



**OFFICIAL REPORT**  
AITHISG OIFIGEIL

# Meeting of the Parliament

**Wednesday 2 May 2018**

**Session 5**



The Scottish Parliament  
Pàrlamaid na h-Alba

© Parliamentary copyright. Scottish Parliamentary Corporate Body

Information on the Scottish Parliament's copyright policy can be found on the website - [www.parliament.scot](http://www.parliament.scot) or by contacting Public Information on 0131 348 5000

---

**Wednesday 2 May 2018**

**CONTENTS**

	<b>Col.</b>
<b>AUTOMATED TELLER MACHINES</b> .....	1
<i>Motion debated—[Dean Lockhart].</i>	
Dean Lockhart (Mid Scotland and Fife) (Con).....	1
Gail Ross (Caithness, Sutherland and Ross) (SNP).....	4
Jamie Halcro Johnston (Highlands and Islands) (Con).....	5
Joan McAlpine (South Scotland) (SNP).....	7
Monica Lennon (Central Scotland) (Lab).....	8
Richard Lochhead (Moray) (SNP).....	10
Maurice Corry (West Scotland) (Con).....	11
Mark McDonald (Aberdeen Donside) (Ind).....	12
Mairi Gougeon (Angus North and Mearns) (SNP).....	14
The Minister for Business, Innovation and Energy (Paul Wheelhouse).....	15
<b>PORTFOLIO QUESTION TIME</b> .....	19
<b>EDUCATION AND SKILLS</b> .....	19
Secondary School Education Budget (Fife).....	19
Education Maintenance Allowance.....	20
Science, Technology, Engineering and Mathematics Teaching Initiative.....	22
South Lanarkshire Council Education Resources (Meetings).....	23
Knife Crime (Schools).....	24
Science, Technology, Engineering and Mathematics Teachers.....	26
Education Governance (Island Proofing).....	28
Teachers (Pay Campaign).....	29
Early Learning and Childcare (Funding).....	30
Aberdeenshire Council (Meetings).....	31
Young People (Rights).....	32
Newbattle High School (Digital Centre of Excellence).....	33
Music Tuition (Schools).....	33
<b>NATIONAL HEALTH SERVICE (FINANCIAL ACCOUNTABILITY)</b> .....	35
<i>Motion moved—[Miles Briggs].</i>	
<i>Amendment moved—[Shona Robison].</i>	
<i>Amendment moved—[Anas Sarwar].</i>	
Miles Briggs (Lothian) (Con).....	35
The Cabinet Secretary for Health and Sport (Shona Robison).....	40
Anas Sarwar (Glasgow) (Lab).....	44
Alison Johnstone (Lothian) (Green).....	47
Alex Cole-Hamilton (Edinburgh Western) (LD).....	50
Liz Smith (Mid Scotland and Fife) (Con).....	53
Ash Denham (Edinburgh Eastern) (SNP).....	55
Edward Mountain (Highlands and Islands) (Con).....	57
Stuart McMillan (Greenock and Inverclyde) (SNP).....	60
Neil Findlay (Lothian) (Lab).....	62
Clare Haughey (Rutherglen) (SNP).....	64
Annie Wells (Glasgow) (Con).....	67
James Dornan (Glasgow Cathcart) (SNP).....	69
Jackie Baillie (Dumbarton) (Lab).....	72
John Mason (Glasgow Shettleston) (SNP).....	74
Brian Whittle (South Scotland) (Con).....	77
David Stewart (Highlands and Islands) (Lab).....	79
Shona Robison.....	81
Murdo Fraser (Mid Scotland and Fife) (Con).....	84
<b>BUSINESS MOTION</b> .....	89
<i>Motion moved—[Joe FitzPatrick]—and agreed to.</i>	
<b>PARLIAMENTARY BUREAU MOTIONS</b> .....	91
<i>Motions moved—[Joe FitzPatrick].</i>	

<b>DECISION TIME</b> .....	92
<b>NUCLEAR WEAPON TRANSPORT (CIVIL CONTINGENCY)</b> .....	96
<i>Motion debated—[Mark Ruskell].</i>	
Mark Ruskell (Mid Scotland and Fife) (Green) .....	96
Bill Kidd (Glasgow Anniesland) (SNP).....	99
Edward Mountain (Highlands and Islands) (Con).....	100
Claudia Beamish (South Scotland) (Lab) .....	101
Clare Haughey (Rutherglen) (SNP).....	103
Gordon MacDonald (Edinburgh Pentlands) (SNP).....	105
Maurice Corry (West Scotland) (Con) .....	107
Bruce Crawford (Stirling) (SNP) .....	110
Tom Arthur (Renfrewshire South) (SNP).....	111
Ross Greer (West Scotland) (Green) .....	113
The Minister for Community Safety and Legal Affairs (Annabelle Ewing).....	115

---

# Scottish Parliament

Wednesday 2 May 2018

[The Deputy Presiding Officer opened the meeting at 13:15]

## Automated Teller Machines

**The Deputy Presiding Officer (Christine Grahame):** Good afternoon. The first item of business is a members' business debate on motion S5M-10648, in the name of Dean Lockhart, on the campaign to save automated teller machines. The debate will be concluded without any question being put.

*Motion debated,*

That the Parliament notes the campaign by *Which?* and the Federation of Small Businesses to call a halt to the potential closure of free-to-use ATMs across Scotland because of plans to reduce the interchange fee by the cashpoint network, LINK; recognises that ATMs are an important service in communities, particularly for people on low incomes, older people and in areas such as the Trossachs, Perthshire, Kinross and Fife; believes that this might exacerbate the problem of bank branch closures as some consumers might be left without access to even the most basic banking services; notes the calls for the Payment Systems Regulator to take action to prevent there being complete ATM absence in some areas, and acknowledges the view that assurances should be given that consumers and small businesses can maintain access to the network of free-to-use ATMs.

13:15

**Dean Lockhart (Mid Scotland and Fife) (Con):** I am pleased to bring to the chamber this members' business debate on the potential closure of free-to-use ATMs across Scotland. I thank the members who supported the motion, thereby allowing us to debate an issue that has the potential to affect all our constituencies and regions. I also recognise the excellent joint campaign by *Which?* and the Federation of Small Businesses, which has attracted more than 75,000 signatures across the UK to highlight the concern.

As members will be aware, automated teller machines have a long history in Scotland, with the first ATM being introduced in the late 1960s. In fact, the concept of the ATM was pioneered by two Scotsmen—James Goodfellow from Paisley and John Shepherd-Barron from Inverness. The latter originally imagined that a cash machine could operate just like a chocolate dispenser. ATMs have clearly come a long way since then. There are now 5,200 free-to-use ATMs across Scotland, which offer a wide range of banking services and form an invaluable part of communities and local economies.

Despite the increasing use of digital transactions, cash is still the most common method of payment in the high street. More than a third of total high street spending is dependent on the ready availability of cash machines. FSB research highlights that local ATMs inject an average of £16 per withdrawal directly into nearby stores, and research by *Which?* has shown that 90 per cent of Scottish consumers consider the availability of free cash machines to be an important part of their everyday lives. The importance of local free-to-use ATMs has only increased following the recent closure of a number of bank branches, as ATMs are often now the only means for people across Scotland to access cash and banking services.

Given the importance of ATMs for local communities, serious concerns were raised when, in January this year, the UK's largest cashpoint network, Link, announced plans to change the fee structure under which ATM operators are paid for the use of its ATMs. The proposed changes that Link has announced would reduce the fee paid to ATM operators by 20 per cent over the next four years.

The critical issue is that the fee reduction has the potential to close many hundreds of ATMs across Scotland, as they would become financially unviable. The Federation of Small Businesses has estimated that around one in 10 ATMs in Scotland—more than 500 ATMs—are at risk. If the proposals go ahead, the hardest hit will be those who are the most reliant on using cash, including those in rural communities, where branch closures have already limited access to cash and banking services. They face a double whammy if ATM services are also withdrawn. The FSB has estimated that rural areas will potentially be the hardest hit by the proposals, with one in five, or 20 per cent, of ATMs in rural areas being at risk.

The proposals would also have an adverse impact on vulnerable and deprived communities, where free-to-use ATM coverage is already limited. Age Scotland has expressed concern that poor mobility and the lack of public transport will make it difficult for older people to access more distant ATMs. For small retailers, the closure of local ATMs would damage their business. Small retailers are cash businesses. According to the Scottish Grocers Federation, 76 per cent of all its members' transactions are cash based. Research shows that, without a nearby ATM, more than 20 per cent of consumers would be less likely to use local shops and one in seven consumers would find it more difficult to pay for goods in cash.

Evidence that was given last week as part of the Economy, Jobs and Fair Work Committee's inquiry into bank branch closures highlighted that many small retailers rely on the cash deposit facilities of

ATM machines and that many face insurance requirements to deposit cash at the end of every day or every second day. Without a local ATM facility, those retailers might have to travel for up to two to three hours to get to their nearest cash deposit facility. That has clear implications for managing cash flow, staffing and productivity.

The Link network has responded to the widespread concerns by giving assurances that vulnerable consumers and remote ATMs will be protected by various measures, such as its financial inclusion programme, which provides funding of up to £3 million for the retention of ATMs in areas that are underserved. However, it is uncertain how that will work in practice and how the £3 million of additional funding will offset the impact of the reduction in the interchange fee, which will result in £200 million being taken out of the system. The FSB has estimated that the financial inclusion programme would apply to only 220 ATMs in Scotland, which is less than 5 per cent of the network.

It is important that we acknowledge the changing nature of banking and the increasing use of online banking and cashless transactions. It is equally important that we acknowledge the pressures that banks face, with interest rates lower for longer, increasing regulatory compliance and increasing costs of doing business. However, cost-reduction exercises that would result in the closure of hundreds of ATMs around Scotland cannot and should not be the answer to those pressures. Therefore, I have written to the chairman of the Link Scheme Ltd to call for the proposed changes to be reconsidered, and for the Link network and member banks to take another look at the impact of the proposals on consumers, small businesses and communities. If the objective of the Link network is to achieve a better geographic and demographic balance of ATMs, there are better ways to achieve that.

I have also written to the Payment Systems Regulator, which is the relevant regulator in this area, to ask that it closely monitors all proposed changes to the Link, MasterCard and Visa payment systems to ensure that any future changes to those systems prioritise consumers' access to free-to-use ATMs.

It is vital that the ATM network is not seen as just another banking service from which to make money but, instead, is viewed as a core service offered by the banking industry as part of its wider commitment to local stakeholders.

**The Deputy Presiding Officer:** As we must conclude by 2 pm to let the next business proceed, I must be very strict and members must keep exactly to their time. There will be no ifs, no buts and no extra seconds—I cannot make it clearer. Gail Ross will show the way.

13:22

**Gail Ross (Caithness, Sutherland and Ross) (SNP):** I thank Which? and the FSB for their campaign on the issue and Dean Lockhart for securing today's debate. Which? and the FSB have worked tirelessly to bring to our attention the threat of ATM closures, and I am glad that we are debating the issue today.

As Dean Lockhart highlighted, Which? and the FSB have had to raise the issue because, in January 2018, the UK's largest cashpoint network, Link, announced plans to reduce the amount paid by card issuers to ATM operators for every use by a customer of a free ATM. The plans will reduce the amount that is received by ATM operators by 20 per cent per transaction from July this year, which is a move that is likely to make thousands of ATMs around the UK financially unviable.

In rural constituencies such as mine, the removal of ATMs, as well as adding to the great difficulties that have already been created by bank closures, will have a considerable effect on tourism, making visitors less able to contribute to local economies. As a rural MSP and deputy convener of the Rural Economy and Connectivity Committee, I have fought against bank closures, and I am fighting for better provision of mobile banking. I will continue to challenge those decisions but, until the banks see sense, the role of ATMs is vital to the cash-based economy of rural Scotland.

Tourism is a key sector in my constituency, and the creation of the north coast 500 has helped to harness its potential. Having ATMs along the NC500 route is key to ensuring that tourists can access money when they wish and spend it freely in local businesses. Not all small rural businesses take cards, and many have card limits. Cashpoints ensure that tourists can spend despite that.

However, ATMs do not assist only where businesses do not take cards; they also increase the likelihood that customers will spend money. FSB research shows that, on average, local ATMs inject £16 per withdrawal directly into nearby shops. Keeping ATMs in towns and villages is an important way of continuing investment by tourists.

Rather than removing ATMs, companies should be increasing their numbers and ensuring that they are accessible. Of the 60 or so ATMs in my constituency, nearly half are inside shops and banks, which means that they do not have 24-hour access. The welcome increase in tourism that has been created by the NC500 makes it increasingly likely that existing ATMs will run out of cash. Just last month, the *North Star* newspaper reported:

“cash machines run dry in Tain”.

As the closure of banks leads to increased demand on ATMs, they will run out of cash more regularly unless their numbers are increased.

Link and its members should realise that the disappointing bank closures across rural areas mean that there is no better time to invest in ATMs. In my constituency, many local business owners would like to see an increase in the number of cash-and-deposit ATMs, which allow customers to deposit money as well as take it out. The provision of more such ATMs would allow rural businesses to bank quickly and easily and would prevent the safety and security issues that come with holding large sums of money on business premises or in homes.

ATMs will continue to have a role in rural areas, because of their importance to tourism and the cash-based economy. It is therefore vital that we ensure continued access to cash, and that we join Which? and the FSB in urging Link and its members to review the decision in light of its implications.

13:26

**Jamie Halcro Johnston (Highlands and Islands) (Con):** I congratulate my colleague Dean Lockhart on securing today's debate on an important issue. It comes at a time when the Economy, Jobs and Fair Work Committee, of which I am a member, is investigating bank branch closures—an issue that has current relevance across the UK. The House of Commons Scottish Affairs Committee is also taking evidence on access to ATMs specifically.

Therefore, I welcome this political attention on a matter that is clearly of considerable interest to people across the country, but which is more keenly felt in the rural and remote parts of my region of the Highlands and Islands, as Gail Ross said.

In recent decades, people have become increasingly used to readily accessible cash. As Dean Lockhart mentioned, Scotland can claim to be the home of the modern ATM. Its original inventor, John Shepherd-Barron, brought forward the concept that created the first Barclays machine. His invention was built upon by a Paisley man, James Goodfellow, who developed the machine-readable card accompanied by a personal identification number, thus reducing the need for slightly radioactive imprinting of the cheque-like documents that were paid in. The Enfield branch of Barclays, which still operates today, bears a blue plaque that notes its place in history. Captioned "lives made much easier", it is a testament to the role that ATMs have played in our modern history.

The advances in contactless and chip-and-pin technology have doubtless had an effect on the use of ATMs. However, for many, cash remains the default method of purchase. The FSB has spoken about the higher level of cash transactions for small businesses. At a recent Economy, Jobs and Fair Work Committee meeting, small convenience store owners told us that when customers take money out of the ATM in their stores, some of that money is then spent in the store, and the storekeeper then puts much of the cash back into the ATM. That shows the importance of the ATM in supporting those businesses and the cyclical nature of the cash economy on which they rely. Cash withdrawals can also be used as a form of budgeting, with people taking out a weekly amount and being able to closely monitor their spending in certain areas.

Some of the proposals from the Payment Systems Regulator have been sensible attempts to agree to a reasonable way forward with Link, but this area will inevitably have to be monitored closely in the coming years. Therefore, although we may look to the future and the potential of an increasingly cashless society, cash is still an important part of many local economies. There remains a risk that some of the more vulnerable citizens and businesses will be left behind by a banking system that is increasingly difficult to access in the ways that they are used to.

Cashless transactions have grown at pace, without any great discussion of what the implications might be. People are often being forced to change business practices and their own banking practices with very little support or forewarning. The impact in specific areas and for specific groups of people should be considered.

Looking geographically, Which? has observed that Shetland has the highest level of charging cash machines in Scotland. Comfortably over half of its machines require a fee for withdrawals. However, that finding was based on a relatively small sample size, as Link has identified that there are a total of 31 ATMs in the northern isles taken together, of which 20 are free to use.

Those ATMs are important—they are crucial for the sustainability of rural shops, which rely so heavily on cash, and the shops themselves are important as part of their communities. They provide a hub and a place to meet, particularly for those who might otherwise face social isolation. Therefore, ATMs can be an integral part of the rural economy.

I do not think that anyone is seriously advocating getting rid of fee-paying ATMs in their entirety. Which? observed that they can offer additional convenience, but that should not be at the cost of losing out on existing provision. That is why ATMs and branches should be considered in

the round. Access to money and banking services continues to be important, yet for many it can feel impossible to carry out relatively simple requirements. When online banking facilities fail—as they have done recently with the problems at TSB—customers can be left with few alternatives. There might be many elements at play—far too many to fit into a four-minute speech—but let us be very clear: if banks create barriers to customer service, customers will look for banking services elsewhere.

I will finish with a quote from James Goodfellow—

**The Deputy Presiding Officer:** You do not have time for Mr Goodfellow, I am afraid. I would love to hear from him, but no.

13:30

**Joan McAlpine (South Scotland) (SNP):** I am pleased to speak on a subject of great importance to my constituents, and I congratulate Dean Lockhart on securing the debate. I also congratulate Which?, the FSB and Age Scotland on their campaigning on this important matter.

The decision by Link to reduce the interchange fee is all the more concerning as it comes against the backdrop of local branch closures. In my area, three market towns—Langholm, Lockerbie and Annan—which are all close together, are all threatened by Royal Bank of Scotland closures. That problem was added to recently by the proposed closure of a Santander branch. While fighting such closures, my constituents were assured that, at the very least, they would still be able to access cash from cash machines. Now, we are told that Scotland will be among the hardest hit by a drop in the number of free-to-use ATMs. That is bad news, particularly for those from rural communities, where one in five people already say that their nearest cash machine is far too far away to reach on foot.

As is the case with anything to do with the financial sector, it is quite hard to get to the bottom of who is responsible. However, Link's membership is comprised of 37 banks, so the scandal, again, looks like it comes from the banks. Despite the reduced interchange fees, banks could make the decision to maintain free-to-use ATMs where they are attached to local branches, or where they are pre-existing. However, if the past few months are anything to go by, relying on the social responsibility of RBS and Santander seems somewhat optimistic.

The loss of a local branch is difficult enough for a community to deal with, but losing a cash machine makes a bad situation worse. Once large machines are removed from towns, smaller ones cannot cope with demand. People are forced to

travel ridiculous distances for want of a few pounds, and the amount of cash that circulates in towns plummets, which harms local businesses. I recently discovered that applications have been made to Dumfries and Galloway Council's planning department for the removal of an ATM in Annan. My understanding is that that closure is directly linked to the reckless decisions on bank closures that were made by RBS.

On a positive note, campaigners in Maybole secured an impressive victory last week when RBS made a dramatic U-turn and reversed its decision to axe the town's ATM. Sustained pressure from local campaigners, MPs and MSPs has resulted in RBS offering a reprieve to the closure-threatened Gretna branch in my area and nine more branches across the country. Of course, all branches and ATMs across the region—and across Scotland—should be kept open, and not just granted a temporary reprieve. However, such examples show that keeping up the pressure has an impact, which is why debates such as this are important.

People are rightly incensed by the idea that the banks, which caused such carnage in 2008, are imposing more damage on communities. I hope that the banking sector will learn from the events of the past few months and recognise that there is a continued need for face-to-face provision as well as cash withdrawal and deposit machines.

Link must acknowledge its responsibility as the network to which almost every cash machine in the UK is connected. In its submission to the Economy, Jobs and Fair Work Committee's inquiry into bank closures, Link stressed its commitment to providing consumers with access to their cash for free through the strengthening of its financial inclusion programme. However, the issue is too important to leave to Link's voluntary corporate social responsibility. It is the role of the UK-wide Payment Systems Regulator and the Bank of England, which also regulates Link, to ensure that consumers are able to access cash effectively and efficiently. Perhaps it is time for the Bank of England to step in and force Link to revise its plans.

13:34

**Monica Lennon (Central Scotland) (Lab):** I congratulate Dean Lockhart on securing the debate, and I thank Which? and the FSB for their campaigns.

I have been following this issue closely, as my MP, the member for Hamilton and Rutherglen West, Ged Killen, has also been leading a campaign on the issue. He plans to introduce a bill at Westminster this month to create a legal requirement for free ATMs in order to protect free



access to people's cash. I share Ged Killen's concerns about Link's decision to effectively cut funds for those who operate free ATMs.

As we have heard, before making its decision Link consulted only its own members, many of which are large banks that have a commercial interest, and did not consult the public more widely. However, the impact on the general public could be significant, because there could be whole high streets and communities in which no free-to-use ATMs will exist.

Less than six months ago, communities across Scotland were shaken when it was announced that more than 60 bank branches face closure, and several RBS branches in my region, Central Scotland, were affected, including the RBS branches in Larkhall and Hamilton's Cadzow Street. Dean Lockhart referred to the research by Which?, which shows how heavily people rely on access to free ATMs.

We have no doubt that the most vulnerable people in our society will be hit the hardest—people without their own access to transport, including the elderly and people with disabilities. The cost of accessing cash from fee-charging ATMs will be felt most by those who can least afford it. Someone with £10 or £20 left in the bank will be placed in real danger of being overdrawn if they have to pay a couple of quid to withdraw their money, and they simply cannot afford that.

The Cadzow Street branch of RBS will close, as I said. In Hamilton, there is an ATM in Quarry Street, which currently charges £1.99. RBS will abandon Larkhall—I know that Dean Lockhart hails from there—where there is an ATM, in John Street, that charges £1.75. In Stonehouse's Strathaven Road, the ATM charges £1.99. In East Kilbride, the ATM charges £1.85. We could all go on and on. However, we know that, in Lanarkshire, one in five children lives in poverty. It is therefore unacceptable for families who are already struggling to be charged to access their cash. We cannot allow these charges to become the norm.

Link tells us that it has strengthened its financial inclusion programme by subsidising ATM operators with cashline machines in low-income areas. However, the reality is that, in areas that are struggling to cope with poverty and deprivation, there is already an underprovision of ATMs. For example, Ged Killen counted more cashlines in one corridor of the House of Commons than there are in the whole of the main street in Cambuslang, in his constituency.

