanarkshire was not taking up MS Trust funding to fund a second, much-needed MS specialist nurse. I was disappointed by that decision and sought clarification from NHS Lanarkshire. Indeed, I wrote

to ask that the matter be covered in the next briefing that it regularly holds for MSPs and MPs. Unfortunately, that briefing has been cancelled again.

As recently as last week, I wrote again to ask what the long-term plans for sustainable MS nurse support are for constituents in the NHS Lanarkshire area, especially given that we have been told that the one nurse who was there had a case load of more than 1,600 patients, when the recommended number is 329. I have had some information from NHS Lanarkshire, but we need to get answers about what its long-term, sustainable provision will be. What has happened to the funding that was supposed to be used for this process? We need clarity about what is happening in North Lanarkshire because, given the contributions that we have heard this evening, it is evident that the situation is not as it should be, or as it is in the rest of the country.

Why is the issue so important? Like George Adam, I know my place. I am a wee sister and in all things to do with MS I defer to my sister Eileen, who is 59 and is an MS sufferer. I called her earlier today and asked her what her MS nurse meant to her. She said that they were someone for her at the end of the phone or the end of an email. When she is in desperate need and has a urine infection, for example, and needs immediate care, she can go to her MS nurse and get care immediately without having to negotiate through her GP practice.

Eileen also told me that she is in the middle of negotiating the personal independence payment process. My sister had a lifetime award of PIP and is finding the whole process to be completely frustrating. Her trade union told her that she ought to have been able to get a face-to-face interview at home, but she was asked to travel 30 miles to Birmingham to an assessment centre. If she is unwell, especially if she has a urine infection, which is one of the symptoms of MS, such a journey could make her even more unwell and it would be really uncomfortable and difficult.

The most frustrating thing for Eileen is that, given that she still works, she wanted to get the day of the meeting changed from a Friday to a day when she does not work, but that has been extremely difficult. She says that she is not prepared to go on a Friday. She wants to work on the Friday because she is a GP and she does not want to let her patients down. It highlights the complete disaster that the PIP system is when a health professional is taken away from her job—which lets down her patients and costs the economy, given the need to find a replacement doctor—to undergo a PIP assessment that is completely and utterly unnecessary given that the

situation for MS patients will not change because the disease has no cure.

I highlight that because it is a dystopian situation. It is terrible that people in Scotland and the rest of the UK still have to undergo the PIP assessment regime. I highlight to people who are watching the debate that there is still an opportunity for them to take part in the expert panels that the Scottish Government has set up to ensure that our replacement system will have dignity at its heart.

The Deputy Presiding Officer: Thank you. I was loth to cut speeches short because they are all so very interesting. The minister is looking enthusiastic so I now call Aileen Campbell to close on behalf of the Government.

18:00

The Minister for Public Health and Sport (Aileen Campbell): Presiding Officer, I am sorry for being a bit premature in standing up before I was called. We all want to go and enjoy the MS event that will happen later on in the garden lobby. I am sure that everyone is eager to get there and take part.

I am pleased to have the opportunity to close today's debate marking MS awareness week 2017. As we have heard from so many members this evening, MS is a condition that touches many families around the country and everyone has some personal experience, whether it be of a family member or a friend or colleague.

As other members have done, I pay tribute to my colleague and friend, that likeable young man—as his mother-in-law described him all those years ago—George Adam, who I have known for some time. He has campaigned with tenacity to advance the cause of greater support for those who have MS and has used his position as an MSP to continue that work. I also pay tribute to his wife, Stacey Adam, who is a phenomenal campaigner who is absolutely not defined by her condition but is known to be a tireless worker in raising awareness about MS, among other issues. George said that Stacey has enormous fighting spirit and I agree. In part, she needs that to support St Mirren, but—more seriously—her strength is an inspiration and echoes that of the great many campaigners who are here this evening and who will join us at the event.

I also pay tribute to the members who talked about the folk and professionals they know who either have MS or help those who do. I pick out the powerful and emotional contribution from Donald Cameron, which gave an insight into the impact of his father's MS on the whole family. I mention also Clare Adamson, who talked about her big sister and her interaction with the DWP

and the struggles that that has created. It is not easy for members to talk about their personal experiences in the chamber, but the impact on debates is immensely important.

Today's debate gives the Parliament an important chance to come together to raise awareness of MS. As a Government, we believe that everyone living with MS should be able to access the care and support that they need, including support for their families and carers. The Scottish Government values the important role that specialist nurses and allied health professionals play in supporting people with multiple sclerosis and other debilitating conditions. Specialist nurses work within multidisciplinary teams to provide invaluable support and specialist advice to people affected by particular conditions. They also act as an important resource for the team, sharing their knowledge and skills with teaching staff and advising on the most appropriate interventions and care plans.