The banks and card issuers that make up much of Link's membership might have commercial concerns about the projections of reduced cash usage, but Link is a not-for-profit company with a

social remit. Those who value ATMs as a lifeline service must be properly considered.

On behalf of my constituents across Central Scotland, I add my voice to the calls of Ged Killen MP and organisations such as Which? and the FSB for the Payment Systems Regulator to engage in a full market review of the effects of the proposed changes. I welcome Ged Killen's plans to launch a bill in Westminster to protect free access to cash, and I hope that the bill gets the cross-party support that it deserves.

13:38

**Richard Lochhead (Moray) (SNP):** I, too, congratulate Dean Lockhart on securing this debate so that we can all make a contribution highlighting the issue's importance to local communities and to wider rural Scotland in particular. I also pay tribute to Which? for its campaign, and thank the FSB, Age Concern and others who have sent us valuable briefings.

There is a sense that there is a new emerging banking crisis in Scotland. This time, it is about not sub-prime mortgages but banking facilities being withdrawn from Scotland's rural communities. Although many commentators have for a long time predicted the cashless society, that is still several decades away. However, due to a combination of the inaction of the UK authorities and the policies of the banking sector, we are in danger of creating cashless communities in rural Scotland, which will have all sorts of detrimental social and economic impacts.

In the past two years in particular, those of us who represent rural constituencies have seen the closure of many high street branches in those areas. In my constituency of Moray, the whole of Speyside is in the ludicrous position of having no high street bank branches. They have all closed in the past couple of years. That is the part of Scotland whose whisky industry is one of the biggest revenue generators for the UK Treasury, because 50 per cent of Scotch whisky is produced in Speyside. It is also the home of Walkers Shortbread Ltd, a major company that operates in 80 markets around the world. It is a centre of angling tourism and other economic sectors. However, there is not one bank branch in the whole of Speyside for those sectors.

To replace the bank branches that have closed, mobile banks were introduced. However, I have just had to see off a fight with the Royal Bank of Scotland, which wanted to reduce the twice-weekly visits of its mobile bank to Dufftown in Speyside. I am thankful that it has reversed that decision and that the service will continue for the foreseeable future.

All that we have left are the holes in the wall, which contain autobank machines at the moment. Those ATMs are vital for the communities where they are, so the idea that they could be removed because of the change in the pricing is ludicrous. That must absolutely be stopped.

In fact, when the high street branches in Aberlour in Speyside closed, the banks also took away the autobank machines, so people now have to travel to the ATM in Rothes down the road, which sometimes runs out of cash because so many people are dependent on getting cash from it. When Aberlour's ATMs closed, there was no consultation with the local community of elected representatives, as far as I am aware.

The issue is important for the rural economy for a number of reasons. First, many shops in rural communities take cash only. That is the case in Wester Ross, where I was for my holidays over Easter—it is a spectacular area. The shops do that because they have fragile profit margins and therefore cannot afford the cost of card transactions. If tourists and local people cannot access cash, such businesses will lose out big time.

Secondly, in Aberlour, and elsewhere in Speyside and rural Scotland, summer shows, summer fetes and Highland games will be coming up. At those events, charities, good causes and other organisations raise money. They depend upon visitors and tourists going to the local ATM, taking out some cash and spending it at the show. If those people run out of cash, they can go back to the ATM and top up because they are having such a good time. If that service is not free, they will be put off doing that in many cases. Therefore, the good causes, charities and businesses will lose out for that reason as well.

In rural Moray and many parts of Scotland, people do not have a good broadband or mobile phone signal—if they have any at all. Therefore, not to have those ATM facilities to carry out their banking and access cash is detrimental to quality of life, particularly for elderly people.

I ask the minister to do what he can to address the issue with Link. The UK Government should set up a task force to look into the rural banking crisis.

13:42

**Maurice Corry (West Scotland) (Con):** I thank my colleague Dean Lockhart for bringing this important debate to the chamber.

Throughout my region, as is the case throughout Scotland, people face different challenges in different areas. For quite a few years, many services have been centralised. That

has shown us the difficulties and challenges that people who do not live in central locations face.

People require certain facilities that can be accessed at any time. That is particularly pertinent in Arrochar and Tarbert in my region, which is a tourist area where there is no ATM. An emergency situation does not allow time for people to wait for the shop to open for them to withdraw cash and nor does the possibility of having to store more cash at home for such situations make us safer.

Numerous constituents have expressed to me their concern about the decline in banking services, for differing reasons. With technological advances, a growing number of people are now working from home and do not have to travel. People who work from home in more rural areas are faced with having to store cash reserves in their houses or make a timely journey to withdraw cash. For people who use public transport, that raises serious safety concerns.

Older people are much more likely to travel on public transport and are therefore being put at risk by the potential decline of ATMs. That situation is made more difficult by the recent closure of bank branches. If people do not have access to cash withdrawal facilities, there is a severe knock-on effect for the local economy. In some areas of my region, there has already been a spate of burglaries as a result of the potential increase in cash being stored under the bed. It would be logical to assume that the number of burglaries may increase further.

The risks and dangers that the situation could pose to the public outweigh the cost implications to the service providers. We must do everything within our power to ensure that ATM services remain in our communities.

**The Deputy Presiding Officer:** Thank you very much, Mr Corry. Your generosity has allowed the last two speakers to claw back to four minutes each.

13:44

**Mark McDonald (Aberdeen Donside) (Ind):** I congratulate Dean Lockhart on securing today's debate and I thank Which? and FSB for their campaign. I realise that the debate has focused predominantly on rural issues and rural communities, as is quite proper, but I wonder whether I might take the opportunity to include a city-based perspective. Clydesdale Bank currently proposes to close two bank branches in Scotland, one of which is in Mastrick in my constituency. The branch is located just opposite my constituency office in the Mastrick shopping centre. That branch has two ATMs attached to it. There is one other ATM in the centre, which is a Link ATM.

My concern, which brings me to speak in the debate, is that my constituents in Mastrick face a potential double whammy as a result of Clydesdale Bank's decision to close its branch and the potential implications of the decision by Link to reduce the transaction fee and therefore potentially make its Mastrick ATM unviable. I want to explain why that is important.

Dean Lockhart quite rightly mentioned the issue of vulnerable and deprived communities. Although Mastrick has a number of low-income households and a number of elderly individuals, it is not classified as a regeneration area or a community of deprivation in the city of Aberdeen, so some of the protections and considerations that might be applied to deprived communities might not be applied in the situation as it relates to Mastrick, even though there are a number of people in the community who would fit in the categories of low-income, elderly or vulnerable, as well as digitally disenfranchised.

There is a wider implication regarding ATM coverage and the difficulty that people would have in a city context. I appreciate that distances in cities are dwarfed somewhat by the distances that individuals have to travel in a rural context, but even in a city context topography and public transport links can make it difficult for individuals to access alternative ATM provision if they face the nuclear option of all the ATMs disappearing, or of the ATM running out of money—something Gail Ross highlighted—which has happened at a number of ATMs in the area over holiday weekends, when the ATMs are not regularly topped up.

That could be a double whammy that would force people to look elsewhere, and that would have a knock-on effect on businesses. Dean Lockhart highlighted the £16 spend that takes place in businesses surrounding ATMs. There are a number of small local businesses in the Mastrick shopping centre, which benefited from the town centre regeneration funding that was put in place after 2007 and has seen the centre lifted, although there are still some empty units there.

Following discussions, Clydesdale Bank may reconsider its decision on the ATMs. The branch is going to close in June, and it has suggested that it will revisit its survey on ATM coverage and look at whether there is a possibility of retaining the ATMs, either in their current location or within another provider in the centre. My concern is that, if that does not happen, and given the potential for the Link machine to be viewed as unviable by the operator on the basis of the decisions that have been taken by Link in relation to the fees that are paid, my constituents and the businesses located in the Mastrick shopping centre will face a double

whammy that would be highly unacceptable. I hope that the minister would agree with that.

It is important that that issue is reflected in today's debate. We understand that, although the rural context is important, there are also impacts on populated urban communities as a result of Link's decision.

13:48

**Mairi Gougeon (Angus North and Mearns) (SNP):** I add my thanks to those offered by others around the chamber to Dean Lockhart for lodging the motion for today's debate and for highlighting this important campaign. I also thank Which? and the FSB for their campaign, for keeping up the pressure on Link, and for the briefing material that they provided for the debate.

Although all the major banks are determined to make us think that no one needs or uses cash any more, so that they can get away with shutting all our branches, that simply is not the case. I read the statistics provided by Which? and the FSB with great interest. They found that the demand for banknotes had gone up by 10 per cent, with cash still the most widely used payment method right across the UK.

The threat from Link to reduce the interchange fee and the resulting impact that that could have on the network of ATMs across the country is bad enough in itself; that has been well articulated around the chamber today, particularly by Monica Lennon, who highlighted the point that those ATMs that charge people to access their own cash hit vulnerable people the hardest. However, the news about Link came straight on the back of the RBS announcement of bank branch closures and the obvious impact of that on the availability of ATMs, which came straight on the back of Clydesdale Bank closures and the removal of its ATMs. We have had the news recently about Santander, too. The cumulative effect of all those closures is huge, especially for the likes of Speyside; I was shocked to hear from Richard Lochhead that ATMs are all that it has left after all the high street bank branches have closed.

Such changes are made with no cognisance of those who use only cash, businesses that rely solely on cash transactions and the festivals and events that our rural communities hold, for which cash is so vitally important. My constituency of Angus North and Mearns has had six bank branch closures over the past two years; Clydesdale Bank closed three of four—in Brechin, Forfar and Stonehaven—and RBS soon followed with bank closures in Brechin, Laurencekirk and Stonehaven. There has also been the recent announcement of the closure of the Montrose branch.

Like many members, I was disgusted by last week's news from the RBS chief executive, Ross McEwan, who told everyone that he was pleased that RBS had made a good start to the year—I am glad that it did, because nobody else did. In the first three months, RBS made a pre-tax profit of £1.2 billion, which was 70 per cent up on the same period last year. In the meantime, it is determined to pursue a programme of branch closures and has tried to appease us with woefully inadequate mobile branch visits—two hours a week is granted to Montrose, which serves not just the town but the wider north-east area that was forced to use that branch when the others closed—and mobile banks, which are inaccessible and do not give the full range of services. The closures force more pressure on the post office, which seems to pick up every major bank's slack and, again, does not have the full range of services available.

I strongly urge Link to listen to this debate and to take heed of what all the members have said. I ask Link not to abandon the communities that it serves, as so many others have. The Tories have to act for the communities that they serve and do what they can to get the Government in Westminster to intervene and stop the RBS branch closures. It has the responsibility and the power to do something about that, and it beggars belief that it has done nothing so far.

13:52

**The Minister for Business, Innovation and Energy (Paul Wheelhouse):** I thank Dean Lockhart for today's debate. It is a very important subject, as we have heard from all today's speakers. I appreciate that Mr Lockhart and many members have genuine concerns about Link's proposed changes to interchange rates, the implications for the ATM network and the impact of those changes on consumers and businesses across Scotland.

Members will know that the UK Government retains legislative and regulatory responsibility for banking and financial services. However, Mairi Gougeon has made the point that we hope that UK Government ministers can take action to intervene, and I call on them to do so. I put on record that the Scottish Government stands ready to work constructively with all concerned, including UK ministers, in the interests of consumers and businesses.

Link has proposed changes to the operation of the UK's ATM network with the intention of shifting incentives for ATM installation and operation from well-served urban areas to rural and financially excluded communities. As Monica Lennon and Jamie Halcro Johnston said, those machines are vital in allowing financially excluded communities and families to budget—they withdraw the money

that they know they can spend without risk to their bottom line. That important function has not received the attention that it deserves. I take on board Mark McDonald's point that, although the implications for rural communities are serious, there are issues for urban communities as well.

Link is introducing the measures because it believes that current incentives cause ATM providers to focus on profitable city centre areas where 80 per cent of free-to-use ATMs are within 300m of another free-to-use machine. It has proposed changes to the interchange rate to take effect from 1 July this year and is adopting a phased approach to the reform; we understand that each further reduction will be subject to further review by Link before implementation to assess the impact on consumers.

Link has said that there will be no change in the interchange rate for free-to-use ATMs that are 1km or more from the next nearest free-to-use ATM and, as Dean Lockhart said, it has indicated that 221 Scottish ATMs will be protected in this way. We also understand that Link is tripling its financial inclusion subsidy from 10p to 30p for ATMs in areas with poor cash access. I do not yet know whether that will support the community of Mastrick, for example, given the point that has been made about urban communities. However, like Mairi Gougeon, I hope that Link will listen to the concerns that have been raised in the chamber today with regard to both the urban and rural contexts.

We understand that Link believes that the changes are required to strengthen and increase the geographical coverage of the ATM network in the UK. We have to take it at its word, but I echo the response of members throughout the chamber: we need Link to carefully review the impact of its proposed changes on communities across Scotland and in the UK more widely.

Although Link's aim to support the ATM network in vulnerable communities is laudable, the practical implications of the changes for consumers, businesses and communities in Scotland are as yet unclear. I was interested to hear the points that were made about the 10 per cent increase in cash use, and Richard Lochhead's point about rural shows and other businesses that require cash was well made. In addition, charities in both rural and urban areas often require cash for donations.

The industry body, the ATM Industry Association, has estimated that as many as 10,000 free-to-use ATMs could be at risk as a result of LINK's planned changes. The uncertainty surrounding the potential implications of the changes, on top of the continued branch closure announcements including that by Santander in the past week—Joan McAlpine mentioned a potential

closure in Lockerbie—is unacceptable. Our communities need to know that they will continue to have free, secure access to cash to allow them to go about their daily lives.

I am pleased to support the save our cashpoints campaign that has been launched by Which? and the Federation of Small Businesses, although I am saddened that such a campaign is necessary. I have written to both the Payment Systems Regulator and the Treasury in support of the campaign, and I am pleased that I have received constructive responses from the Economic Secretary to the Treasury, John Glen.

The joint campaign by Which?, representing consumers, and the FSB, representing our small businesses, highlights the important role that cash continues to play in sustaining functioning local economies. Cash use is declining, although I take on board Mairi Gougeon's point that there is evidence of a 10 per cent increase in cash use in recent times. For many, however, cash remains the preferred and in some case the only form of payment, and it accounts for 40 per cent of transactions.

I also note Maurice Corry's point that there is a potential increased risk of burglary if people stash cash on their premises because they cannot rely on being able to access ATMs or bank branches, particularly if those facilities are far away from them, or if they are elderly.

I have no doubt that society as a whole is moving towards a cashless future, and there are opportunities and benefits to be achieved in doing so. However, the important point is that we are not there yet, and I am sure that we will not be there for quite some time to come. There is therefore a continued need for cash to be readily available to all.

The Which? and FSB campaign calls for the Payment Systems Regulator to conduct a wider market review to ensure that consumers continue to have access to cash. The review would cover the provision of free-to-use cashpoints and the long and short-term implications of Link's decision, the requirement for Link to ensure that its financial inclusion policy meets the needs of consumers, and the long-term alternatives that will be available to consumers if free cashpoints are removed. As I said, I have written to the Payment Systems Regulator indicating the Scottish Government's support for such a review.

Given the continuing trend of bank branch closures, it seems likely that the communities that are most affected by such closures will also be those that are most threatened by changes to the ATM network and face added uncertainty about the future of ATM provision.

I welcome the Payment Systems Regulator's commitment to actively monitor developments as Link's proposals are implemented. Indeed, that is a point with reference to John Glen's response. I understand that the PSR will require Link to report to it monthly on the impact of the decision and on action that Link has taken to address any unexpected negative impact on the free-to-use ATM network.

If any protected ATM is due to close, the PSR is keen to ensure that there is a quick transition to a new operator without any adverse effects on consumers, and we need to hold it to that. I hope that the PSR will go further, using its regulatory powers and committing resource to ensure that no ATM in a vulnerable community closes until a new operator is found, and that communities are not left without free access to cash as a result of Link's changes.

As Gail Ross, Dean Lockhart, Joan McAlpine, Monica Lennon and many others highlighted, concerns have been raised about the impact of branch closures on our local communities. As Richard Lochhead and Mairi Gougeon highlighted, those are being exacerbated by reductions in the services that are offered by mobile banking units to communities that have already been affected by branch closures. That is a matter of great regret. I think that we all agree that such closures are a body blow to communities across Scotland. They have left many areas with significantly reduced branch coverage.

Unfortunately, closure announcements continue, with Santander's announcement being the latest. Link and the PSR have indicated that they will take into account the needs of communities that are affected by branch closures as, often, when a branch closes, an ATM—a vital source of cash—is lost alongside the branch services.

**The Deputy Presiding Officer:** Please conclude for 2 o'clock, minister.

**Paul Wheelhouse:** I support all the comments that have been made and I thank Dean Lockhart again for raising this important issue.

## Portfolio Question Time

### Education and Skills

14:00

#### Secondary School Education Budget (Fife)

##### 1. Alex Rowley (Mid Scotland and Fife) (Lab):

To ask the Scottish Government what support it can provide to teachers in Fife regarding reports of over £2 million of reductions in the secondary school education budget. (S5O-02027)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** Despite continued United Kingdom Government real-terms cuts to Scotland's resource budget, we have treated local government fairly. This year, Fife Council's increase in spending power to support local authority day-to-day services, including secondary school education, amounts to £18.8 million—or 3 per cent—on the figure in 2017-18.

**Alex Rowley:** I am tempted to say, "Meanwhile, in the real world,"—and I do not mean that disrespectfully. The fact is that a presentation that is being given to teachers across Fife shows that Fife Council has approved savings of £4.095 million in secondary education. The presentation says:

"Of these £4.095m of savings, £2.338m is expected to come directly out of school budgets".

The reality is that teachers in secondary schools in Fife, with all the other pressures that they have on them, are now being asked to work out how they are going to cut hundreds of thousands of pounds from their working budgets.

Does the Deputy First Minister and Cabinet Secretary for Education and Skills think that that is acceptable? I will not even start on the cuts in primary schools. How will we raise attainment when we are seeing such levels of cuts in front-line education in our classrooms?

**John Swinney:** I attach the greatest of importance to investment in education, which is the foundation of the Government's education approach, particularly with the focus on the Scottish attainment challenge and pupil equity funding. I reiterate to Mr Rowley the point that I made in my earlier answer: Fife Council's budget—its spending power—will increase by £18.8 million as a consequence of the decisions taken in the Government's budget.

We are of course seeing funds being distributed directly to individual schools. Schools in Fife have been allocated more than £10 million in pupil equity funding, which I know from my various visits

around Fife has been used very effectively by Fife schools to meet the needs of young people.

I have just come from a meeting of the Scottish education council, present at which was Fife Council's executive director of education, who is leading the south-east of Scotland regional improvement collaborative. We heard at the education council this morning about the significant plans that the improvement collaborative is deploying to support the enhancement of education in the school sector in Scotland.

I understand the points that Mr Rowley is making. Those are decisions that Fife Council must make within the overall financial allocations that are made by the Scottish Government and other sources of money that are available to it. In that regard, the Scottish Government has investment significantly in local services in Fife Council.

**Alexander Stewart (Mid Scotland and Fife) (Con):** Several heads of schools in Fife have told me that they would like to spend pupil equity funding on employing more teachers with skills in additional support needs but that the spending of such money on additional teachers is not permitted. Will the cabinet secretary clarify whether that is correct?

**John Swinney:** Of course pupil equity funding can be used to employ members of staff. I can tell Mr Stewart that 506 additional teachers have been employed under the Scottish attainment challenge and pupil equity funding arrangements. That provision exists around the country, so there is no reason why it should not apply in Fife.

To be honest, I would be very surprised if schools in Fife were facing such a difficulty, because I can think of examples in Fife where additional teachers have been recruited and are able to contribute to the education of young people.

#### Education Maintenance Allowance

**2. Ben Macpherson (Edinburgh Northern and Leith) (SNP):** To ask the Scottish Government what role the education maintenance allowance plays in encouraging young people to stay on at school. (S5O-02028)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** The education maintenance allowance programme provides a financial incentive for 16 to 19-year-olds from low-income households who are attending non-advanced learning in school or college, or who are on an activity agreement, to stay in learning. Home-educated pupils are also eligible.

The EMA programme is an entitlement in Scotland, unlike in the rest of the United Kingdom. The Scottish Government wants young people to be able to choose from the same learning opportunities, regardless of their background or circumstances.

**Ben Macpherson:** I welcome that the Scottish National Party Government continues to recognise the importance of the EMA programme in allowing our young people to make learning decisions that are based on their abilities and aspirations rather than their financial circumstances.

What proportion of EMA recipients live in our most disadvantaged areas?

**John Swinney:** The most recent statistics on education maintenance allowance show that in 2016 the proportion of recipients who live in Scotland's 20 per cent most deprived areas increased to 36.8 per cent from 34.9 per cent in the previous year. The figures tell us that education maintenance allowance arrangements continue to make a positive difference to young people from the most disadvantaged areas in Scotland. I welcome the increase that has taken place.

**Mary Fee (West Scotland) (Lab):** This morning, the Education and Skills Committee heard evidence that families lose access to clothing grants and tax credits when a pupil applies for education maintenance allowance. Families are falling into poverty and debt, due to the gap in processing applications. What action will the Scottish Government take to prevent families from falling further into debt as a result of applying for EMA?

**John Swinney:** I will look with care at the transcript of this morning's committee meeting and follow the evidence. It is my understanding that the decision on whether other benefits are forfeited as a consequence of an application for EMA is enshrined in the rules and eligibility criteria of individual local authorities.

I will consider with care the point that Mary Fee raised, because I would be concerned if a family who applied for an education maintenance allowance forfeited access to other elements of provision, such as a school clothing grant—because an EMA will be available to an older pupil, who will be bound by the rules on uniform in relation to which school clothing grants are designed to try to assist.

If Mary Fee has particular information to draw to my attention, I will look at it carefully, because what she described is certainly not the policy intention or the situation that I want to emerge. I will examine the detail, to see what the Government can do to rectify the situation. It might

be to do with individual decisions that are taken by local authorities, over which I have no control.

### **Science, Technology, Engineering and Mathematics Teaching Initiative**

**3. Rhoda Grant (Highlands and Islands) (Lab):** To ask the Scottish Government what action it is taking to encourage female pupils to consider enrolling in the STEM teaching initiative run by the universities of Dundee and the Highlands and Islands. (S5O-02029)

**The Minister for Further Education, Higher Education and Science (Shirley-Anne Somerville):** The Scottish Government's STEM strategy includes a range of actions that are aimed at encouraging women and girls to take up STEM-related careers. The partnership induction model that is being developed by the University of Dundee, supported with £240,000 of Scottish Government funding, will contribute to that goal.

The University of Dundee has more females than males across its STEM teacher education programmes, and it has put in place an action plan to encourage the on-going recruitment of underrepresented groups, including females, into STEM teaching. The new programme is being marketed in conjunction with four partner local authorities, who will also actively encourage female applicants.

**Rhoda Grant:** There is a big skills shortage in engineering and very few women are taking up a career in the area. Indeed, women make up only 14.4 per cent of the workforce in all STEM careers. That will not change, because there appears still to be a shortage of girls taking up STEM subjects in school. Such subjects are crucial to a career in the sector. What is the Scottish Government doing to ensure that more girls choose maths and science at school?

**Shirley-Anne Somerville:** A number of measures are detailed in the STEM strategy, which I had the pleasure of launching last year. At the recent second meeting of the implementation group for the strategy, we discussed issues on gender imbalance, including how we can tackle, in schools, the unconscious bias that goes on in society and build on the fine work of the Institute of Physics in that area.

We are also looking at what can be done to tackle apprenticeship challenges—that work is being led by my colleague Jamie Hepburn—and further and higher education challenges, through the Scottish Further and Higher Education Funding Council's gender action plan. A number of other methods are being dealt with through the STEM strategy. For example, some of the key performance indicators deal specifically with

gender imbalance challenges in schools and encouraging take-up.

If Rhoda Grant has further questions in relation to particular aspects of the STEM strategy and how we can take it further, I will be happy to take them up with her in due course.

**Clare Adamson (Motherwell and Wishaw) (SNP):** Following the recent refresh of the Royal Society of Edinburgh's publication "Tapping all our Talents", what measures is the Government taking to ensure that women who are qualified but not currently working in STEM have an opportunity to take up the new initiatives?

**Shirley-Anne Somerville:** Last night, I had the pleasure of receiving an update on that—albeit briefly and informally—when I attended a UK Research and Innovation reception, at which I spoke to Professor Lesley Yellowlees, who chairs the RSE working group. Government officials, the RSE and I are having very detailed discussions on how we can support the RSE as regards the data that it is looking at. We have committed to working with the RSE to look at the updated recommendations that it will give once it has refreshed the document. As I understand it, its consultation is on-going.

At the moment, we have a number of measures to tackle gender imbalance, including funding through the equalities budget to support Equate Scotland, which, as Rhoda Grant will know, is an organisation that works to tackle underrepresentation of women in the STEM sector—for example, through careerwise, which is a placement scheme that is exclusively for women studying STEM subjects at universities and colleges. Also through Equate Scotland, there is funding of up to £50,000 to deliver a women returners programme.

We are therefore taking action at the moment but are very aware of the issue. We will help the RSE in any way that we can and will listen very carefully to the recommendations that will come from its refresh of the document.

#### **South Lanarkshire Council Education Resources (Meetings)**

4. **James Kelly (Glasgow) (Lab):** To ask the Scottish Government when it last met officials from South Lanarkshire Council's education resources. (S5O-02030)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** My officials regularly meet officials from South Lanarkshire Council's education resources to address a range of issues.

**James Kelly:** Last month, the Child Poverty Action Group told the Education and Skills

Committee that young people face a postcode lottery as far as their opportunities in education are concerned. That is emphasised in South Lanarkshire Council's attainment figures, in which just more than a third of pupils are able to attain national 5 standard, which is below the national average. Does the cabinet secretary agree that the objective should be to give a fair opportunity to all young children in Scotland? That is constrained by the Government's policy of penalising councils through cuts, as demonstrated by the cuts of £134 per head that South Lanarkshire Council's citizens have faced since 2014.

**John Swinney:** I was on the verge of agreeing with quite a bit of Mr Kelly's question until he got to the last bit. However, on the first bit of it I unreservedly agree that the whole focus of the Government's education policy—with its emphasis on the achievement of excellence and equity for all—is on ensuring that, regardless of their background, young people are able to achieve their potential in the education system. The disparities that have existed in that system for all of my lifetime are what we are trying to tackle in focusing on the attainment agenda.

I will make three points in relation to South Lanarkshire. First, South Lanarkshire Council's spending power has increased by £16.3 million, or 3 per cent, in this financial year compared with the previous year.

Secondly, in the current financial year, schools in South Lanarkshire will benefit to the tune of just short of £8 million in pupil equity funding. I have seen schools taking action to address the individual issues that confront them within their own localities as a consequence of having the pupil equity funding resource available to them. All the localities that Mr Kelly is concerned about have the means available to help them to address the attainment challenge.

Thirdly, in the context of having the resources available for schools, there has been an increase in the number of teachers who are available in South Lanarkshire schools. The latest census shows that there has been an increase from 3,202 to 3,282 teachers. That is a welcome indication of the priority that is allocated to education and to increasing the number of teaching professionals employed to educate our young people.

#### **Knife Crime (Schools)**

5. **Jamie Greene (West Scotland) (Con):** To ask the Scottish Government what action schools take to protect children from knife crime. (S5O-02031)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** All staff in schools share a



responsibility for identifying the care and wellbeing needs of children and young people. Schools should establish open, positive and supportive relationships across the whole school community.

Education authorities, in consultation with key partners, including staff unions, should develop their own policy on knives and offensive weapons within the wider context of positive relationships, learning and behaviour. The Scottish Government is investing significantly in various violence reduction preventative approaches with young people across Scotland as part of a wider strategy to promote positive relationships and behaviour.

Since 2007, we have invested more than £14 million in violence reduction programmes for young people, and we continue to expand the work undertaken with children and young people on those programmes.

**Jamie Greene:** Recent figures show that the number of pupils being excluded from school for incidents involving conventional and even improvised weapons is at a five-year high, with an average of two exclusions a day involving a violent incident with a weapon. Those are shocking statistics. If it is the cabinet secretary's understanding that local authorities have standardised their processes on gathering knife crime data, why are incidents at a five-year high? What comfort can he offer to parents that they are sending their children to a school environment that is weapon free and safe?

**John Swinney:** I agree with the aspirations behind Mr Greene's question: parents should expect to be able to send their children to weapon-free schools and a safe environment. Yesterday, I chaired a meeting of the Scottish advisory group on behaviour in schools, or SAGBIS. That wider stakeholder group focuses on putting in place the mechanisms to enable positive behaviour and a positive ethos to be created in schools, with an emphasis on removing the incidences of any weapon carrying, so that the policy environment that Mr Greene expects to see is present in every school.

The statistics to which Mr Greene refers are a concern to us because, for some time, we have seen reductions in the overall levels of exclusion. In Scottish education generally, the levels of exclusion are falling, but we have seen a rise in exclusions relating to weapons and weapon carrying. That tells us that we must be vigorous in ensuring that activities such as the no knives, better lives campaign, which is a youth engagement programme, and the mentors in violence prevention programme are felt within individual schools, and that the positive behaviours that we expect to see are prevalent in all our schools. I assure Mr Greene that those considerations are very much uppermost in the

minds of ministers and our stakeholders in trying to ensure that we create the environment to which he referred in his question.

**James Dornan (Glasgow Cathcart) (SNP):** Obviously this is a serious issue. Although it is probably harder now for young people to access knives by buying them, what sort of discussions has the Government had with the United Kingdom Government on restricting the online sale of knives?

**John Swinney:** In the aftermath of the Bailey Gwynne tragedy, the Government considered the recommendations of the report that examined the circumstances of that tragedy, and the justice secretary then made representations to the UK Government about working together to raise concerns about the online sale of knives and the need for a cohesive approach by us and the UK Government in relation to what actions to take.

The UK Government agreed with that approach, and in October, it published a consultation on knives, corrosive substances and firearms. The consultation extended some proposals to Scotland and it ended just before Christmas. The UK Government is currently working with our officials on legislation to address concerns about online sales of knives. These are reserved responsibilities, but we are keen to co-operate with the UK Government on putting in place the most effective regime that we can to tackle the issue.

**The Presiding Officer (Ken Macintosh):** I appreciate the detail of the cabinet secretary's answers, but I would encourage some succinctness so that we can get through some more questions.

### **Science, Technology, Engineering and Mathematics Teachers**

**6. Rona Mackay (Strathkelvin and Bearsden) (SNP):** To ask the Scottish Government how it encourages people to consider becoming teachers in STEM subjects. (S5O-02032)

**The Minister for Further Education, Higher Education and Science (Shirley-Anne Somerville):** We have taken a series of actions to encourage more people into teaching science, technology, engineering and mathematics subjects. Our teaching makes people recruitment campaign targets STEM undergraduates and career changers to consider teaching as a career. We have increased student intake targets for STEM subjects and we are offering bursaries of up to £20,000 for up to 100 career changers to train to teach in STEM subjects.

We are also supporting innovative new routes into teaching in STEM subjects. They include the University of Strathclyde's masters course for

STEM graduates to complete an initial teacher education course alongside a masters degree.

**Rona Mackay:** In my constituency of Strathkelvin and Bearsden, one school is only able to offer an elective computing class to third-year students due to a shortage of teachers. Does the minister agree that the subject is crucial to young people's future careers and, wherever possible, should not be compromised?

**Shirley-Anne Somerville:** I absolutely agree that digital skills are crucial both for everyday life and for Scotland's future economic prosperity. Indeed, only yesterday, I was at Tulliallan primary school, where I heard first hand about the work that is being done in a number of primary and secondary schools to develop young people's digital skills through the digital schools awards programme.

We recognise that some councils are facing challenges in STEM teacher recruitment. That is why the Government has taken a number of actions to support further improvement in teacher recruitment. I mentioned some of those actions in my original answer. There is also, for example, work on-going with the University of Aberdeen to allow former oil and gas workers to train as teachers. There are the bursaries that I mentioned earlier, and we are also working with the University of Dundee, where we are looking at highly qualified graduates and career changers who specialise in science and technology and related subjects. This is an issue that the Government is determined to take more concerted action on.

**Oliver Mundell (Dumfriesshire) (Con):** There are some encouraging signs that uptake in highers and advanced highers is increasing in some science subjects, but in others, uptake is falling. What is the Scottish Government doing to improve uptake across the board?

**Shirley-Anne Somerville:** We are doing a number of strands of work, as I mentioned earlier, on encouraging more young people—especially young women—to take up STEM subjects in school and then within apprenticeships, further education or higher education. Most of the strands of work are detailed in the STEM strategy.

We are looking to inspire, and we are looking to connect the work that we are doing on inspiring young people all the way through early years, primary and secondary school subject choices with ensuring that those young people know about the exciting opportunities for them to access STEM careers at the end of that process.

Uptake of STEM subjects is something that the Government is taking action on with the Scottish Further and Higher Education Funding Council. In the STEM implementation group, we have

representation from the Convention of Scottish Local Authorities and from the Association of Directors of Education in Scotland.

We are taking a whole-system approach in looking carefully at the challenges that we have in attracting more young people into STEM subjects. We want them to be able to see the opportunities that are undoubtedly out there for them.

**Iain Gray (East Lothian) (Lab):** How many people have signed up to the career changers and bursary programmes?

**Shirley-Anne Somerville:** There are a number of schemes that individuals can go on in universities that are about encouraging STEM teaching careers. Many of the schemes have started, and others are due to start in 2018. If Iain Gray would like detailed figures on the numbers of people who have started specific courses, I would be happy to extend that information to him. We can see the progress that we are making to date and who has signed up, but we want to encourage more people to take advantage of the courses that are due to start.

#### Education Governance (Island Proofing)

**7. Tavish Scott (Shetland Islands) (LD):** To ask the Scottish Government whether any changes that will be introduced to the governance of education will be island proofed. (S5O-02033)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** Any changes that are proposed will be island proofed.

**Tavish Scott:** The cabinet secretary will be aware that Cunningsburgh primary school in Shetland has a headteacher who teaches. Shetland Islands Council advises me that it is becoming increasingly difficult to recruit headteachers who also have to teach as part of their day-to-day responsibilities. Given that reality not just in Shetland but in other parts of the country, how will that work, in the context of island proofing, if the cabinet secretary plans to increase headteachers' responsibilities?

**John Swinney:** This consideration applies in any circumstances, island or mainland, around the country: I want to ensure that young people can access the strongest quality leadership and learning and teaching in individual schools, because those two elements are the foundation of a successful education at local level. All reforms that we bring forward will be about strengthening leadership capability and ensuring that leadership has more support available to it, and about support also being available to enhance the quality of learning and teaching.

I understand the different circumstances of many schools in the constituency that Mr Scott represents. We will ensure that the steps that we take take due account of those considerations in the final design of our legislative proposals.

**Jamie Halcro Johnston (Highlands and Islands) (Con):** Yesterday, a number of people protested outside Orkney Islands Council against proposed cuts to support for learning budgets, and the council has now decided not to proceed with those proposals. The cabinet secretary will be aware that because of their geography and demographics, island communities are often less able to collaborate and share among schools the costs of services such as support for learning. What provision is there to ensure that budgets that are assigned for support for learning are sufficient to meet local needs? Have ministers had any contact with Orkney Islands Council about its particular proposals?

**John Swinney:** To my knowledge, there has been no dialogue with the council about its proposals, but they are ordinarily and properly a matter for Orkney Islands Council to consider.

Mr Halcro Johnston asked about the challenges of collaboration in island communities. In my view, the best example of interauthority co-operation on education policy is the northern alliance, which includes Orkney Islands Council. What I have detected from talking to practitioners around the north of Scotland is that they are feeling the benefit of that, particularly on strengthening learning and teaching, which is facilitated by that co-operation among a number of authorities. The smaller and more remote local authorities are benefiting enormously from co-operation with other authorities. There is, therefore, good work going on in that respect, and it is work that pays proper respect to the democratic interests and perspective of Orkney Islands Council, and enables the council to co-operate with others to enhance education provision for the young people of Orkney.

### Teachers (Pay Campaign)

**8. Anas Sarwar (Glasgow) (Lab):** To ask the Scottish Government what its response is to the Educational Institute of Scotland's campaign value education, value teachers, which is calling for a restorative pay rise for teachers. (S5O-02034)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** We value Scotland's teachers highly. We are committed to taking an active role in the current discussions through the Scottish negotiating committee for teachers and I urge everyone round the table to take a constructive approach. This Government is the first anywhere in the United Kingdom to commit to lifting the 1 per

cent public sector pay cap, and the teachers' pay deal for 2017-18 is an example of that.

**Anas Sarwar:** The truth is that, under Scottish National Party management, our teachers have seen their pay go from among the highest in the Organisation for Economic Co-operation and Development countries to well below the average. As well as that, they are now teaching some of the biggest classes in Europe. The Government has cut 4,000 of their colleagues and has managed to create a teacher recruitment crisis. When will the cabinet secretary accept that it is not divisive reforms that our teachers need, but the pay that they deserve, and support and resources to do the job that they do so well in difficult circumstances?

**John Swinney:** I remind Mr Sarwar that we have been living in a period of fiscal austerity that has been applied by United Kingdom Governments going back to when his party was in power before the 2010 election. It is all very well for Mr Sarwar to come here and talk about pay constraint, but pay constraint was applied by the Labour Government when it was in office because of the financial crisis that it presided over in the aftermath of 2008. It is not easy to hear Mr Sarwar come here with his simple solutions to the problem.

I am committed to substantive negotiation with the teaching profession. As I said in my original answer, our work in 2017 has seen us deliver a pay deal for teachers that has moved outwith the pay caps that have been in place, and I welcome that. We are committed to putting in place support and assistance to enhance the teaching profession, because I want teaching to be an attractive career. I remind Mr Sarwar that, over the past 12 months, the number of teachers in post in Scotland has increased by 543, which is very welcome.

### Early Learning and Childcare (Funding)

**9. James Dornan (Glasgow Cathcart) (SNP):** To ask the Scottish Government what progress has been made with the Convention of Scottish Local Authorities regarding funding for increasing the provision of early learning and childcare to 1,140 hours per year. (S5O-02035)

I suspect that I know the answer.

**The Minister for Childcare and Early Years (Maree Todd):** On 27 April, the Scottish ministers and COSLA leaders reached a landmark agreement on a multiyear revenue and capital funding package for the expansion of early learning and childcare. The agreement, which is the culmination of more than two years of hard work by local authorities and the Scottish Government, represents a shared understanding of the costs that are required to deliver the

expansion in entitlement to funded early learning and childcare to 1,140 hours from August 2020. It is evidence of real partnership working to deliver a shared ambition to give all our children the best start in life. Under the agreement, the Scottish Government will provide local authorities with additional recurring revenue funding of £567 million per year by 2021-22, which will be the first full financial year of the expansion. In addition, the Scottish Government will provide local authorities with capital funding of £476 million over four financial years, from 2017-18 to 2020-21 inclusive.

**James Dornan:** I congratulate the minister on her role in reaching that landmark deal with local government, which will ensure that our children get the best possible start in life. Will she outline how the expansion will deliver the flexibility that parents need to support them in work or training, and will she say whether she thinks that flexibility is already improving?

**Maree Todd:** I believe that the simple increase in the number of hours available to parents will make a massive difference to every family in the land. It will save £4,500 per year per child for each family. The funding follows the child model, which is underpinned by the national standard, will be a provider-neutral means of delivering flexibility to parents, which will absolutely transform their opportunity to work and to pursue education.

#### **Aberdeenshire Council (Meetings)**

**10. Mike Rumbles (North East Scotland) (LD):** To ask the Scottish Government when the education secretary last met the director of education and children's services for Aberdeenshire Council. (S5O-02036)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** I last met the director of education and children's services for Aberdeenshire Council on 7 March.

**Mike Rumbles:** Will the cabinet secretary meet the new director when they are appointed and discuss with them the overall state of staff morale in our schools in the north-east? Will he outline today what, specifically, he can do to improve staff morale?

**John Swinney:** I am happy to engage with Mr Rumbles about his perspective on those matters but, when I go around schools, I meet teachers who are positive and utterly motivated by the work that they are doing to educate young people. I was in Smithycroft secondary school in Glasgow this morning, where the staff and leadership team are buoyant about the condition of Scottish education.

We are taking a range of different measures to enhance the recruitment of teachers in the north-east of Scotland, including some of the new routes

into teaching that we are developing. We are directly supporting the delivery of education, and Aberdeenshire Council is benefiting to the tune of £3 million in pupil equity funding into its schools.

If Mr Rumbles has particular concerns, I am happy to consider them and to do what I can to address them with the director of education at Aberdeenshire Council when they are appointed after the retirement of Maria Walker.

#### **Young People (Rights)**

**11. Ivan McKee (Glasgow Provan) (SNP):** To ask the Scottish Government how it enshrines the rights of young people, and how it plans to further embed these. (S5O-02037)

**The Minister for Childcare and Early Years (Maree Todd):** We are committed to enhancing children's rights in all aspects of Scottish life. The Children and Young People (Scotland) Act 2014 places specific duties on all ministers to consider steps that might give better or further effect to the United Nations Convention on the Rights of the Child. Those provisions take us further than any previous Scottish Government. We continue to look for opportunities, issue by issue, to apply the principles of the convention when we consider it right and proper to do so, for example, in raising the minimum age of criminal responsibility from 8 to 12 years old, and in supporting Mr Finnie's proposals to introduce a legislative ban on the physical punishment of children.

It is fitting that, in the year of young people, which is a global first, we have commenced a comprehensive audit of the most effective and practical way to further embed the principles of the UNCRC into policy and legislation, including the option of full incorporation into domestic law.

**Ivan McKee:** Will the minister outline the Scottish Government's position on the right of young people to opt out of religious observance in schools? Will the forthcoming education and governance bill enshrine that right?

**Maree Todd:** As Mr McKee might be aware, the Scottish Government's statutory guidance on religious observance, which was amended in March 2017, states:

"schools should include children and young people in any discussions about aspects of their school experience, ensuring their views are taken into account."

The law currently provides a right for

"parents to withdraw their children from participation"

in religious observance. The statutory guidance makes it clear that local authorities must ensure that pupils' view are taken into account, rather than providing pupils with a direct opt-out. The Scottish Government's view is that pupils' views should be supported to make their views and

preferences clear. Ministers are open to exploring the best way to give effect to children's rights, as expressed under the UNCRC. However, any changes to the current statutory position would need to be subject to full consultation with all key stakeholders.

#### **Newbattle High School (Digital Centre of Excellence)**

**12. Colin Beattie (Midlothian North and Musselburgh) (SNP):** To ask the Scottish Government whether it will provide an update on the development of the Newbattle high school digital centre of excellence. (S5O-02038)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** The development of a digital centre of excellence as part of the new high school in Newbattle is an initiative of Midlothian Council. I commend the collaborative approach that is being taken by the council in seeking to ensure that young people across all Midlothian secondary schools have access to specialist digital learning and a diverse range of pathways to follow into digital jobs. I am aware of a funding shortfall for the digital centre of excellence at the new school and have asked my officials to explore opportunities for supporting the project's progress.

**Colin Beattie:** The cabinet secretary will be aware that Newbattle high school's catchment area has too many pockets of relative deprivation. Does he agree that all those involved in the creation of the centre should be congratulated on this groundbreaking and forward-thinking initiative, which will have a considerable positive effect on the life chances of young people in the area?

**John Swinney:** Yes, I agree. It is an excellent initiative by Midlothian Council. It recognises the need to ensure that there are clear pathways for young people to access education and have links into the world of work. It fits comfortably into the developing Scotland's young workforce agenda and, as I indicated in my earlier answer, I am very keen to see whether there is any way in which we can be of assistance.

#### **Music Tuition (Schools)**

**13. Liz Smith (Mid Scotland and Fife) (Con):** To ask the Scottish Government what discussions it is having with local authorities regarding the provision of music tuition in schools. (S5O-02039)

**The Deputy First Minister and Cabinet Secretary for Education and Skills (John Swinney):** The Scottish education system devolves decision making to the most appropriate level, which enables local education authorities to make choices that meet their local circumstances and needs. I am, however, concerned about the

decision by a number of local authorities to reduce access to instrumental music tuition for young people. I have asked my officials, while respecting the autonomy and responsibility of councils, to assess the impact and identify ways of working with key stakeholders to ensure that instrumental music tuition remains accessible in the future.