Members will be aware that, in recognition of that vital role, the First Minister announced in January 2015 an additional £2.5 million to be invested in specialist nursing and care from 2015-16. Those funds have been earmarked as recurring to allow that important investment to be sustained. The additional funding has already enhanced patient access to specialist nursing support and advice. For example, NHS Grampian, NHS Greater Glasgow and Clyde and NHS Fife have all appointed additional MS clinical nurse specialists. We will soon publish the specialist nursing and care report, which will set out how the additional funding has increased overall specialist capacity and how access has been enhanced. I hope that that responds in some way to the issues that Miles Briggs raised.

We realise that there are pressures in certain boards and will continue to work with the third sector, social care partners and NHS boards to ensure that everyone who requires specialist nursing services has access to the highest standards of care in every setting.

As well as being the minister for public health, I am a Lanarkshire MSP and have an interest in the situation in NHS Lanarkshire. We have been in contact with the board, which has sought to assure us that patients will continue to be able to access a specialist nurse with MS experience and that NHS Lanarkshire has put interim arrangements in place. The board is recruiting and is in discussions with the MS Trust. We will keep a close eye on and continue to monitor the situation. I will also seek to remedy the problem that George Adam raised about updates from NHS Lanarkshire for the cross-party group and, more generally, to ensure that information about the situation is provided to those MSPs who have an interest.

Alongside the challenges, the improvements that have been made are important to note. Since 2009, there have been increases in the numbers of MS nurses, and the number of neurology specialist nurses has increased from 8.6 whole-time equivalents to 28.7. Preliminary figures show that the percentage of newly diagnosed patients who have contact with an MS specialist nurse within 10 days has increased by 4 per cent.

However, in that and other areas, we totally accept that progress needs to continue and that work still needs to be done to make further improvements and to ensure that people have the support that they need. We will work hard to do that.

Ben Macpherson spoke about the support beyond the NHS and of the centre in Edinburgh of which he is a patron. He is absolutely right to raise awareness of that work.

Yesterday, I was in Govan opening Revive MS Support's new centre and I met staff and people who live with MS. That facility offers a range of complex, person-centred treatments and support, similar to what Ben Macpherson described—oxygen, reflexology and a host of other complementary therapies. We also heard about writing groups, acting groups and various other ways in which people with MS are supported. The centre is a fantastic example of the way in which third sector organisations can work in partnership to complement NHS services and deliver person-centred care that is innovative and which also provides camaraderie and friendship. This Government was proud to be able to provide funding to support the development of the centre in Govan.

Third sector partners like the MS Society, the MS Trust and Revive MS Support play a crucial role that should be recognised. They act as powerful advocates for people with MS and deliver high-quality services and support to people with the condition. We have a good relationship with the MS Society and I am pleased to say that we have recently been able to provide funding to the MS Society to support its active together project, which will test and evaluate approaches to enabling people who are affected by MS to become more physically active. This is the first time that such an ambitious and innovative project to increase the physical activity of people with MS has been offered in Scotland, and we are proud to be able to support that work.

On Liam McArthur's point about incidence, through our MS register, we are capturing more data and are starting to understand more about incidence rates in Scotland. We want to take that further and work to understand the prevalence and its causes via funded research. We will continue to

keep members with an interest updated as that work progresses.

I would like to thank members for their thoughtful and personal remarks throughout the debate. I am sure that I will see some of them shortly at the MS Society event in the garden lobby.

It is important that we continue to strive for improvements in all aspects of care for people with MS. We must, and will, keep looking at how we can do better; how we should transform and improve care; and how we can equip ourselves to deliver even better health and social care services for those who live with MS and, indeed, other neurological conditions.

We have a hugely committed and professional workforce in our NHS. With the continued support and hard work of everyone involved, I am confident that we can continue to improve care and provide better support for people living with MS.

Finally, I pay tribute once again to George Adam for raising this issue in the Parliament and giving us all the opportunity to highlight this condition.

Meeting closed at 18:08.

Correction

Michael Matheson has identified an error in his contribution and provided the following correction.

The Cabinet Secretary for Justice (Michael Matheson):

At col 7, paragraph 8—

Original text—

I last met the chair of the Scottish Police Authority on 18 January 2017.

Corrected text—

I last met the chair of the Scottish Police Authority on 18 April 2017.

[Members' corrections page](#)

This is the final edition of the *Official Report* for this meeting. It is part of the Scottish Parliament *Official Report* archive and has been sent for legal deposit.

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