**Liz Smith:** Local authorities of all political persuasions are having great difficulty on the issue. What is the timescale for your working group to report to Parliament? As you rightly say, it is a very urgent matter.

**John Swinney:** There is work under way that has been led by John Wallace, who was formerly the principal of the Royal Conservatoire of Scotland. I look forward to meeting the members of the music education partnership to discuss their thinking on this matter. It is an issue in which both I and the Cabinet Secretary for Culture, Tourism and External Affairs are actively involved. I do not have a specific timescale to offer Liz Smith, but I assure her that I will be happy to engage in dialogue with members of all political persuasions to ensure that this important characteristic of education in Scotland is available for young people across our country.

**The Presiding Officer:** That concludes portfolio questions.

## National Health Service (Financial Accountability)

**The Presiding Officer (Ken Macintosh):** The next item of business is a debate on motion S5M-11984, in the name of Miles Briggs, on national health service financial accountability. I urge members who wish to speak in the debate to press their request-to-speak buttons—whenever they wish, or as soon as possible.

For members' interest, I note that the Scottish Conservative Party has asked to use the new flexibility in debate management to increase its number of speakers from three to four. That means that Conservative speakers will have one minute less: they will have five-minute rather than six-minute speeches. However, we have quite a lot of time available over the afternoon, so I encourage all members to take interventions.

14:42

**Miles Briggs (Lothian) (Con):** Our Scottish national health service faces many challenges. I believe that it is the job of all of us in this Parliament to work to create a sustainable and financially secure NHS for Scotland.

Recent weeks have demonstrated the level of financial mismanagement in our NHS that the Scottish National Party Government has presided over. Perhaps the most obvious example has been the scandal in NHS Tayside, which brought the issue to the public's attention in the most shocking of ways, when it was revealed that NHS Tayside had taken more than £2 million from its charitable endowment fund. Donations from the public or from bequests in wills were being used simply to help to cover the day-to-day running costs of that health board.

The current financial situation in NHS Tayside is one that Audit Scotland has, over a number of years, highlighted as "high risk". According to Audit Scotland, NHS Tayside must make more than £205 million of savings over the next five years, and it has overspent in areas such as workforce costs, prescribing and clinical supplies.

The situation in Tayside is shocking, but that board is far from on its own. Last week, my health board of NHS Lothian revealed to the Parliament's Health and Sport Committee that it will require £31 million just to stand still at 2017 levels. NHS boards are queuing up at the door of the Cabinet Secretary for Health and Sport to beg for financial brokerage just to be able to keep delivering the health and social care services that people across Scotland rely on.

It is worth reflecting that, when the SNP Government entered office in 2007, Audit Scotland

noted that the Scottish NHS had a budget surplus of £50 million. Today it is predicted that our Scottish NHS could be overspent by more than £400 million, and it is struggling to find the cuts that it needs to bridge the current gaps. All that comes despite the Scottish Government receiving additional Barnett consequential funding from the UK Government of more than £2.45 billion.

Presiding Officer, for every MSP in this Parliament, it must often seem that every warning light is lit on NHS Scotland's dashboard. NHS Scotland has failed to meet seven out of 10 key waiting time targets. More than a quarter of children who are waiting for mental health services are waiting too long—some for up to a year. More than one in eight cancer patients is waiting more than 62 days for urgent treatment. One in four general practices in Scotland has a vacancy. A number of GP practices have been taken over by health boards because of staff shortages. Nearly one in 10 GP surgeries in Scotland is turning away new patients. There are more than 400 vacant consultant posts and more than 2,500 vacant nursing and midwifery posts.

**Gillian Martin (Aberdeenshire East) (SNP):** What impact will Brexit have on NHS staffing?

**Miles Briggs:** That is a very interesting point, because, 11 years into the SNP Government, Brexit is the excuse. The First Minister has cut training places. Any vacancies in our Scottish NHS are the result of decisions by the SNP Government—no one should forget that.

Care homes across Scotland, which provide care, are closing at a rate of one per month. Just yesterday, figures were published that showed that instances of delayed discharge of patients have increased by 11 per cent from February. Delayed discharge has a huge impact on people's lives when they are stuck in hospital and unable to get home, or when the appropriate care package cannot be put in place.

**Graeme Dey (Angus South) (SNP):** Will the member take an intervention?

**Miles Briggs:** I would like to make progress, but I will come back to the member later.

The Cabinet Secretary for Health and Sport will be acutely aware of the cases—I have raised them with her a number of times—of my constituents in Lothian who are stuck in hospital, sometimes for hundreds of days, and are unable to get in place the care package that they need. The increasing level of delayed discharge is a significant indicator of a crisis in our health and social care services, and the crisis is increasing in many communities.

**John Scott (Ayr) (Con):** Does the member agree that it is absolutely appalling that 33,000 bed days have been lost in NHS Ayrshire and

Arran in the past year? Can he tell me the overall number of bed days that have been lost due to delayed discharge across the health service in Scotland? *[Interruption.]*

**Miles Briggs:** SNP members do not like to hear the truth for some reason.

Such stories are a shocking indictment of the SNP Government's record in charge of our health and social care services.

**Fulton MacGregor (Coatbridge and Chryston) (SNP):** Will the member take an intervention?

**Miles Briggs:** No. I want to make some progress.

The issue is not just about numbers on a spreadsheet; it is about people's lives—the lives of our fellow Scots and loved ones. The cabinet secretary and the SNP Government must get a grip of the situation.

That is why the Scottish Conservatives have called for specific action and for the strengthening of the Parliament's oversight and scrutiny of our NHS finances. That is why we have called in our motion for the cabinet secretary to publish the full details of the current financial position of every NHS board and integration joint board, which is information that I believe we should all have. The Scottish Government should commit to provide Parliament with monthly updates.

I welcome the email that the cabinet secretary sent to me at half past 12 today, which accepted those very points and outlined how she will take forward enhanced reporting of NHS finances, which will begin in June. I have other asks that I will be making beyond that.

Perhaps the most concerning issue that we should be highlighting today is that the financial crisis in our NHS that is being faced by the 31 integration joint boards has yet to be revealed.

**Graeme Dey:** Among other things, the Conservative motion talks about IJB finances and being held to account. Will Miles Briggs join me in condemning the actions of Angus Council, which has failed to pass on to the local IJB more than £1 million of an additional £1.56 million that was provided by the Scottish Government to support health and social care activities? Does he agree that the ruling coalition in Angus Council, which includes Conservative councillors, should be held to account for depriving the IJB and my constituents of much-needed funding?

**Miles Briggs:** That is why we are debating the issue today. The member needs to understand the problems that are faced by the health and social care sector in Scotland. We all agree that the integration of health and social care is the right

direction of travel to ensure that people receive the vital care that they need at the right time and in the right place, with a focus on community-based and preventative care models.

However, the cabinet secretary and Graeme Dey need to be clear that the SNP reform is not delivering and that there are growing concerns, which the member has outlined, from those who sit on IJBs and take the decisions. That includes many SNP councillors across Scotland, some of whom have contacted me about the role, the remit and the effectiveness of the decisions that are being taken—even SNP councillors have given up on the Government.

The integration joint boards are now responsible for almost £8.73 billion of taxpayers' spending on our health and social care services, yet the financial accountability and reporting within IJBs is inconsistent and erratic at best.

**Fulton MacGregor:** Will the member take an intervention?

**Miles Briggs:** No. I want to make some progress.

Increasingly, the budget pressures that IJBs face are directly influencing their decision making in relation to proposals such as cutting mental health beds and services.

Audit Scotland has called on the Scottish Government to make fundamental decisions about how services are provided. I welcome the Government's acceptance that we need greater financial accountability in relation to IJBs, but I believe that we need to take time now to make sure that they are truly fit for purpose. This is a major reform that the Parliament passed in the previous session, and we need to ensure that it is fit for purpose for our communities in this session. Scottish Conservatives, therefore, have also asked in our motion for the cabinet secretary to commit to a review of the integration joint boards in order that we can not only fully understand their current financial position but look to how effective they have been and what future reforms are needed. We cannot and will not just stand on the sidelines and watch a crisis in social care in Scotland build ever greater.

I did not want to make this debate personal. I believe that the future of our NHS and its financial sustainability are too important for that. *[Interruption.]* As I have said, in recent weeks—perhaps SNP members should start to listen—when Labour and the Liberal Democrats have called for the cabinet secretary to be sacked, I have not gone down that road. The truth is that I do not think that there is anyone on the SNP benches who could step up to the challenge. We have had a look around the cabinet secretary. Fergus Ewing—is he in today?—has presided

over the farm payments fiasco. Our once world-class education system has declined under Angela Constance and John Swinney. Further, where do we start with regard to Michael Matheson and the problems and issues that are facing Police Scotland and the SNP's centralising agenda?

The question is, who on the SNP benches thinks that they can do any better? I ask them to put up their hand if they think that they can. Anybody?

**Christina McKelvie (Hamilton, Larkhall and Stonehouse) (SNP)** *rose*—

**Miles Briggs:** I did not have her in mind, but—

**Christina McKelvie:** On a point of order, Presiding Officer. I am interested to hear what the Conservatives say in the debate, but personal attacks, personal slights on members of this Parliament and bringing down the reputation of this chamber are not what we should be hearing from the Tories today. I would like Mr Briggs to speak to his motion instead of impugning the reputations of members in this chamber.

**The Presiding Officer:** I am alert to any personal attacks that take place. However, there is some room for robust exchanges and, on this occasion, I think that the remarks were within those bounds. Nevertheless, I encourage all members to keep to the substance of the debate and not to personalities.

**Miles Briggs:** I will be clear to the cabinet secretary. The mismanagement and financial chaos that are facing our NHS cannot continue. They are impacting the morale of our health service staff. That is exactly why the Scottish Conservatives are putting the SNP Government on notice over its handling of the financial crisis that faces Scotland's health boards. There is a need for action to prevent the next major financial crisis in the integration joint boards from happening.

The two critical issues that face our Scottish NHS have developed on the SNP's watch over the past 11 years, and we now need a Government that will get a grip of the dire situation that has been created. That is why I believe that the Parliament needs to seek the urgent action that we propose. We must return our NHS to a secure and sustainable financial footing.

I move,

That the Parliament notes the financial problems in NHS Ayrshire, Tayside and Lothian; understands that these issues are being faced across Scotland; notes the ongoing lack of transparency on the state of board and integration joint board finances; calls for the immediate publication of the current financial position for all NHS bodies and for a progress review of integration joint boards, and believes that, failing sustained and immediate action, the Cabinet Secretary for Health and Sport should be held accountable

for the ongoing problems.

14:53

**The Cabinet Secretary for Health and Sport (Shona Robison):** I will start by saying that I am immensely proud of our NHS. Our staff do an excellent job day in and day out. They often go the extra mile, as witnessed during the severe winter weather, when heroic efforts were made to get to work to keep patients safe. Further, with our world-leading patient safety programme, we have one of the safest systems in the world, with international interest in how that has been achieved. The vast majority of patients get a fantastic and timely service, and the fact that patient satisfaction levels are higher than ever—with 90 per cent of Scottish in-patients saying that their hospital care and treatment was good or excellent—suggests that that is the case.

I have no problem being held accountable for our NHS. That is my job. Is it a perfect system? No, it is not. Sometimes, in a system that is the size and scale of the NHS, things go wrong, and I am sure that we will hear examples of that today. However, in each of those cases, what is important is that there is an openness to reflect and learn from them, which the new duty of candour encourages.

On the point about patient safety, members may be aware that news is emerging of a breast screening error that affects 450,000 women in England. Jeremy Hunt has just made a statement to the House of Commons on the matter. Given the significant public interest in it, I reassure members and the public that the issue does not affect the NHS in Scotland. Patients should be reassured that there are no problems with our breast screening programme records or information technology systems. As usual, all women should continue to be aware of changes to their breasts and, if they have any concerns, should see their general practitioners. Scottish Government officials will work with Public Health England to identify any women affected in England who have subsequently moved to Scotland.

Like every health system in these islands and beyond, our NHS sometimes struggles to cope with rising demand. Despite record high NHS staffing—it is up by more than 13,000—our performance on key targets is not what I would want it to be. Although Scotland's core accident and emergency services have been the best performing in the UK for more than three years and are 10 per cent better than they were three years ago, some sites still struggle and need to improve. Although there is now a downward trend in delayed discharge, with a reduction of 7 per cent in total bed days lost compared to the previous year, there is still much work to be done,



especially in areas such as Lothian. That is why we are driving forward investment in, and reform of, our NHS to meet the rising demand and challenges now and into the future.

**Miles Briggs:** In 2014, the cabinet secretary stood where she is and said that she would achieve zero delayed discharges in our hospitals. When will that target be met?

**Shona Robison:** Miles Briggs is absolutely right. I want to eradicate delayed discharge, but it is a difficult thing to do. He alluded to some of the challenges earlier on. Integration joint boards work hard, but there is huge variation in performance on the matter. For example, delay has almost been eradicated in Glasgow, whereas in areas such as Edinburgh it has not. A new chief officer is in place who will do a fantastic job in that domain. I do not underestimate the scale of the problem, and good ideas are always welcome, wherever in the chamber they come from.

On investment in the NHS and care services, I turn to the financial issues in the motion. I am more than happy to address them. Ensuring that there are sufficient resources in the NHS is something that I do every day. The Scottish Government's budget for 2018-19, supported by the Greens, delivered additional investment in health of more than £400 million. That takes the resource budget to £13.1 billion. The Government remains on track to deliver its commitment to increase health resource spending by £2 billion by the end of this parliamentary session.

It is clear that that level of investment has been made possible without impacting on other public services only through the progressive tax policies that we have implemented. Health spending has been £360 million more than inflation since 2016-17. Had we not taken the budget decisions that we have done, the resources that are available to our health and care services would have been considerably less.

**Mike Rumbles (North East Scotland) (LD):** The cabinet secretary will be aware that, as I have pointed out before, over the past 10 years, NHS Grampian has been short-changed by £165 million from her target figures. That difference is being reduced now, but will NHS Grampian ever get that money back?

**Shona Robison:** As I have said to Mike Rumbles on a number of occasions, NHS Grampian is one of the biggest gainers from the NHS Scotland resource allocation committee formula and it gains again this year.

I turn to the Tory motion. If the Tories are suggesting that the health and care budget is inadequate, which I think that Miles Briggs suggested in his speech, they have a responsibility to set out what level of funding they

propose and how it would be funded, particularly in the light of their opposition to the progressive use of taxation. Under the Tory tax plans, there would have been £500 million less available for public finances, including the NHS. Therefore, Miles Briggs has a responsibility to address that. Perhaps in the Tories' closing speech, we will hear about the level of resources that they think the NHS should have and where they would come from.

Many of the areas that Miles Briggs raises in his motion are areas on which I have been engaging with the Health and Sport Committee for some time. In response to the financial issues raised and the asks made in the Tory motion, I have today written to the committee, providing information on the first round of consolidated financial reports for integration authorities, an update on NHS boards' financial performance, and the development of a medium-term financial framework for health and social care. I have agreed to review the progress of the integration authorities, and I believe that that is best done through the ministerial strategic group. I am happy to share with the Health and Sport Committee the outputs and any further actions that arise from that.

I have also set out my proposal to provide monthly information on NHS boards' financial performance for 2018-19. Data for boards' first formal reporting period for the financial year will be available in June, and we will report monthly thereafter to the Health and Sport Committee. I hope that Miles Briggs and others agree that what has been set out is a reasonable proposal to address the concerns raised in the motion and to provide greater transparency and accountability to this Parliament.

In responding to the recommendation from the Auditor General for Scotland, I have committed to publish a medium-term financial framework, which will take account of key programme for government commitments, along with an understanding of the financial environment and the approach required to ensure financial sustainability. That framework will be published in the coming weeks and will set out clearly the environment in which we are operating. In particular, it will set out longer-term funding needs. I am confident that the publication of the framework will play an important part in giving greater clarity to NHS boards and integration authorities as they develop plans for the coming years, and it supports the principle asked for by the Greens.

**Miles Briggs:** As I said in my speech, I welcome the fact that the Government has accepted the reforms and has accepted the terms of our motion. Can the cabinet secretary tell Parliament what NHS Scotland's level of

overspend actually stands at today? Does she have that figure?

**Shona Robison:** We will get financial data for the first two months of 2018-19 at the end of June. I am sure that, like me, Miles Briggs wants accurate, robust information, so I say that the health finance reporting cycle has data for the first two months of the financial year published in June. That is how it happens every year. That will be made available to the Health and Sport Committee and then there will be monthly reporting thereafter.

**Miles Briggs:** Will the minister also publish data on past years' situations? It is important that the Parliament see the direction of travel as well.

**Shona Robison:** I am happy to provide that information. The 2017-18 position has already been made available to the Health and Sport Committee, but if there is any more information that I can provide I will be happy to do that. I want to meet the needs of the Parliament in terms of the budget scrutiny process.

The Auditor General has previously called for greater financial certainty for NHS boards, so I will say at this point that a UK multiyear funding settlement—as has been proposed by the Prime Minister, no less—along with this Government's commitment to pass on all health consequential, will go a long way to providing our health and social care partners with the greater certainty of funding that they need.

I welcome the opportunity to discuss with members the steps that we are taking at a local level in response to governance and accountability issues. I have given a detailed statement in Parliament setting out my response to the issues at NHS Tayside, and the details on the investigations will be scrutinised by the Public Audit and Post-legislative Scrutiny Committee in the coming months. It will be important that all parties take stock following those reviews, and that we all learn lessons from the situation in Tayside and make improvements for the future.

I set out in my statement that we would be receiving returns from all boards by 30 April. I can, however, confirm that all boards that hold endowment funds have now responded to a letter from the director general for health and social care about their approach to, and use of, endowment funds. Those responses have been passed to the Office of the Scottish Charity Regulator to review, but I can confirm today that there was nothing in the responses that is a cause for concern and that no boards are showing retrospective use of endowment funds in order to improve their financial position, as happened in Tayside. The returns have now been passed to OSCR for external scrutiny and review. I will ensure that any recommendations from OSCR in relation to the

future governance arrangements of endowment funds are fully supported.

In my time as Scotland's health secretary, spending on health has seen the largest increase of any country in the UK, and Scotland has had the largest increase per head on health spending in the UK. I will always fight for the best interests of our NHS. Reform of the NHS is equally as important as investment in it. I have set in train a huge range of actions to make the improvements that we need to see, both now and into the future, including the new primary care workforce plan, published on Monday, which will sit alongside the previous two workforce plans.

There is much in our NHS and care services to be proud of, but I am not complacent. That is why I have set out the range of actions that are already under way. I have listened to calls for greater transparency around finances and I have agreed to the actions to deliver that. That is why this Government will continue its approach of meeting the challenges that we face, delivering sustained improvement and serving the people of Scotland, now and for the years and generations ahead.

I move amendment S5M-11984.4, to insert at end:

“; supports calls for the implementation of any recommendations from the Office of the Scottish Charity Regulator (OSCR) on the future governance arrangements for NHS board endowment funds; notes the Scottish Government's commitment to publish a financial framework for health and social care, in line with the recommendations of the Auditor General, following publication of the Scottish Government's forthcoming medium-term financial outlook; believes that the Health and Sport Committee should have the opportunity to consider the framework to give further parliamentary oversight to the finances of boards and integration authorities; recognises that progressive financial and fiscal planning is necessary to ensure investment in Scotland's health, care and wider public services, and believes that the UK Government should set out its long-term plans for health and care funding in advance of the 2019 UK Spending Review, and that all health resource consequential from this should be passed on in full in Scotland.”

15:05

**Anas Sarwar (Glasgow) (Lab):** Another week, and more appalling figures on the performance of the Cabinet Secretary for Health and Sport. This is not a one-off; it is the latest in a series of failures by this cabinet secretary. Although the Tory motion and the Government amendment focus on the financial impact, which is an important issue, both ignore the human consequences: the consequences for NHS staff, who continue to go above and beyond, and for NHS patients, who are being let down by the failings of this Government.

Every time that there is a failure, we get the same old warm words and tired excuses from this health secretary when, year on year, her

performance is declining. The declining performance on workforce includes more than 3,000 nursing vacancies; one in three GP practices reporting a vacancy, with GP practices closing lists and some closing down; hundreds of consultant vacancies; and a doubling in the rate of early retirement on the health secretary's watch.

Shona Robison is right to thank the staff, but her thanks are not enough. We cannot continue to overwork, underresource and undervalue staff without there being human consequences. We heard last week from the British Medical Association and the Royal College of Paediatrics and Child Health that, such is the pressure on staff, there are now real fears over patient safety. Members should not forget that it was the cabinet secretary's best friend, Nicola Sturgeon, who as health secretary cut the number of nurse and midwife training places. We are now living with the dangerous consequences: our NHS is in the midst of a workforce crisis, for which Shona Robison must take responsibility.

I turn to the failure over delayed discharge. In February 2015, Shona Robison promised:

"I want over the course of this year to eradicate delayed discharge ... and I am absolutely determined to do that."

However, since that promise, more than 1.6 million bed days have been lost to delayed discharge and that has cost the NHS £380 million. Worse than the financial cost has been the human cost. More than 1,000 patients have died while trapped in hospital as a delayed discharge—another failure of this health secretary.

Cancer is a national priority. In the past year, more than 1,700 people who were suspected of having cancer had to wait longer than the expected treatment standard. Even after being referred for treatment by doctors, more than 1,200 people with cancer had to wait longer than the expected treatment standard. Those are shocking figures that expose the failure of this health secretary. Today, unbelievably, the health secretary has sneaked out the report that I am holding up, which shows that, rather than improving its performance, the Government's plan is to scrap the waiting time standard for cancer. That is shameful behaviour from a shameless health secretary. *[Interruption.]* I am holding the report here, and the cabinet secretary wrote the foreword. There was no press release alongside it—it was snuck out today.

So far in 2018, in our A and E departments, more than 52,000 people have waited longer than four hours. More than 7,000 have waited longer than eight hours. Unbelievably, almost 2,000 have waited for more than 12 hours. That figure is the same as the figure for the whole of 2017—another failure of this cabinet secretary.

To date, more than 3,000 operations have been cancelled in 2018 due to capacity or non-clinical reasons because hospitals could not cope. That is the consequence of the health secretary's workforce crisis. On the ambulance service, last week, Richard Leonard shared the terrible story of Margaret Goodman, but we know that that is not an isolated case. In 2017, more than 16,000 people waited more than an hour for an emergency ambulance. That is 16,000 emergency patients failed by Shona Robison.

On budgets, health boards are having to make more than £1 billion-worth of cuts over the next four years. In the health secretary's own backyard, NHS Tayside is having to make £200 million-worth of cuts over the next five years. The result is the health secretary's own health board taking money from charitable donations to support an IT system because of budget cuts imposed on it by the health secretary.

So many people have been failed—3,000 on operations, 16,000 ambulance patients, 52,000 in A and E, 1,200 on cancer waiting times and 1,700 who have been suspected of having cancer. Some 1.6 million bed days have been lost to delayed discharge. She owes not just one apology but thousands of apologies to patients across the country, yet there is no shame, no accountability and no responsibility from Shona Robison.

The uncomfortable truth is that it is not just Opposition parties, NHS staff and patients who have lost confidence in her. Even SNP back benchers are now briefing the media and calling on Shona Robison to go. We have the bring back Alex Neil campaign, led by Alex Neil, and we even have Jeane Freeman telling the media about how brilliant Jeane Freeman would be as the health secretary. In fact, it appears there are only two people in the chamber who do not think that Shona Robison should go: Nicola Sturgeon and Miles Briggs. Although I understand why the Tories would not want to talk about failing Government ministers resigning, who would have thought that it would be they who provided a fig leaf for the failings of Shona Robison?

**Miles Briggs:** Will the member take an intervention?

**Anas Sarwar:** I am in my last 30 seconds, so I will not.

**The Deputy Presiding Officer (Christine Grahame):** You can if you wish. There is some extra time.

**Anas Sarwar:** I am happy to take the intervention.

**Miles Briggs:** How many times has the member called for the cabinet secretary to go? At the last

count, I think that it was 11. Is that effective opposition?

**Anas Sarwar:** I think the interesting stat is the number of the health secretary's constituents who want her to go. Let us talk about that. A poll for *The Courier* showed that 73 per cent of people in Dundee want the cabinet secretary to go.

Scotland's NHS needs change that starts right at the top of the organisation, because the First Minister has misplaced loyalties. Her loyalty should be to Scotland's NHS, not to her friend. I ask the First Minister to do the right thing for NHS staff and patients and, for the sake of Scotland's NHS, sack this failing health secretary. *[Interruption.]*

I move amendment S5M-11984.1, to insert at end:

“; further believes that all NHS boards are experiencing financial pressures, which are added to by a need to deliver financial efficiencies; notes the patient care issues that are being experienced by boards across Scotland, as evidenced by consecutive Audit Scotland reports showing that seven out of eight key performance standards, including cancer waiting times, are not being met; understands that BMA Scotland believes that many staff are ‘under pressure like never before’, and considers that, as well as financial accountability, the Cabinet Secretary for Health and Sport should be equally accountable for the staffing and patient care issues that are being experienced in Scotland's health service.”

**The Deputy Presiding Officer:** Thank you. I call—*[Interruption.]* Mr Arthur, nobody can hear me calling the next speaker because you are being so noisy. I call Alison Johnstone.

15:13

**Alison Johnstone (Lothian) (Green):** I regret that we are being called on to address the financial problems that are facing NHS boards. In October, Audit Scotland's annual report on the NHS warned of “intensifying” pressures on our health service. It told us that financial balance is

“becoming harder to achieve each year”

and that current approaches to making savings are “unsustainable”.

Since then, new issues have come to light, not least the inappropriate transfer of e-health funds in NHS Tayside. We must therefore turn to the matter of charity endowment funds being misused, and to financial difficulties that stretch way beyond Tayside. Many boards require brokerage, and in my health board—NHS Lothian—there is an indication that there is a £31 million gap in funding, as we have heard.

The picture is not uniform, but throughout Scotland there are boards that are struggling with delayed discharges, boards that continually fail to meet child and adolescent mental health services

targets and boards where ambulance response times are not adequate. As the Royal College of Paediatrics and Child Health has highlighted, paediatricians, too, are under huge pressure. It advises that we need an additional 110 paediatric consultants over the next five years just to make sure that sick children get the care that they need.

All that raises the most serious questions about oversight and governance of our health service and social care system. However, we cannot place on health boards and IJBs additional pressure to restore financial balance by making unsustainable short-term cuts to spending and services. Labour's amendment is right to emphasise that financial pressures can be

“added to by a need to deliver financial efficiencies”.

As the Government's amendment acknowledges, we need to address funding pressures at their root with

“progressive financial and fiscal planning”,

which

“is necessary to ensure investment in Scotland's health, care and wider public services”.

NHS boards must be given a greater ability to deliver long-term budget planning. My amendment, which was not selected for debate, called for that.

Audit Scotland has often recommended a longer-term approach to financial planning across the health service. Last year, it said:

“driven by one-year funding allocations from the Scottish Government, and the need to break even each year ... a short-term approach ... makes it difficult for boards to plan and invest in longer-term policy aims”,

which are aims that we all share.

I know that the Government intends to introduce a financial framework for health and social care, but boards need more adaptability in their own right. In 2016, Audit Scotland recommended

“providing NHS boards with more financial flexibility, such as three-year rolling budgets rather than annual financial targets”.

It has also suggested reducing the pressure on boards to break even each year. It has stressed that

“Even a small amount of flexibility at financial year-end ... can make a difference.”

In November, the Health and Sport Committee published its report looking ahead to the draft budget. Many witnesses for that report stressed the need for a more sophisticated budget process. The Convention of Scottish Local Authorities said:

“A short-term input-focused budget process is an inhibitor to genuine reform.”

The Royal College of Nursing Scotland said that

“the constant annual cycle requiring budgets to break even does not allow a step change”.—[*Official Report, Health and Sport Committee*, 12 September 2017; c 5, 45.]

We all seek that step change, which is desperately needed. I urge the cabinet secretary to act on that advice.

The committee’s report also found that scrutiny of integration authority budgets proved

“very challenging as there is little by way of information available on IA’s financial position even at the most basic level.”

Given that astonishing lack of transparency, I agree that it is wholly appropriate to hold a progress review of integration joint boards. We must afford Parliament greater opportunity to scrutinise the financial reporting, external audit and governance of the health service and social care system. My amendment would, had it been selected for debate today, have called directly for such additional scrutiny. As part of a review of integration joint boards, we should consider new ways of supporting the local services that contribute so much to our health and social care system.

I am confident that a review of integration authority finances and oversight of the challenges that they face will clearly indicate the need for local tax reform. As we know, local authority budgets are under pressure, and are hampered by the out-of-date and regressive council tax. If we are really serious about an integrated approach to health and social care, we cannot simply focus on NHS budgets every time we have a debate about strains on our health service.

**John Scott:** If Alison Johnstone’s amendment had been accepted, would such a review have included her concerns about the 494,123 days that have been lost to the health service through bed blocking? Is she happy that her party is supporting the Government in that?

**Alison Johnstone:** If we review the issue in the round, we see that the pressures on local authorities make it difficult for the change that we need to be delivered in social care. If local authorities were better supported, we would see more social care being delivered in our communities, which would have a significant and positive direct impact on what is happening in our health service.

**Neil Findlay (Lothian) (Lab):** Alison Johnstone is pleading for better support and better finance for local government. Will she explain why she voted for the budget?

**Alison Johnstone:** I voted for the budget precisely because I care about local government and I could not countenance sitting back, shouting from the sidelines and doing absolutely nothing.

We have to look to local authority finances, too, and give communities new opportunities to prioritise key services, including social care. More progressive local taxation will benefit not only health and social care but public health. Our being “bold on local tax reform”,

as Naomi Eisenstadt recommended that we be, will have important implications, especially for working households that are at or just above the poverty line. The Government amendment recognises that

“progressive financial and fiscal planning”

is needed to sustain our health and social care services.

On the recruitment challenges, I have made the point that we need to open up access to medical training places to students from low-income backgrounds. Many of our universities are leading excellent work in that regard, but I worry that the Government is focusing too narrowly on increasing applications from the most deprived postcodes in Scotland. It is not right that a student from a low-income background might miss out on widening access opportunities because they do not live in a priority postcode or go to a target school. I ask for a broader approach.

I would also like members of this Parliament to work together to tackle drug-price inflation.

We must take it as a given that the cabinet secretary is accountable for NHS governance and performance—indeed, she has made it clear that she would not have it any other way. The Greens will support the motion and both amendments at decision time. Demands in the motion and the Labour amendment are reasonable and the Government must take action to realise them. There is no room for complacency.

15:21

**Alex Cole-Hamilton (Edinburgh Western) (LD):** I am grateful to the Conservative Party for lodging its motion and bringing the debate to Parliament. However, given the national coverage and outrage that met the NHS Tayside scandal over Easter, I am dismayed that the debate is taking place in Opposition rather than Government debating time, in which Parliament could have given the matter the oversight that it deserves.

**Shona Robison:** I remind Alex Cole-Hamilton that I came to Parliament and made a statement on NHS Tayside, which gave members an opportunity to ask any questions that they wanted to ask. We are waiting for reviews: I will be happy to come back to Parliament when we have them.

**Alex Cole-Hamilton:** I freely accept that. I welcomed the statement at the time, but it did not

provide Parliament with the opportunity to give the matter the full analysis that it deserves. The issue affects other health boards, too.

Miles Briggs reminded members—it is a matter of public record—that I have called for the cabinet secretary's resignation. That is not a view that I came to lightly, and I take no joy in it. I have an immense amount of personal respect for the cabinet secretary. However, as Miles Briggs reminded members, there are light bulbs flashing all over the dashboard of our NHS, warning of the many problems that it faces. The cabinet secretary and her Government have repeatedly ignored the will of Parliament on, for example, service redesign—in particular the closure of hospital wards. There has also been a string of missed targets, as Audit Scotland highlighted in its report.

The events at Easter were very much the straw that broke the camel's back for my party, in that we could go that far and no further. We found that in NHS Tayside not only was there an element of cooking the books, with £5.3 million of digital health money having been recycled to make the books look more healthy, but there was the revelation that charitable donations, which were given to the health board to contribute to things like patient comfort and to make extraneous purchases, were being used to plug gaps in the board's IT system. The board now has a £44.1 million shortfall. This week I learned that GPs have been banned from prescribing paracetamol, as a means of plugging the gap, such is the abject distress of the board.

The response was to manage out the chair of the health board, Professor John Connell. He was asked to resign. I was intemperate in my response to that, because I thought that it was right that someone should take responsibility, but then I learned that the events that led to Professor Connell's departure predated his tenure. That was the nature of the cabinet secretary's search for a fall guy in the case.

**Shona Robison:** I hope that Alex Cole-Hamilton recognises that the events also predated my term in office, but I am taking responsibility for them. *[Interruption.]*

**Alex Cole-Hamilton:** Perhaps in her remarks at the end of the debate, the cabinet secretary—*[Interruption.]*

**The Deputy Presiding Officer:** Just a wee minute. Order. I cannot hear anything.

**Alex Cole-Hamilton:** Perhaps the cabinet secretary will want to address exactly what Professor Connell was not doing fast enough that led to his resignation, and consider whether she can extend comfort to chairs of other NHS boards who might be worried that they will have to take the fall for this Government, irrespective of who

the cabinet secretary was at the time. As Miles Briggs has rightly pointed out, we then heard that NHS Lothian, my home health board, is £31 million adrift from where it needs to be in order to keep services at 2017 levels.

I am very grateful to the Labour Party for lodging its amendment today, because it widens the debate. It is not just about finance; it is also about the litany of missed targets in the health service. We saw the impact of poor Government policy measured out in the fact that a 23 per cent cut to alcohol and drug partnerships has led to the highest level of drug-related deaths in Europe, which is absolutely scandalous. At times like this, we need to turn to the Government and tell it that it, and its party, have been found wanting.

There is also bed blocking: on any given night in this country, a thousand people who are fit to go home will stay in hospital beds because social care coverage is inadequate to allow them to go home. I pay tribute to the cabinet secretary and thank her for taking up the case of William Valentine, which I raised with her at the Health and Sport Committee's meeting yesterday. I am grateful for the correspondence that I received. However, William is just one of a thousand people who, on any given day, spend time in hospital that they do not need to spend there. That causes an interruption to flow through the rest of our health service, which sees elective surgical operations being cancelled and four-hour waiting times in A and E being unachievable because there are no in-patient beds for people in acute receiving units.

**John Mason (Glasgow Shettleston) (SNP):** Will Alex Cole-Hamilton tell us what he is arguing for? Is it for a reduced budget for the health service and more for local authorities so that they can provide more care for people at home? Is that what he wants?

**Alex Cole-Hamilton:** I am very grateful to John Mason for setting me up to make this point. The indicators that underpin the health outcomes in our national performance framework contain not one reference to social care. The landscape of social care in this country is the problem. We are not paying our social care workers enough and there is not enough provision. As a result, people are languishing in hospital when they should be in their communities.

I will finish by making a point on mental health. I always come back to mental health provision because it is a national outrage. If a child were to fall off her bike and break her arm, a parent could expect her to be in plaster by the end of the day. However, if she were to come to them with anxiety, depression, an eating disorder or any other kind of mental health problem, they could expect her to join one of the longest queues in our health service. That is a national outrage—not just

in child and adolescent mental health services, but in adult services, as well. This very morning, James Jopling from the Samaritans responded to the national suicide action plan by saying that the Government is not taking suicide seriously, which is an astonishing assertion for the director of that organisation in Scotland. We waited for a year longer than we should have for that action plan, and it has been found severely wanting.

The Government needs a whole-system-change approach to our health service. For my party, unfortunately, such change now needs to start at the top.

**The Deputy Presiding Officer:** We move to the open debate.

15:28

**Liz Smith (Mid Scotland and Fife) (Con):** Everyone in the chamber can agree that the creation of the NHS 70 years ago was one of this country's greatest achievements, mainly because it was a universal service based on clinical need rather than on patients' income. With the passage of time, however, those needs have changed—in some cases, beyond all recognition—and, with them, the ability of the NHS to deliver on its founding principles.

Demographic changes are largely the issue but so, too, ironically, is the success of the NHS. With many more people living so much longer as a result of vastly improved treatments, the challenge of delivering universal care will always be one of the most difficult to confront any Government. There are also many more people living longer with chronic ill health, which includes mental health problems.

Many experts and health professionals believe that the situation makes the case for integrated health and social care incontrovertible. In particular, we need to find ways to ensure that older people do not overstay their time in hospital if they can be looked after at home and in their communities. It is hard to argue against that, which is why no political party is standing in the way of the integrated services approach.

However, debate is raging about how the approach should be managed. It is in that context that Conservatives are this afternoon challenging the SNP on its record. I want to use the example of recent issues in NHS Tayside to give substance to my argument.

I have no doubt that the serious problems that have been exposed in recent weeks at NHS Tayside—and, indeed, in other boards—will have a long way to run until the detail is uncovered about who authorised those bad decisions, including on misuse of charitable endowment

funds, which is an issue that has rightly appalled the public. Both the official inquiries and the spotlight from the media will eventually spill the beans on who knew what and when, and who made the mistakes.

It is not for me to comment further until the inquiries report. However, in the meantime, the controversy has thrown up other issues about the SNP's running of NHS boards. How can it be right that trustees who sit on the boards are responsible for overseeing spending of taxpayers' money and of charitable donations that are given by patients and their families?

**Shona Robison:** That is an important question, and one that Liz Smith has asked in the chamber before. I hope that she will acknowledge that, as I have said to her previously, the Office of the Scottish Charity Regulator has signalled that it wants to work on the guidance and look at the governance issues. I agree that the situation must be fundamentally changed.

**Liz Smith:** I am glad to hear that, because serious questions have to be answered on those matters. As I have said, I will not comment further until the reports are published, but there will be serious questions to answer about the workings of the OSCR process and how the Scottish Government oversees a lot of the NHS's financial management.

On the issue of the charitable endowments, four years elapsed before any real action was taken. In a letter to one of my constituents, OSCR confirmed that it did not know about the NHS Tayside scandal until 4 April; it looks as though the Scottish Government might not have been aware of the issue until about the same time. That begs the question: how can four years pass before such events are known about? I know that Jenny Marra has taken up the topic at the Public Audit and Post-legislative Scrutiny Committee. It is inexcusable.

**Shona Robison:** Does Liz Smith agree that lessons are to be learned by all of us, including about the auditing processes? It is important that such issues are flagged and qualified in reports that come to the Scottish Government or to any other public body.

**Liz Smith:** Yes, I do, but the Government has to understand its responsibility in that context, too.

I turn to IJBs. I do not consider—the cabinet secretary has a letter from me about this—that IJBs have clear lines of responsibility. There appears to be inequity in the balance between health and social services expertise, and the tendering process that allows third sector organisations to play their part in assisting in provision of services is not working well. It puts councillors in impossible situations when they

serve on an IJB; it undermines the accountability that all our constituents should expect from their local health boards.

After speaking to several councillors, NHS officials and patients, it appears to me that there are considerable concerns about the functioning of IJBs, which is something that I am led to believe the cabinet secretary has been told by members of her own party. Senior health officials are making the point that they find it difficult to know who has ultimate responsibility for many decisions within health and social care, which results in a lack of accountability.

I hope that the seriousness of those concerns will lead the cabinet secretary to authorise a full review of IJBs as they have functioned in their first two years, to examine the issues that have been raised and to make the necessary changes that will ensure that our health and social care services are fully equipped to deal with the extensive demands on them.

As has been mentioned, running the health service will never be easy, but it would surely be given a better chance if ministers were to get a grip of what is wrong with the management process. In that respect, it is an urgent and pressing issue.

I support the motion in the name of Miles Briggs.

15:34

**Ash Denham (Edinburgh Eastern) (SNP):** The Scottish Government openly acknowledges—and rightly so—that there is still progress to be made within the NHS. The cabinet secretary has been similarly open about the situation at NHS Tayside. She has addressed the matter and put in place measures to resolve it in a timely way and to support positive change.

New leadership is in place—an experienced interim chair has been appointed—and work is under way with NHS Scotland to appoint a new acting chief executive. An independent investigation by Grant Thornton has been commissioned and the Scottish Government is providing on-going support to the board through the transformation support team.

The Scottish Government is also developing a medium-term financial framework to support national, regional and local financial planning for the next five years. That framework will, among other things, outline the broad direction that the NHS and care services need to take to meet the changing needs of the people of Scotland, including shifting the balance of care towards community health services.

However, there is a wider point to be made here about working towards the very highest standards

of organisational governance in the public sector, as I believe we are. We need to improve levels of public engagement, transparency in decision-making, and—in the case of health boards—diversity on boards. There also needs to be on-going training and support for members of boards so that they can carry out what is a very demanding role well.

The Health and Sport Committee recently looked at governance in the NHS and some of the board members who came in to give evidence to us expressed frustration about how difficult a role it was to fulfil effectively. They said that a greater level of training and support could be given to them, as well as more opportunities to learn from what is working well in other board areas. I believe that those were constructive comments.

The Conservative motion makes mention of the financial pressures on the NHS but it fails to make the obvious connection to the source of those pressures. They are a direct result of the austerity policies enforced on the UK and on Scotland by the UK Government in Westminster. Under the Conservative Party's misguided ideological approach—and let us never forget that austerity is a choice, abandoned now by countries across Europe—

**Liz Smith:** In preparation for today's debate, I looked through a lot of the evidence from the Health and Sport Committee and various other health professionals. Not once were UK Government issues mentioned. However, issues around structures and spending here in Scotland were mentioned.

**Ash Denham:** But the Conservative motion explicitly makes reference to financial pressures on our public services and that is what I am addressing.

We know that the block grant is being affected by declining amounts of money coming to Scotland from Westminster. I would like to know when the Conservatives in this chamber will concede the effects of their own policies on Scottish families across the country.

**Miles Briggs** *rose*—

**The Deputy Presiding Officer:** Please sit down, Mr Briggs.

**Ash Denham:** Until that is done, we cannot have a sensible conversation about any of this. The Scottish Government has faced an 8 per cent cut to its discretionary budget over 10 years, worth £2.6 billion in real terms. The block grant from the UK Government for day-to-day spending over the next two years is projected to fall by £500 million. The Scottish Conservatives are right to draw attention to these cuts and to the financial burden that they place on the Scottish Government to



deliver its ambitious plans for the NHS in Scotland, but they fail to explain—again—how they would do anything differently.

The Scottish Government has mitigated and continues to mitigate these cuts and to protect and prioritise our NHS. There was an increase to the health portfolio resource budget this year of more than £400 million, taking it to a record high of over £13.1 billion. The Scottish Government is investing £2 billion more in health resource spending by the end of this session of Parliament—the highest investment commitment of any party in this chamber. The Scottish Government is also increasing support for primary care by a further £500 million over this session of Parliament.

These commitments are made possible by an ambitious budget that prioritises the NHS, and aims to create a Scotland that is fairer, more equal and more prosperous. It is a budget that both the Labour and Conservative parties failed to back. The budget is an exercise in the Scottish Government using its devolved powers to protect investment in our NHS and it is delivering that—it is delivering an additional £867 million for investment in public services that would otherwise not have been available.

If I remember correctly, the Tories have made over 100 demands for increased public spending, while also demanding a £500 million tax giveaway to high earners and businesses. It did not add up then, and it does not add up now.

In conclusion, I would like to tell a story that I found this morning on the Care Opinion website, about a patient who was in a hospital in my constituency—Edinburgh royal infirmary.

The person said:

“My Dad was in Ward 106, Base A for his last few weeks. I just wanted to say how amazing all of the staff were, not only did they look after him and gave him great treatment, they were also very friendly and understanding. They were very patient with my Dad even when he was delirious and when he was causing them a lot of work. They were all amazing people and I couldn't have asked for anyone better to look after my Dad in his last few days. I know he was treated well, with respect and care.”

For parties in this Parliament to come to the chamber without any or many constructive suggestions for how to improve the health service is not credible. It is not the serious approach that this subject and Scotland deserve.

15:40

**Edward Mountain (Highlands and Islands) (Con):** There has been much talk already this afternoon about NHS Tayside, but the issue is not just about NHS Tayside: my mailbag is full of letters from constituents who are rightly scared about the future of local provision. The time for

excuses, especially in the Highlands, is definitely over. Why? Because we seem to lurch from one crisis to another, and enough is definitely enough.

Let me be clear: closing wards and centralising services comes at the expense of care to patients. If it is not the suspension in the Highlands of out-of-hours services at Portree hospital, it is the downgrading of wards such as the Caithness maternity unit; if it is not the reduction in the number of beds in New Craigs psychiatric hospital, it is the cuts to palliative care and psychiatric care in Badenoch and Strathspey; and if it is not the fact that more operations are being centralised in Raigmore when patients could be treated in hospitals such as the one in Golspie, it is the constant threat of closure that hangs over the Town and County hospital in Wick and the Dunbar hospital in Thurso. It does not stop there, though, because there are cancellations of operations at Raigmore for just about every reason imaginable and there is the failure to meet the 12-week waiting time target for cancer patients, the shortage of GPs across the Highlands and increasing local costs—I could go on and on and on.

Such shameful leadership in NHS Highland means that patients are not receiving the standard of care to which they are entitled.

**Tom Arthur (Renfrewshire South) (SNP):** Will the member take an intervention?

**Edward Mountain:** No. I am short of time and I want to give way to the cabinet secretary in a minute. I will see whether she intervenes; if she does not, I will perhaps let Mr Arthur in.

We know at this stage that there is about £15 million of overspend in 2017-18 in NHS Highland, and we also know of the maladministration of health contracts. Those issues all have an underlying theme of mismanagement and lack of leadership. If the Scottish Government truly had confidence in the management of NHS Highland, why did it commission John Brown to undertake a review of the corporate governance of the health board?

**Shona Robison rose—**

**Edward Mountain:** No, cabinet secretary, that is not the one that I will let you come in on.

Questions are being asked, so I will try a simple one—here is your moment, cabinet secretary. Does the Scottish Government think that it is acceptable that NHS contracts that have been awarded have not been audited for 20 years? Would the cabinet secretary like to come in on that?

**Shona Robison:** I would like to come in on both those points.

**The Deputy Presiding Officer:** Wait a wee minute, cabinet secretary, because I have to call you first. Yes, you can intervene.

**Shona Robison:** First, the member will be aware that one of those contracts dates back to 1998. It is not acceptable that it has not been audited and NHS Highland has said that that is not acceptable and that it will act on the recommendations of Audit Scotland.

Secondly, John Brown's governance review in NHS Highland is a pilot that is about strengthening governance within our NHS. It has started in NHS Highland, but lessons can be learned from it for elsewhere. Surely the member welcomes that.

**Edward Mountain:** First, I am delighted that the cabinet secretary believes that handing over money for 20 years with no record of outcomes is unacceptable. As far as the John Brown review of governance goes, I will wait to see what he says before I comment on what he has produced.

To go back to contracts, Audit Scotland recently condemned NHS Highland by saying that its "contract monitoring" was

"inconsistent, informal and not documented."

Audit Scotland concluded that

"NHS Highland cannot demonstrate the achievement of value for money."

Apparently, when it came to it, NHS Highland could not even list the names of patients who had undergone treatment. That is a pretty damning verdict that shows how far the management of NHS Highland has lost control. NHS Highland has promised to fix that and to monitor its performance via its own audit committee—the audit committee that is dysfunctional will audit itself. I am struggling with that one, cabinet secretary, I really am. Surely if there is a problem, it is put out to somebody else so that they can find the true extent of the problem and resolve it.

Real change is needed. I join Miles Briggs in calling for more parliamentary scrutiny of NHS finances and I urge the Scottish Government to publish the current financial position of all NHS boards. The public have a right to know the scale of the financial crisis affecting the NHS, including NHS Highland, and how that will impact on the standard of care that they can expect to receive.

NHS Highland has been tasked by the Scottish Government to find £100 million of savings by 2020, but how will that be achievable when the board failed to achieve the savings that it needed this year and has had to seek £15 million of brokerage for next year? That means that, next year, NHS Highland will have to find not only the £15 million of savings that it failed to find this year but the money to pay back what the Scottish

Government is lending it on top of that. That means more pain for the people who are expecting services that they are not getting.

**John Mason:** Will the member give way?

**Edward Mountain:** No, I am in my last minute.

**The Deputy Presiding Officer:** The member is in his last few seconds.

**Edward Mountain:** What does that mean for our health service in the Highlands and Islands? It probably means closing more wards and centralising local services, which I do not believe is the answer.

In times of adversity, our doctors, nurses and healthcare professionals, who continue to work harder than ever before, are being let down by the management of NHS Highland and by the Scottish Government. It is not too late for NHS Highland and the Scottish Government to improve the financial health of our NHS, but it will require good leadership, which we do not seem to have. It is time for change and somebody needs to rise to the challenge—I just wonder who that will be.

15:46

**Stuart McMillan (Greenock and Inverclyde) (SNP):** A few points have been raised regarding finance and challenges. Anas Sarwar's amendment refers to finances and Alison Johnstone and Edward Mountain also touched on that. The issue of brokerage has been raised. Brokerage is not new—it has been in the NHS system for some time. Back in 2007, the Parliament's Audit Committee undertook work regarding the situation of NHS Western Isles. Brokerage was used to try to get that particular health board out of the mess that it was in and into a manageable situation.

Miles Briggs talked about challenges, and the one point that I will agree with him on relates to challenges. There always have been challenges in the NHS, there are challenges now and there will be challenges in future. As the cabinet secretary said in her opening comments, with an organisation the size of the NHS in Scotland, clearly, challenges will always come up from time to time. I think that across the chamber we can all agree on that. If politicians on all sides are going to be fair, it is extremely important that they genuinely recognise the success stories as well as the challenges that the health boards and, accordingly, the Government face. However, it is an important aspect of the health journey to learn the lessons of the past and to work to deliver a service that does not make the same mistakes in future.

I will touch on some of the positives as well as the challenges. Faced with £2.6 billion of Tory cuts

over 10 years, including £200 million in this year, the Scottish Government is using the devolved powers to protect investment in our NHS. The Scottish Government is fully funding the NHS, with a £400 million increase in spending this year. Changes to tax mean that we do not have to reduce other services to back the NHS. The budget is now £13.1 billion.

**Miles Briggs:** Stuart McMillan and Ash Denham have misled the chamber in relation to funding changes in England and Scotland. NHS funding in Scotland is growing at half the rate of the increase in England. Had health spending under the Scottish Government kept pace, we would have had an extra £1 billion a year in our health service. Those are the facts that members need to tell people about.

**Stuart McMillan:** Miles Briggs should know that every penny that has come to Scotland as a result of NHS increases in England has gone into the NHS here. If he says otherwise to the Parliament and to the electorate in Scotland, he is being disingenuous.

There is another positive element with regard to finance. The amounts mean that there is an uplift of 3.4 per cent in cash terms and 1.9 per cent in real terms. According to the Scottish Fiscal Commission, the changes to the draft budget that were announced at stage 1 of the budget bill will raise £290 million in 2018-19 to support public services and Scotland's economy.

In March, there was unseasonably cold weather and we had Scotland's first ever red weather alert for large swathes of the country. The army provided assistance to get staff and patients to and from hospitals through deep snow. In total, 25,399 operations took place in March 2018 compared with 23,664 in the previous month, which is a 7.3 per cent rise. Members should be saying, "Well done" to our hard-working NHS staff for their dedication and for fighting through snow and dangerous weather conditions to get to work and deliver services.

Only last week, a report to the Inverclyde Council health and social care committee highlighted that Inverclyde's performance in ensuring that people spend the minimum time in a hospital bed when they are ready to be discharged is among the best in Scotland.

**Jackie Baillie (Dumbarton) (Lab):** Will the member take an intervention?

**Stuart McMillan:** In one wee moment.

The report also marked a reduction in bed days lost, which is the number of days that individuals wait to be discharged. The chair of the committee, Labour's Councillor Robert Moran, is quoted as saying:

"This is excellent news for patients, families and carers ... The Council - through Inverclyde Health & Social Care Partnership - have made delayed discharge a priority to ensure older people do not spend longer than they need to in hospital."

**The Deputy Presiding Officer:** Briefly, Ms Baillie, as the member is coming to the end of his time.

**Jackie Baillie:** I am delighted to hear Stuart McMillan praising a Labour council, and I am sure that they will enjoy that, too.

Will the member comment on the fact that £90 million-worth of repairs are required at Inverclyde royal hospital? What is he doing to progress that?

**Stuart McMillan:** As my constituents know, I am on record as saying that no building lasts forever, as everybody in the chamber will understand. There will have to be either repairs to the current building or a new hospital at some point in the future. The fact that the building was built on the top of a hill is a ridiculous situation.

My final positive point is that we have had the great news that the new Greenock health centre will be progressed and built this year. We also had the official opening last year of Orchard View, the replacement for Ravenscraig hospital.

Those are the positives and, because of interventions, I do not have time to speak about the challenges. However, like any fair-minded MSP, I recognise that every health board has to live within its means. We only have to look back to NHS Argyll and Clyde under the shambles that was the Labour-Lib Dem Scottish Executive. The board had to be disbanded and needed £82.3 million to plug its debt. There was also the NHS Western Isles shambles, which happened when Murdo Fraser and Claire Baker were on the committee. Therefore, I will take no lessons from Labour or the Lib Dems, or from the Tories with the mess that the NHS is in down south. Although there are and will continue to be challenges for the NHS in Scotland, it is only this SNP Government that places NHS Scotland at the forefront and will deliver for the people of Scotland.

**The Deputy Presiding Officer:** I remind members that if they intervene, they must press their request-to-speak button again. You are not listening to me, Ms Baillie, but that was for you.

15:53

**Neil Findlay (Lothian) (Lab):** I declare an interest in that my wife works for the NHS. I hear from her every day about the good that goes on in the health service.

The Scottish Government is very skilled at public relations when it comes to the NHS in Scotland. The First Minister, along with the cabinet

secretary, is often seen out and about with the cameras when there are good-news stories, and rightly so. We would be forgiven for thinking that the NHS in Scotland is streets ahead and a beacon of best practice for everyone else to follow but, sadly, the reality is often different.

The NHS must be at or near the top of the postbag of every MSP. Week in, week out at question times and in the media, MSPs of all parties raise cases and concerns about health and social care. Accident and emergency department waiting times are growing; cancer waiting times are again not being met; last year, 16,000 people waited over an hour for an emergency ambulance; Scotland has the highest level of drug deaths in Europe, which is three times the level elsewhere in the UK; and 363,000 bed days were lost last year in Lothian due to delayed discharge.

Before we hear any more patronising nonsense about talking down the NHS or undermining its staff, let me say this: it is the staff who are raising many of those issues with us. They are burned out, shattered, under pressure and stressed like never before in their careers. They are the ones who care most and who have invested their careers in the NHS. We have a duty to stand up for them and be their voice in the Parliament.

Let me focus on how the situation is impacting people on the ground. In Lothian, patients are having to wait 44 weeks just to see an orthopaedic specialist—not for treatment but merely for a consultation. A constituent of mine who works in a gym was forced to go off work with a leg injury. She waited so long for an appointment that her employer was threatening her with the sack. She is far from alone. I have many orthopaedic cases in my constituency case load.

I see patients who have moved into new communities and are unable to register with their local GP because 40 per cent of the lists in Lothian are closed. I have a relative who is in St John's hospital. She is ready and willing to go home but cannot because she is waiting on a package of care. That bed space could be freed up for another patient. A total of 1.6 million bed days have been lost since the cabinet secretary said that she would eradicate delayed discharge.

We are rapidly heading for the first anniversary of the closure of St John's children's ward to in-patients out of hours. Parents are having to drive—if they have a car—their sick and injured children past their local hospital to Edinburgh because the ward is closed at evenings and weekends. The Royal Alexandra hospital children's ward has already closed.

We all know that general practice is so critical to the wellbeing of the NHS, yet it is in crisis. According to the Royal College of General

Practitioners, there is a shortage of 856 GPs across the country. Last night, in the village of Stoneyburn in my region—a village of just 2,000 people—300 residents turned out to a public meeting to protest with one voice against the proposal to leave the village with no GP provision. That is more than one in seven of the population. As in many other practices across the country, the local GPs there are retiring, and there have been zero applicants to take over. I am told that, 10 years ago, there would have been a dozen applicants—now there are none. What does that mean for people? If they have a car, they can travel. If they do not, as there is no footpath to walk, they need to use the very poor and infrequent bus service at a cost of £4 for a return ticket or £7 if they have a sick child with them. I have to say to the cabinet secretary that, for people in that position, healthcare is no longer going to be free at the point of need.

This situation is an abject failure of long-term planning for general practice across Scotland by successive health secretaries. The age profile of GPs cannot have been a surprise to the Government. We now have a system that would collapse without locum cover, which costs around £500 per day in Lothian and £850 a day in Lanarkshire. In Orkney, the health board is paying up to an eye-watering £1,400 a day for locum cover to try to keep the system going. When we add to that the millions lost through the increased use of agencies that charge extortionate amounts, is it any wonder that health board finances are at a critical level?

The Government's stewardship of our NHS has been dreadful. In the past, a First Minister resigned because of an issue with an office lease and Stewart Stevenson resigned because it snowed. Today we have a cabinet secretary who is overseeing the worst waiting times on record, delayed discharge increases, a crisis in general practice, wards being closed and NHS finances in such a state that boards are robbing the charity box to try to keep services going, yet she retains the confidence of the First Minister.

The Government likes to claim credit for good things. Now the cabinet secretary and the Government must accept responsibility for the bad.

15:59

**Clare Haughey (Rutherglen) (SNP):** I refer members to my entry in the register of members' interests, as I am a registered mental health nurse and I currently have an honorary contract with NHS Greater Glasgow and Clyde.

As a mental health nurse who has worked in the NHS for more than two decades, I am well aware

of the challenges that it faces today. Thankfully, our population is now living longer due to advances in medical treatments and care, but that means that the pressures and demands on our NHS are growing. To meet the challenges that our health service faces, the Scottish Government has undertaken major reforms by integrating health and social care, as well as investing record levels of funding in our NHS, which has topped £13 billion this year, in spite of on-going Tory austerity.

Today's Conservative motion refers to financial difficulties that are being faced by health boards across Scotland. That is, of course, true, but I would go much further. Financial problems are being experienced in Northern Ireland and in the NHS in Tory-run England and Labour-run Wales. The challenges that are faced by NHS Ayrshire and Arran, NHS Tayside and NHS Lothian are not unique to Scotland. For example, 83 per cent of acute hospital trusts in England were in deficit to the tune of £1.5 billion according to figures that were released in September last year. The Hywel Dda University Health Board in Wales, which serves Carmarthenshire and Pembrokeshire, has a budget deficit of around £69 million. The largest health board in Wales is also subject to a charity cash probe.

Being a healthcare professional myself, I fully appreciate the concerns of the public and politicians regarding the spending of charitable donations in NHS Tayside. It is imperative that health boards use such money appropriately and for its intended purposes. The inquiry into the NHS Tayside endowment fund by OSCR is the correct step and, rightly, NHS Tayside has proactively agreed to repay the money to the endowment fund. If any expenditure in any health board across Scotland is deemed to be inappropriate, I agree with the Scottish Government that it must be paid back to the charitable funds from which it came.

I hope that Opposition parties will join me in welcoming the request that was made by the Scottish Government to the chief executive of NHS Scotland to write to every NHS board chair seeking assurances that endowment moneys are being spent for the correct purposes. When the issue was brought to the attention of the cabinet secretary, she took the "immediate action" for which the Conservative motion is calling. She has taken the decisive step to replace NHS Tayside's leadership team, she has authorised further brokerage to the health board and the Scottish Government is continuing to work to improve governance and organisational performance across the public sector.

I hoped that today's debate would be one in which proposals and ideas about how we can improve the governance and performance of our NHS would be forthcoming from Opposition

parties. Instead, Opposition parties have merely sought to add to the witch hunt against the Government. Labour and the Conservatives have been incredibly predictable. When a challenge faces the Government—rather than suggesting reasonable proposals and working with it—they revert to the only two things that they know: calling for the Government to spend more money and urging ministers to resign.

**Miles Briggs:** Will the member take an intervention?

**Neil Findlay:** Will the member take an intervention?

**The Deputy Presiding Officer (Linda Fabiani):** It seems clear that Clare Haughey is not taking interventions.

**Clare Haughey:** I will take them later.

It is noticeable that the Scottish Conservatives have been silent on the sham of the health service that Jeremy Hunt is presiding over in England. The Red Cross once described the English NHS as facing a "humanitarian crisis", and it was rocked by junior doctors' strikes. Indeed, the silence has been deafening from Scottish Labour, too. The Welsh NHS is consistently among the worst performing in the UK, yet the cabinet secretary who is presiding over it is a favourite to become the next First Minister of Wales.

**Neil Findlay:** I am a member of the Scottish Parliament and responsible for my constituents, as is the member. What comfort or advice can she give to the 300 people who came to the public meeting in Stoneyburn last night? They said that they did not accept the fact that they will no longer have a GP in their local community.

**Clare Haughey:** We cannot always compare health systems across the world, but we can compare health systems across the UK. *[Interruption.]*

**The Deputy Presiding Officer:** I would like to hear Clare Haughey, please.

**Clare Haughey:** The Scottish NHS consistently outperforms every other NHS on these islands. The fact that Labour and the Conservatives voted down the Scottish Government's budget earlier this year shows that they are happy to play political football with our health service. The budget would have allocated more than £400 million in additional funding, yet neither party voted for it. The fact remains that, at the last Holyrood elections, Labour promised less money for the NHS than the Tories did. If we couple that with Tory austerity, I do not know how either party can keep a straight face when it complains about health service finances.

I am resolute in my belief that our NHS is better off in SNP hands. The proof of that lies in the woeful state of the NHS in England and in Wales, where the Tories and Labour are in charge. They do not want to hear that, but hear it they must. Privatisation by the back door and the front door, trusts cancelling weeks of planned surgery and eye-watering waits at accident and emergency departments—you would almost think that there is a plan to run down this most cherished of services so that wholesale privatisation is seen as the only viable alternative. *[Interruption.]*

**The Deputy Presiding Officer:** Can we have some quiet please?

**Clare Haughey:** Today's debate comes in the same week as three positive news stories about Scotland's health service. *[Interruption.]*

**The Deputy Presiding Officer:** Mr Dornan, you will get your turn shortly.

**Clare Haughey:** Part 3 of the national health and social care workforce plan was published, with £7 million of investment in nurse training, and I warmly welcome that. Scotland's A and E figures were once again shown to be the best in the UK. Further, this was the week when the Scottish Government's minimum unit pricing policy finally came into force.

Yes, our health service is under pressure and, yes, particular health boards have more challenges than others, which must be addressed. However, we have not heard from any MSP today why the issues that are facing particular health boards are the direct fault of the cabinet secretary, and petty games such as those being played in this chamber today trivialise our politics. We should let the cabinet secretary get on with her job of improving our NHS, which is already outperforming all the other ones in these islands.

**The Deputy Presiding Officer:** I remind members that they should always speak through the chair.

16:06

**Annie Wells (Glasgow) (Con):** I am pleased to have the opportunity to speak in today's debate about the severe financial problems that are facing NHS Scotland. We see daily news articles on financial problems up and down Scotland, and people are rightly very worried. The Scottish Conservatives wish to see a Government that has control over health spending and one that promotes financial transparency, which is why I, too, echo the calls that have been made by Miles Briggs.

The SNP has been in charge of the NHS in Scotland for more than a decade, so it is absolutely right that we shine a light on this issue.

Despite the SNP's spin, spending is not keeping pace with increased demand, nor is it keeping pace with increases that Scotland has seen in Barnett consequentials. Health spending in Scotland has increased by just 5 per cent between 2012-13 and 2016-17.

**Shona Robison:** Does Annie Wells accept that every penny of health resource consequentials has been passed on to the health budget in Scotland, and that there has been more money in addition to that? If she thinks that more money is needed for the NHS, will she tell us how much, and from where it will come?

**Annie Wells:** Maybe we need to look at how the money is being spent in the NHS to make sure that we are focusing on the places where it is needed.

In my region, Glasgow, spending has stagnated. In the Government's draft budget, the NHS Greater Glasgow and Clyde budget shows a real-terms cut of £22.5 million, and it has been reported that the health board is facing a funding deficit of up to £20 million. Quite clearly, it is under huge financial pressure, and that is only being made worse by the mismanagement of the NHS by the SNP Government.

As confirmed by last year's Audit Scotland report, the SNP has failed to plan effectively for the future when it comes to the workforce. One in four GP practices in Scotland has a vacancy, for example, and there are more than 2,500 nursing and midwifery posts lying vacant. As a result of that, spending on temporary staff has soared. Last year, spending on plugging staffing gaps broke the £300 million mark for the first time. That was an increase of more than £100 million on 2014-15 figures.

As a ripple effect of the SNP's failure to provide adequate community care for elderly people, we have also seen increasingly high levels of bedblocking. In 2016-17, more than half a million bed days were accounted for by patients who were fit to leave, the majority of whom were elderly. Delayed discharge is estimated to cost £132 million a year and, only yesterday, new figures showed a 3 per cent rise between March 2017 and March 2018.

I would argue, too, that there is little preventative spending, which would ease financial pressures in the long run. On alcohol and drugs, for example, there has been a 22 per cent cut to ADP funding, which the BMA described as a false economy. In Glasgow—a city that has a complex history with drugs and alcohol—NHS Greater Glasgow and Clyde has used endowment funding for a proposed safe heroin injecting space when that money could instead have been used to get people off drugs altogether.

The impact of that is huge. We can see the effect that understaffing and underfunding have had on performance. Last year, the NHS achieved only one of its eight key waiting time targets. More than one cancer patient in eight waits more than 62 days for urgent treatment and more than a quarter of children wait far too long for mental health treatment.

**John Mason:** Will the member give way?

**Annie Wells:** Not at the moment, thank you.

I am currently dealing with the case of a young girl in Glasgow with spina bifida who needs an operation that could dramatically change her life. However, she has to wait until the end of the year due to a lack of consultants. That means that, since March last year, she has been attending A and E on average twice a week. I say to the cabinet secretary that that is not on.

I echo my colleagues' calls for better control of, and more transparency about, NHS spending in Scotland. The SNP can no longer bury its head in the sand when it comes public health spending. We have a health service that is underfunded, understaffed and, to put it simply, under pressure. Our hard-working front-line NHS staff throughout Scotland are suffering as a result of the SNP's inability to deliver proper investment and resources.

**Stuart McMillan:** Will Annie Wells give way?

**Annie Wells:** I am just concluding.

Those staff deserve better for the great work that they carry out each day in difficult circumstances. I hope that the debate finally jolts the SNP members into action.

16:11

**James Dornan (Glasgow Cathcart) (SNP):** I was going to start by doing one thing, but I have just decided to go in another direction.

The party that sits to my left but is politically to my right—the party to my right is still to my right—calls itself the party of the union but, as soon as there are any comparisons with other parts of the union that it holds so dear, that we are all so much a part of and that it, the Labour Party and the Lib Dems worked so hard to keep together, its members go up in smoke and say that it is not right and nothing to do with anything. We all work under exactly the same conditions. The national health service might well be in Scottish control, but the budgets—[*Interruption.*] The budgets are dictated by what happens in Westminster.

The only way that we could see what the NHS in Scotland would look like if the Tories were in control would be to look at what they do, not what they say. Therefore, we have to look at what the

NHS is like in England. It is an absolute shambles. The BMA itself said that the NHS in England is in complete chaos, that the health service could “suffer a repeat of scenes experienced during winter 2016” and that that

“would equate to just 87.5% of patients being seen”,

as opposed to the 90-odd per cent that are seen in Scotland.

I have not even started on the Labour Party yet. We have the ridiculous situation—[*Interruption.*] We have the ridiculous situation of the two parties with the worst health service records where they are in power trying to get rid of the best health secretary in the United Kingdom. If it was not for petty party politics, you would not come to the chamber and blooming demean it with motions such as the one that we are debating.

Last week, Ruth Davidson came and told us that our party was working in the nationalist interest and not in the national interest. I would have thought that she would have been here today to tell us how that was all wrong but, of course, Labour and the Lib Dems put a stop to that when they said that she would be the isolated one on the UK Withdrawal from the European Union (Legal Continuity) (Scotland) Bill. The best way to reunite that unholy trinity is for you to jump on the back of the bandwagon that was started by Willie Rennie and Anas Sarwar.

**Oliver Mundell (Dumfriesshire) (Con) rose—**

**James Dornan:** Sit down.

**The Deputy Presiding Officer:** Excuse me, Mr Dornan. I ask that members speak through the chair, cut down on some of the noise and remember that we should always be courteous to fellow members.

**James Dornan:** Willie Rennie and Anas Sarwar were fighting over who could be first to demand the sacking of the cabinet secretary. It was unseemly, and the speech that Anas Sarwar made today should be taken out of the records of the Scottish Parliament. It was nothing but scandalous.

Labour members have a record that nobody could be proud of—not even their mothers, and certainly not their founders. We come here today on a motion that is based on the misuse of charity funding. If we look at Labour in Wales, we find a situation with an organisation called Awyr Las, serving the Betsi Cadwaladr University Health Board in north Wales. It did exactly what NHS Tayside has been accused of here in Scotland, but that was agreed by the Welsh Government, which is run by Labour. It was a system in which £450,000 of charitable donations was being used

for staff improvements—and Labour members are trying to tell us that we have got it wrong.

The health secretary was not in post when the charitable trust in question was put in place. If she had been, it would not have been put in place in the way that it was. She is dealing with it in the way that she has been asked to deal with it, and we still get the ridiculous situation of Labour members asking for her to go—for something that is completely outwith her—

**Alex Cole-Hamilton:** Will the member give way on that point?

**James Dornan:** Of course.

**Alex Cole-Hamilton:** If it is not at the feet of the current health secretary that the blame should rest, should it rest with the former health secretary, by which I mean the First Minister of this country?

**James Dornan:** The difference between you and I, Alex—

**The Deputy Presiding Officer:** Speak through the chair, please.

**James Dornan:** I am sorry, Presiding Officer. I think that the difference between myself and Mr Cole-Hamilton is that I am not always trying to personalise the issue. [*Laughter.*] What? This is about trying to solve the problem. In all seriousness, this is about trying to solve the problem.

The cabinet secretary has already taken steps. We have heard two absolutely pathetic interventions from Mr Sarwar and Mr Findlay on the Labour benches—nothing that we would not expect from either of them—that were all about personal attacks. They had nothing positive to say, made no moves towards improving the health service, and refused to take responsibility for anything that could be laid at their door. It is just another cheap political stunt by the two sides of better together.

**Jenny Marra (North East Scotland) (Lab):** Will Mr Dornan take an intervention?

**James Dornan:** You were not here for the beginning of the debate. You are not taking part now. My apologies, Presiding Officer.

**Jenny Marra:** Will the member give way?

**The Deputy Presiding Officer:** He is not taking interventions, Ms Marra.

**James Dornan:** The two sides of better together have got together to try and take down one of the best cabinet secretaries in this country and the best health secretary in the United Kingdom. It is nothing but cheap politics. I think that we should rule out the motion and all vote for the SNP amendment.

16:17

**Jackie Baillie (Dumbarton) (Lab):** I am not sure how to follow that, Presiding Officer.

In all seriousness, there does not appear to be a day that passes when the NHS is not in the news. Unfortunately, it is not for the enormous achievements that we know are made by NHS staff who work so hard to help us get well. [*Interruption.*]

**The Deputy Presiding Officer:** Excuse me, Ms Baillie. Can we stop the conversations flying between benches, please? It is very rude, and I am sure that Ms Baillie has a lot to say.

**Jackie Baillie:** I do indeed, Presiding Officer.

The NHS is increasingly in the news because it is underresourced, undervalued and overworked. The news is increasingly about the missed targets, the lengthening waiting times and the lack of staff, and it is increasingly about the NHS being failed by the Scottish Government. Of course, the NHS is operating in a financial straitjacket. Audit Scotland identified a real-terms cut to the health budget. The Conservatives have focused on financial accountability and transparency, and it is important to cut through the Government spin to understand the scale of the challenge faced by health boards across Scotland.

A number of speakers have already covered that, so instead I will focus on the patients' experience of the NHS today. Let us try to see it through their eyes. I say as gently as possible that they are not impressed by the sight of the health secretary on television, as she was last night, telling everyone that things were improving. Maybe that is the case in a parallel universe, but it is not based on my constituents' experience here in the Scottish NHS.

Let me tell members about my constituents' experience of waiting times. In orthopaedics, urology, ophthalmology, A and E and cancer, waiting times are all up. Some constituents have been waiting for more than a year, crippled with pain and now housebound as a result of the fact that they could not get surgery. The absurd situation in my constituency is that access to the Golden Jubilee, which is minutes down the road, is rationed—or, indeed, denied—by NHS Greater Glasgow and Clyde. There is also the waiting time to see a consultant, never mind the time to get treatment. In ophthalmology in my area, constituents with cataracts have been told that it will be 30 weeks before they can see a consultant, never mind get any treatment.

**Edward Mountain:** Will the member give way?

**Jackie Baillie:** No, not at this stage.



For cancer patients, the situation is heart breaking. We all know that early detection, diagnosis and treatment increases people's chances of recovery. However, even here, targets are not being met.

I have raised screening for suspected breast cancer patients with the cabinet secretary before. This is about patients who are referred urgently by GPs because they suspect breast cancer. It is meant to take less than 14 days to get a clinic appointment, and in practice it used to be much quicker, but now it takes more than six weeks. That could cost a woman her life.

I raised that with you on 24 October 2017, and you replied on 13 November to reassure me that matters had been resolved and remedial action had been taken.

**The Deputy Presiding Officer:** Please speak through the chair, Ms Baillie.

**Jackie Baillie:** I wrote again with the same problem on 11 December, and the cabinet secretary replied on 23 January, saying that there was no problem and that everything was fine. Either the cabinet secretary was deliberately misleading or NHS Greater Glasgow and Clyde was pulling her leg. I still have constituents who, just a month ago, were waiting for six weeks.

I wrote again to the cabinet secretary—

**Shona Robison:** Will the member give way?

**Jackie Baillie:** Allow me to finish. I wrote again to NHS Greater Glasgow and Clyde and to the cabinet secretary on 19 March. I have not yet had a response. How many letters will it take before action is taken?

**Shona Robison:** I was absolutely assured that those issues had been resolved. If Jackie Baillie is telling me that they are not resolved, I will certainly look into it and get back to her as a matter of urgency, as I am sure she appreciates that of course I would.

**Jackie Baillie:** I very much welcome that commitment, because it is outrageous for any Government to fail women in that way. I regret that there appears to be a degree of complacency when people do not even bother to respond.

How disappointed I was to see that a review of cancer waiting times has been sneaked out today. There is no press release—it was just sneaked out, which is truly shocking.

It is easy to blame the cabinet secretary, but she is not the boss. It is Nicola Sturgeon's responsibility, and it is a failure of leadership by her: Nicola Sturgeon keeps the cabinet secretary in place when she is struggling because Nicola Sturgeon is too scared to have a reshuffle.

**Shona Robison:** Will the member give way?

**Jackie Baillie:** No, I will not give way.

It is not just the Opposition that is saying that the Government is failing the NHS. Audit Scotland has said it, too, and—perhaps more politely than we would say it—the BMA, which represents doctors and consultants, has told us that the NHS is “at breaking point”. Patients are contacting their MSPs with heart-breaking stories to complain that they have been let down by a system that is not working and a Government that is in denial. There is no denying the Scottish Government's record: 107,000 patients waiting longer in A and E; 3,000 planned operations cancelled; and 1.6 million bed days lost due to delayed discharge—I could go on and on.

I know that SNP members like to deflect attention—we have heard that today—but they cannot blame Westminster, Brexit, local government, or even Wales. The Scottish Government is in charge. Health is devolved. There is no-one else to blame but themselves. Frankly, trotting out the excuse that we are doing better than elsewhere in the UK demonstrates a depressing lack of ambition. To simply accept that, although we are bad, we are not the worst is not good enough for patients in Scotland. The cabinet secretary and her Government inhabit an alternative reality, but her sticking-plaster approach to the NHS is letting down staff and patients. It needs to stop now.

16:24

**John Mason (Glasgow Shettleston) (SNP):** First, I would like to say something positive about the wording of the motion, which is slightly better than the wording in some others that we have seen on the subject. This time, we are not overusing the word “crisis”, but we are using the word “problems”, and “challenges” have also been mentioned. I think that we all accept that there are problems and challenges.

We then need to consider what is meant by the words “financial problems”, because there are several types. First, there are accounting problems, when something is not recorded properly or money for one fund has been used elsewhere. Secondly, the problem could be that the money that is available to the health service is not being used as well or as efficiently as it could be. Thirdly, the financial problem could be that there is not enough money. If that is the case, we need to consider whether there is not enough money for all that we would like to do, or for all that the health service could do.

The reality is that our health service could use almost any amount of money. It could always employ more nurses and other staff, replace old

equipment, build new buildings and buy new drugs and equipment, however expensive they might be.

**Brian Whittle (South Scotland) (Con):** Will John Mason take an intervention?

**John Mason:** Let me get a bit further.

We will never have unlimited resources, so we will always need to choose our priorities. Should we spend less on hospitals and more on primary care? Should we spend less on physical care and more on mental health? Those are not easy choices, and clearly they should be made after serious investigation and discussion among health professionals, patient representatives, managers in the health service and politicians, to name but four groups.

At this point, I will say how I think we should not allocate resources: we should not put a vulnerable person in the gallery of this Parliament and demand that the cabinet secretary or the First Minister immediately provide them with the latest drug or treatment irrespective of how expensive it might be or how uncertain the outcome might be. In my opinion, that verges on abuse of vulnerable people, and it is potentially damaging to the NHS because it risks upsetting the balance of how it is trying to use its resources.

I am happy to take Brian Whittle's intervention now.

**Brian Whittle:** Does John Mason agree that it is very difficult to recruit to the NHS when people are leaving faster at the other end?

**John Mason:** If Brian Whittle's argument is that it is difficult to forecast how many teachers we will need in 10 years, or how many nurses or whatever we will need, I agree. At times in the past we have had too many nurses or too many teachers and the complaint has been, "You're not giving them jobs." It may be that, at other times, we do not have enough of them, but that is not just a Scottish problem: it is a problem all over and it will, I suggest, always be a problem for any Government.

**Stuart McMillan:** Does John Mason agree that Brexit will hamper work to get more people into the NHS, compared with the situation that we currently have?

**John Mason:** I completely agree with that.

I note the demand in the motion for

"the immediate publication of the current financial position".

I am not sure how literally that was meant to be taken or whether it is just slightly poor wording, but I would like to comment on it as an accountant. From a practical point of view, members will realise that, even with modern technology, it takes time to prepare financial accounts. The more

accurate we want them to be—with a balance sheet, valuation of stock and all such things—the longer it takes to get reliable figures. I note that the cabinet secretary suggests in her letter today to Lewis Macdonald that April and May figures will be available at the end of June. I absolutely support transparency in principle, but I urge a little realism on timescales.

The motion also uses the word "accountable". I checked the meaning of that in the dictionary, which says that the definition is:

"required or expected to justify actions or decisions".

That is certainly what is happening today. The cabinet secretary is here, is accountable and is justifying her actions and decisions. She is answering questions in the chamber. Again, the wording in the motion is poor when it says

"should be held accountable".

The cabinet secretary is being held accountable. However, it does not mean that she is responsible for every single little decision that is made in every part of the health service, and it certainly does not mean that she should resign if one or two of those decisions were wrong.

I turn to another issue that has been raised both in the Labour amendment and by the Lib Dems. The Labour amendment mentions "financial pressures", and the Lib Dems suggested that budgets and policies have not been sufficiently adjusted. Again, exactly what that means is unclear to me.

If the key message is that more money should be put into health, that raises more questions. Health has been one of the best-protected sectors under the SNP. Spending on it is now at £13.1 billion, which represents 43 per cent of the Scottish budget, and is up from 38 per cent in 2008-09.

**Miles Briggs:** Will John Mason take an intervention?

**John Mason:** I am sorry. I have taken two interventions already and cannot take another.

When I was on the Finance Committee, some business organisations said that we were spending too much on health. If Opposition MSPs are arguing for more money for the NHS, where is it to come from? Should we raise taxes? I do not think that the Tories would support that. Labour has said that it would raise a huge amount of money, but it cannot tell us where it would come from, and nobody has checked that.

Should we cut expenditure in some other sector in order to give more to health? Would that mean cuts to colleges, councils or what? The reality is that all of us—all organisations and all parts of the public sector—have to live within our means. We

have to make difficult choices and prioritise the most important things over those that are good and desirable but are not high priorities. Opposition politicians would have more credibility and be more respected in here and outside if they came forward with realistic alternatives.

Shona Robison does an excellent job on what is clearly one of the most difficult and challenging portfolios. I would not want her job: I congratulate her on sticking to the task despite the unjustified criticism.

16:31

**Brian Whittle (South Scotland) (Con):** I refer members to my entry in the register of interests, as I have a close family member who is a healthcare professional in the Scottish NHS.

I agree with John Mason that the health brief is one of the most challenging in the Government. It is a brief in which achieving constructive dialogue and effective change can be problematic, not least because of the adversarial environment that politics engenders.

However, we cannot ignore the situation that has evolved in the past decade. We are debating the financial crisis that is enveloping the NHS. That crisis follows the GP crisis, the poor mental health provision crisis, the social care crisis, the recruitment and retention crisis, the continuing rise in drink and drug deaths, the obesity crisis and so on. The lack of cohesive joined-up planning is becoming all too evident.

I will give an example. Ayrshire and Arran NHS Board is considering closing the Ayr hospital cancer unit and amalgamating it with the one at University hospital Crosshouse. Consideration of the merits or otherwise of such a move has failed to take into account the lack of adequate infrastructure and public transport from outlying areas. It will take someone who happens to live in Ballantrae in South Ayrshire more than three hours and two bus changes to get to Crosshouse for their cancer treatment, and then they will have to make the return journey. If people take their cars, where exactly will all the extra patients park? The car park at Crosshouse is absolutely rammed.

It is clear that patient care is not the top priority and that the decision is most certainly financial. Given that NHS Ayrshire and Arran is more than £23 million in debt, how can it be expected to deliver the four satellite treatment centres that are in the cancer treatment plan? Inevitably, patients are the ones who suffer the consequences of that poor financial planning.

The reality is that the barometer by which we should be judging the management of the NHS is the health and wellbeing of our nation. By just

about any measure one cares to mention, the Government is failing. Scotland is the unhealthiest nation in Europe and the unhealthiest small country in the world. As I have previously stated, we hold the top rank in too many unhealthy tables.

Perhaps more important is the fact that the health of our healthcare professionals continues to decline. In fact, our healthcare professionals' health is below the national average, which is already poor. As the Convention of Scottish Local Authorities stated in evidence to the Health and Sport Committee, healthcare professionals will sacrifice their own health to look after the health of others. It is not overstating the case to say that if the SNP does not address that issue by giving our NHS staff an environment in which they have access to a decent work-life balance, which we want them to promote to others, every Scottish Government strategy is doomed to join the litany of failures over which the Government has presided in the past decade.

Much has been made of recruitment to the NHS—which I asked John Mason about—to alleviate the chronic staff shortage that has been created by consistent poor workforce planning by the Government. However, looking after our healthcare professionals speaks to the retention of staff and the invaluable experience that is lost if they leave, and to reducing the high levels of absenteeism in the healthcare profession due to stress and the unhealthy working environment in which the Scottish Government makes our healthcare professionals work.

**Fulton MacGregor:** Has Brian Whittle given any thought to, or made any assessment of, how Brexit and his party's budget, which has reduced funds to the public sector, could affect the workforce in the NHS?

**Brian Whittle:** I thank Fulton MacGregor for his intervention, because it allows me to point out to him that although SNP members are quick to say that there is a record amount of investment in the NHS, we are in a financial crisis. We have a record number of staff vacancies in the NHS, yet SNP members say, "It's Brexit!" You have been in power for 10 years; 10 years—

**The Deputy Presiding Officer:** Please speak through the chair, Mr Whittle.

**Brian Whittle:** When I raise the preventative health agenda, the cabinet secretary and her team are always enthusiastic in their desire to shift in that direction, and I believe them. The trouble is that we cannot judge them on the matter, because they cannot effectively address it while they are continually firefighting problems of their own making. This is not the environment for the long-term strategy planning that is required to support

our NHS staff and put the service back on an even keel.

The cabinet secretary must get firm control of finance. It is not all about the money that is spent; it is also about what the money is spent on. As we heard today, and as the Health and Sport Committee has heard in evidence on NHS governance, the spending patterns of health boards and IJBs are not being properly tracked and accounted for.

Where does responsibility lie? There are members in this Parliament who have been calling for the cabinet secretary's head. I am not going to join them. For the most part, I think that calling for a minister's resignation is a card that becomes ineffectual if it is overplayed in the political arena. Anas Sarwar has proved that.

It is the Government's responsibility to appoint its front bench, and the performance of the front bench therefore reflects the SNP. The fact that the cabinet secretary is still in place indicates that the Scottish Government is happy with how the NHS is being managed. We should all be concerned about that.

Patience might be a virtue, but as Miles Briggs said in his motion, if "sustained and immediate action" is not taken,

"the Cabinet Secretary for Health and Sport should be held accountable".

The cabinet secretary and the SNP cannot keep pointing the finger elsewhere. It is time to accept responsibility and to take the crucial action that is required, or step aside.

16:36

**David Stewart (Highlands and Islands) (Lab):**

I thank Miles Briggs and his colleagues for bringing this important and pressing matter for debate this afternoon.

This has been a well-informed debate, with passionate and interesting speeches from members of all parties. In a spirit of consensus, let me say that Labour endorses Liz Smith's comments about the management of integration joint boards. She made an excellent point and I put on record that we fully support what she said.

Of course, this debate is not about numbers on a spreadsheet, but about the conditions that are faced by staff and patients in our hospitals and communities. As Anas Sarwar, Neil Findlay and Jackie Baillie said, NHS staff in Scotland have been underpaid, undervalued and underresourced, and patients have been feeling the pain of that, with A and E targets being missed, planned operations being cancelled, bed days being lost to delayed discharge, social care budgets being slashed and seven out of eight key

targets being missed for two years, according to Audit Scotland.

Like every member in this chamber, I am passionate about the NHS. It is not just another issue, another debate or another headline. Again, like many members, I have family and personal connections with the service. My brother-in-law is a mental health nurse, my neighbour is a midwife, and my close friend is a senior staff nurse.

Members talked about the history of the NHS, and I, too, am aware of its creation, although I was not there at the time. On 5 July 1948, Sylvia Beekingham was admitted to hospital to be treated for a liver condition. That was a big event in her life but it was an even bigger event in British history. The 13-year-old was the first patient to be treated by the national health service. The NHS—our NHS—will be 70 years old in July.

As we all know, the Labour Party created the NHS. Three score years and 10 later, we are still defending it. In 1948, when the service faced a shortage of nurses early on—a familiar story—Nye Bevan pushed up nurses' wages to attract recruits. That is a solution that I recommend to the cabinet secretary.

The 1960s saw the first British heart, liver and kidney transplants. Indeed, the first kidney transplant took place in Edinburgh royal infirmary. The 1970s saw the first test-tube babies, as well as computerised tomography scans, which revolutionised how doctors examine patients.

Like everyone in this chamber, I am proud of what the NHS achieves. I am prouder still of its hard-working front-line staff—the junior doctors, nurses, midwives, consultants, GPs, allied health professionals, porters and receptionists.

Despite the hard work and commitment of its staff, the NHS faces challenges. Alison Johnstone, Alex Cole-Hamilton, Liz Smith, Ash Denham, Edward Mountain, Annie Wells, Miles Briggs and Brian Whittle talked about challenges such as our ageing population, the pressures on social care, the need for robust workforce planning now and post-Brexit, and the growing mental health crisis. Such public health challenges may look modern, but, under the surface, the root causes are the same old story: poverty, social deprivation and inequality are significant contributors to poor health expectations, and it is the least well-off who are most at risk. We need to reverse the inverse care law, under which patients who are most in need of healthcare have the least access to it.

Back in 1948, the NHS represented the advance of egalitarianism in our nation. There was great hope for the new future that it heralded. A news article in *The Manchester Guardian* from the time noted that the changes were

“designed to offset as far as they can the inequalities that arise from the chances of life, to ensure that a ‘bad start’ or a stroke of bad luck, illness or accident or loss of work, does not carry the heavy, often crippling, economic penalty it has carried in the past.”

Inequality in health was a serious issue then and, sadly, it remains one now. Life expectancy in the UK has stalled and, in the past 50 years, the chasm between the health outcomes of the rich and the poor has widened. Is it not an outrage that, in the 21st century, individuals’ health expectations are intrinsically tied to their postcodes?

The theme of the debate has been NHS financial accountability and the need for change. However, members should not just take my word that change is needed. As Professor Sir Harry Burns said to the Health and Sport Committee this week, we need “complex system change” in the NHS. Elsewhere, Dr Peter Bennie, the chair of the BMA’s Scottish council, said that the NHS workforce was stretched to breaking point. In a survey, RCN Scotland showed that nine out of 10 nurses say that their workload has got a lot worse. In a brief to our Health and Sport Committee, NHS Lothian said:

“Over the last 3 years NHS Lothian has not been able to present a balanced financial plan at the start of each financial year and has increasingly relied on non-recurrent resources to achieve financial balance.”

I close by reminding members that Nye Bevan famously said:

“The NHS will last as long as there’s folk left with faith to fight for it.”

At 5 o’clock, let us put our faith in front-line NHS staff across Scotland.

**The Deputy Presiding Officer:** I call Shona Robison. You have around seven minutes, please, cabinet secretary.

16:42

**Shona Robison:** I vote for Dave Stewart to be Labour’s health spokesperson. That was a considered and well-informed contribution to the debate and, I have to say, a bit of a stand-out one from his party’s benches.

I will try to respond to as many members’ contributions as I can. I apologise if I do not manage to do that for them all. First, I want to respond to remarks made by Anas Sarwar and Jackie Baillie about the clinical review of cancer waiting times standards. They are both simply wrong. First, we will not scrap cancer waiting times targets. The report to which they referred is from an expert group of cancer clinicians who are looking at specific cancer pathways to ensure that they are in line with best clinical evidence and practice. The chair’s foreword to the report said:

“the retention of the CWT standards was agreed ... from the outset.”

What the report is looking at is potentially shortening some of those pathways for certain cancer types. We will consider the cancer clinicians’ recommendations in due course, as members would expect us to.

I want to be very clear in response to those who have commented on the budget for the health service. The uplift to our health budget amounts to 3.4 per cent in cash terms and 1.9 per cent in real terms, taking the budget £360 million higher than real terms-only increases since 2016-17. For our front-line NHS boards, that is a 2.2 per cent increase in real terms—not a reduction. It is important to put that on the record.

**Miles Briggs:** As I said earlier, if Scottish health spending had kept pace with increases in English health spending, an extra £1 billion would be being spent on health in Scotland today. Does the cabinet secretary not accept that point?

**Shona Robison:** What I accept is that all resource consequentials—and some more—have been passed on to health in full in Scottish Government funding. I also accept that health spending in Scotland is 7.5 per cent higher per head than it is in England, which should surely be welcomed. That equates to more than £880 million more spending on health services in Scotland. I hope that that puts to bed the Tories’ arguments.

I turn to Alison Johnstone’s remarks. I hope that she agrees that I have acted on some of the concerns that she raised on the transparency of finances, and that she welcomes my action. She mentioned longer-term funding. The situation has been challenging. Given that we get a one-year budget—the budgets are set by the UK Government and it is only once it does so that we know what our budget is—it is difficult to project what the funding will be over a longer period. However, I accept that we need to try to do that, and the framework that we will publish in the next few weeks is an attempt to look at a five-year funding horizon. Again, I hope that Alison Johnstone will welcome that action.

Alex Cole-Hamilton cited a *Daily Mail* article that says that Scots patients cannot get painkillers prescribed on the NHS in Tayside. I categorically say that NHS Tayside has said that there are no plans to stop prescribing such medicines in primary care, where it is clinically appropriate to do so. I hope that that reassures Alex Cole-Hamilton, and anybody else for that matter.

On the resignation of John Connell, the previous chair of NHS Tayside, I want to be clear that there is no question about his probity or his contribution to public services. We had a combination of events—not a single event about the endowment

fund, which predated his time in office, as it did mine—which resulted in the conclusion that new leadership was required in NHS Tayside. Consequently, I took the action that I did. The new chair and the new chief executive in NHS Tayside are making rapid progress on a number of the issues.

**Jenny Marra:** The cabinet secretary knows that we are in this chamber initially because of problems in our local health board. Figures released last night show that there have been 72 drugs deaths in the city of Dundee since this time last year, which is a shocking doubling of the figures on the previous year. Will the cabinet secretary take this opportunity to tell me what she is doing about the drugs crisis in Scotland and how she will fund services?

**Shona Robison:** Jenny Marra will be aware that a commission has been set up in Dundee to tackle the matter. She is aware of the complexity of the issues in the cohort involved. I have met those on the commission. I hope that the member has done likewise, because it is important to understand the commission's programme of work; if she has not, I suggest that she does.

I welcome the tone that Liz Smith took in her speech; hers was another important contribution. I agree that it is time to review the IJBs, and I have said that I will do that. I also agree with her about the governance issues on endowment funds. That situation has taught us a number of things, including the need for us to have far better auditing of the processes, so that such issues are pulled out for people to see. With the best will in the world, it is difficult for me as a minister or for Government officials to plough through every report of every public body. We require our auditing processes to highlight and red flag such issues. Many of the organisations involved must learn that lesson. I give Liz Smith the commitment that, on the endowment funds governance issues, we will take action in partnership with OSCR to make the improvements that she called for.

How long have I got, Presiding Officer?

**The Deputy Presiding Officer:** You have another minute and a half, cabinet secretary.

**Shona Robison:** Edward Mountain raised a number of issues. Although I have had this exchange with him on a number of occasions, it is worth while reminding the chamber that the decision on Caithness maternity unit was taken due to patient safety concerns after the death of a baby. Taking decisions on such issues are never easy. As a minister, I must listen to the clinical advice that I am given from the chief medical officer and others. It would have been impossible for me not to have taken that advice.

The governance review in NHS Highland, as I hope that I said in my intervention, will help us to make the changes that are required elsewhere and strengthen the governance of our NHS.

Stuart McMillan recognised many successes in the examples that he talked about. He mentioned the difficulties faced by the service across the winter and the heroic efforts of staff to meet those.

I know about the GP issues in Neil Findlay's community, which he raised. That is why we have a new GP contract, and that is why I published the primary care workforce plan on Monday, with its nearly £7 million of additional investment in our district nursing workforce—something that I hope people will welcome.

**Neil Findlay:** Will the cabinet secretary take an intervention?

**The Deputy Presiding Officer:** The cabinet secretary is in her last few seconds.

**Shona Robison:** Clare Haughey raised an important point. Some of our boards have brokerage arrangements. We put patient care first and foremost and that is why those brokerage arrangements are important. However, she was right to highlight the eye-watering £1.5 billion deficit of acute trusts south of the border, which the Treasury—year after year—bails out.

I accept that brokerage arrangements are sometimes required, but it is a bit rich not to recognise that financial position south of the border while criticising the position here. On that point, Annie Wells said very clearly—I am sure that the *Official Report* will confirm this—that the NHS is underfunded. If she believes that, there is an onus on her party to come to this chamber and say how much the NHS is underfunded by, how much it proposes to put into the NHS and where that funding will come from. It is not good enough to say that the NHS is underfunded without coming here with those answers. I hope that we might hear about that in the closing speech from the Conservatives.

I hope that I have been able to set out today the actions that I will take as health secretary. I am not complacent in any way and I am sure that members realised that from the tone of my opening speech. I recognise the problems, and that is why we are taking all the actions that I have set out. I hope that members will recognise that.

16:51

**Murdo Fraser (Mid Scotland and Fife) (Con):** The Scottish Conservatives called this debate to allow members across the chamber to raise their concerns about the NHS in Scotland. There are a broad range of concerns, as we have heard from members from across the country this afternoon,

whether it is Edward Mountain from the Highlands, Annie Wells from Glasgow or Brian Whittle from Ayrshire.

None of that takes away from the fact that there is much good work going on in the NHS across the country. Indeed, I join the health secretary in paying tribute to all those who work in the NHS for the care that they deliver. It is important that all members recognise that.

What we are doing in this debate is putting the health secretary, and indeed the Government, on notice that we need real action to improve the situation across the country. We need to strengthen Parliament's oversight of our NHS finances, starting with full publication of the current financial position of every NHS board and monthly updates to the Parliament's Health and Sport Committee and Public Audit and Post-legislative Scrutiny Committee. We also need more information about IJBs and their progress, and we need full transparency around budget scrutiny and local decision making.

I am pleased with the response that we have had from the health secretary, as she is accepting our motion today and she has given guarantees to make that information available. I hope that the approach that we have taken to the debate has been constructive.

What the Conservatives are not doing in this debate—unlike some others—is calling for the health secretary's resignation. That is not because we are great supporters of the health secretary; it is simply because we believe that such calls are a distraction from the more important business of trying to sort out the problems in the NHS for the benefit of all the people whom we represent. Simply appointing a new captain to the ship will not make any difference unless the ship changes direction. It is that change of direction that we think is more important than the personalities involved.

I listened with great interest to the contributions from many of the SNP members. Some of them seemed to be in denial about some of the issues that people are facing across the country. Ash Denham and Clare Haughey wanted to talk about health finances but did not want to take interventions from Conservative members who wanted to answer their questions. To be fair, Stuart McMillan allowed Miles Briggs to intervene.

Let me deal with the question of finances, because it has come up in the debate and it is important. Over the past year, we have spent £170 million on agency staff in the NHS. With better workforce planning, we could substantially reduce that amount. We have spent £150 million in the past year on the cost of delayed discharge—delayed discharge that the health secretary promised she could eliminate. As Annie Wells

said, if we could better use the resources that we are currently allocating to the NHS, that would make a huge difference in tackling the problems that we face.

**Stuart McMillan:** If Murdo Fraser is backing up his colleague Annie Wells, does that mean that he too does not want additional resources for the NHS?

**Murdo Fraser:** I have just made the point that Annie Wells made, which is that the Government needs to make the best use of its current resources and ensure that money is not being wasted.

I will make another important point about funding. I remind SNP members—particularly those who are drawing comparisons with the situation south of the border—that we have nearly £1,500 more to spend every year for every man, woman and child in Scotland compared with the average for the rest of the UK, and we have much more than England thanks to the Barnett formula. However, what does the SNP want to do to the Barnett formula? It wants to tear it up, which would mean that we would not have the benefit of that money at all.

The highlight of the debate for many members was the contribution from James Dornan, who at least brings some comedic value to such debates. Mr Dornan spent his time denouncing the Tory motion that is before us—a motion that his front bench has accepted and which he will presumably vote for in five minutes' time. However, he thought that the motion was worth denouncing. What a shame it is that Mr Dornan has withdrawn his name from the race to be his party's deputy leader. What a joy that would have been for the nation.

**James Dornan:** I was not criticising the motion so much as criticising the rank hypocrisy of the Tory members.

**Murdo Fraser:** I think that the *Official Report* will show Mr Dornan's denunciation of the motion.

I return to the issue of NHS Tayside, to which a number of members have referred. There is a range of serious problems in that board area. NHS Tayside is missing five out of eight key waiting time targets and has failed to provide data for another, which means that it is meeting only one quarter of its vital targets. We also had the recent, well-documented episode of the misuse of endowment funds, which have now had to be repaid. The cabinet secretary's response was to sack the chair of NHS Tayside, the hugely well-respected health professional John Connell, who had been in office for just 18 months. That was done despite the fact that the problems that had arisen in NHS Tayside predated his period in office. However, he was thrown to the wolves by

the cabinet secretary. He and other senior figures in NHS Tayside have been treated as human shields by the health secretary and made to take the blame for failures that were not of their making.

What is most concerning about the situation in NHS Tayside is the financial position. We now have total brokerage supplied by the Scottish Government of over £33 million, with another £12 million expected, all of which we assume the board will be asked to pay back at some point. It is impossible to see that being done without its having a major impact on the patient experience. The money will not be saved simply by cancelling one-off prescriptions of paracetamol.

**Shona Robison:** I have already clarified the issue of the paracetamol. We have said to NHS Tayside that it does not have to repay that money for a period of three years in order to ensure that patient care is not impacted. Surely the member would welcome that.

**Murdo Fraser:** The people whom I represent in areas such as Perth and Kinross want to see what impact that cost-cutting will have in the medium term or long term on the delivery of local services. We have seen plans mooted, of which the health secretary will be aware, to remove all emergency surgery from Perth royal infirmary and relocate it to Ninewells, and to replace that with elective surgery moving in the other direction. However, what guarantees do we have that that programme will continue? They could not be given by the management of NHS Tayside when a number of colleagues and I met them just two weeks ago. What does it mean for the future of accident and emergency at Perth royal infirmary if cost savings are having to be made? Communities across Perth and Kinross have fought hard over recent years to retain services, but they potentially face a risk again to those services because of financial failures on the health secretary's watch.

My colleague Liz Smith referred earlier in the debate to the question of integration joint boards and many people's concerns about them. There are huge issues over lines of governance and accountability, and the IJB model is fast losing public confidence; it is calling out for review and for greater transparency around the decision-making process.

We are not calling today for the resignation of the health secretary, although if press reports are to be believed even some of her SNP colleagues are expecting her to be reshuffled. That, in itself, will not make anything better in the NHS. Instead, we need a new focus on sorting out the problems in Scotland's health service and that needs to start with the Parliament having much greater sight of exactly what is happening with health service spending. We need to know that the money is

being properly spent and we need to stop being in denial about the scale of some of the problems that we face. That is what staff in the NHS need to give them the reassurance that they require, it is what patients want to see and it is what our constituents expect from us.

I urge Parliament to support the motion in Miles Briggs's name.



## Business Motion

17:00

**The Presiding Officer (Ken Macintosh):** The next item of business is consideration of business motion S5M-12003, in the name of Joe FitzPatrick, on behalf of the Parliamentary Bureau, setting out a business programme.

*Motion moved,*

That the Parliament agrees—

(a) the following programme of business—

Tuesday 8 May 2018

2.00 pm Time for Reflection

*followed by* Parliamentary Bureau Motions

*followed by* Topical Questions (if selected)

*followed by* Scottish Government Debate: Scottish National Investment Bank

*followed by* Finance and Constitution Committee Debate: Revised Written Agreement with the Scottish Government on the Budget Process

*followed by* Standards, Procedures and Public Appointments Committee: Changes to Standing Orders on the Budget Process

*followed by* Legislative Consent Motion: Holocaust (Return of Cultural Objects) (Amendment) Bill – UK Legislation

*followed by* Business Motions

*followed by* Parliamentary Bureau Motions

5.00 pm Decision Time

*followed by* Members' Business

Wednesday 9 May 2018

1.15 pm Parliamentary Bureau Motions

1:15 pm Members' Business

2.00 pm Portfolio Questions: Health and Sport

*followed by* Scottish Labour Party Business

*followed by* Business Motions

*followed by* Parliamentary Bureau Motions

5.00 pm Decision Time

*followed by* Members' Business

Thursday 10 May 2018

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 Debate: A Route Map to an Energy Efficient Scotland

*followed by* Business Motions

*followed by* Parliamentary Bureau Motions

5.00 pm Decision Time

Tuesday 15 May 2018

2.00 pm Time for Reflection

*followed by* Parliamentary Bureau Motions

*followed by* Topical Questions (if selected)

*followed by* Legislative Consent Motion: European Union (Withdrawal) Bill – UK Legislation

*followed by* Business Motions

*followed by* Parliamentary Bureau Motions

5.00 pm Decision Time

*followed by* Members' Business

Wednesday 16 May 2018

2.00 pm Parliamentary Bureau Motions

2.00 pm Portfolio Questions: Communities, Social Security and Equalities

*followed by* Scottish Government Business

*followed by* Business Motions

*followed by* Parliamentary Bureau Motions

5.00 pm Decision Time

*followed by* Members' Business

Thursday 17 May 2018

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

*followed by* Stage 3 Proceedings: Land and Buildings Transaction Tax (Relief from Additional Amount) (Scotland) Bill

*followed by* Business Motions

*followed by* Parliamentary Bureau Motions

5.00 pm Decision Time

and (b) that, in relation to First Minister's Questions on 10 May 2018, in rule 13.6.2, insert at end "and may provide an opportunity for Party Leaders or their representatives to question the First Minister".—[*Joe FitzPatrick*]

*Motion agreed to.*

## Parliamentary Bureau Motions

17:00

**The Presiding Officer (Ken Macintosh):** The next item of business is consideration of three Parliamentary Bureau motions. I ask Joe FitzPatrick, on behalf of the bureau, to move motions S5M-12004 and S5M-12005, on committee meeting times, and motion S5M-12006, on designation of a lead committee.

*Motions moved,*

That the Parliament agrees that, under Rule 12.3.3B of Standing Orders, the Culture, Tourism, Europe and External Relations Committee can meet, if necessary, at the same time as a meeting of the Parliament from 1.00pm to 2.25pm on 10 May 2018 for the purpose of taking evidence from UK Government Ministers on the Article 50 negotiations on the UK's withdrawal from the European Union.

That the Parliament agrees that, under Rule 12.3.3B of Standing Orders, the Justice Committee can meet, if necessary, at the same time as a meeting of the Parliament from 1.00pm to 2.30pm on 24 May 2018 for the purpose of taking evidence from the Secretary of State for Scotland on the implications for the Scottish justice system of the UK's withdrawal from the European Union.

That the Parliament agrees that the Finance and Constitution Committee be designated as the lead committee in consideration of the supplementary legislative consent memorandum in relation to the European Union (Withdrawal) Bill (UK Legislation).—[*Joe FitzPatrick*]

## Decision Time

17:01

**The Presiding Officer (Ken Macintosh):** The first question is, that amendment S5M-11984.4, in the name of Shona Robison, which seeks to amend motion S5M-11984, in the name of Miles Briggs, on national health service financial accountability, be agreed to.

*Amendment agreed to.*

**The Presiding Officer:** The next question is, that amendment S5M-11984.1, in the name of Anas Sarwar, which seeks to amend motion S5M-11984, in the name of Miles Briggs, on national health service financial accountability, be agreed to. Are we agreed?

**Members:** No.

**The Presiding Officer:** There will be a division.

**For**

Baillie, Jackie (Dumbarton) (Lab)  
 Baker, Claire (Mid Scotland and Fife) (Lab)  
 Balfour, Jeremy (Lothian) (Con)  
 Ballantyne, Michelle (South Scotland) (Con)  
 Beamish, Claudia (South Scotland) (Lab)  
 Bibby, Neil (West 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)  
 Fee, Mary (West Scotland) (Lab)  
 Findlay, Neil (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)  
 Halcro Johnston, Jamie (Highlands and Islands) (Con)  
 Hamilton, Rachael (Ettrick, Roxburgh and Berwickshire) (Con)  
 Harvie, Patrick (Glasgow) (Green)  
 Johnson, Daniel (Edinburgh Southern) (Lab)  
 Johnstone, Alison (Lothian) (Green)  
 Kelly, James (Glasgow) (Lab)  
 Kerr, Liam (North East Scotland) (Con)  
 Lamont, Johann (Glasgow) (Lab)  
 Lennon, Monica (Central Scotland) (Lab)  
 Leonard, Richard (Central Scotland) (Lab)  
 Lindhurst, Gordon (Lothian) (Con)  
 Lockhart, Dean (Mid Scotland and Fife) (Con)  
 Macdonald, Lewis (North East Scotland) (Lab)  
 Marra, Jenny (North East Scotland) (Lab)  
 Mason, Tom (North East Scotland) (Con)  
 McArthur, Liam (Orkney Islands) (LD)  
 Mitchell, Margaret (Central Scotland) (Con)

Mountain, Edward (Highlands and Islands) (Con)  
 Mundell, Oliver (Dumfriesshire) (Con)  
 Rowley, Alex (Mid Scotland and Fife) (Lab)  
 Rumbles, Mike (North East Scotland) (LD)  
 Ruskell, Mark (Mid Scotland and Fife) (Green)  
 Sarwar, Anas (Glasgow) (Lab)  
 Scott, John (Ayr) (Con)  
 Scott, Tavish (Shetland Islands) (LD)  
 Simpson, Graham (Central Scotland) (Con)  
 Smith, Liz (Mid Scotland and Fife) (Con)  
 Smyth, Colin (South Scotland) (Lab)  
 Stewart, Alexander (Mid Scotland and Fife) (Con)  
 Stewart, David (Highlands and Islands) (Lab)  
 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, 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)  
 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)  
 Gougeon, Mairi (Angus North and Mearns) (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) (Ind)  
 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)  
 Yousaf, Humza (Glasgow Pollok) (SNP)

**The Presiding Officer:** The result of the division is: For 60, Against 61, Abstentions 0.

*Amendment disagreed to.*

**The Presiding Officer:** The next question is, that motion S5M-11984, in the name of Miles Briggs, on national health service financial accountability, as amended, be agreed to.

*Motion agreed to,*

That the Parliament notes the financial problems in NHS Ayrshire, Tayside and Lothian; understands that these issues are being faced across Scotland; notes the ongoing lack of transparency on the state of board and integration joint board finances; calls for the immediate publication of the current financial position for all NHS bodies and for a progress review of integration joint boards; believes that, failing sustained and immediate action, the Cabinet Secretary for Health and Sport should be held accountable for the ongoing problems; supports calls for the implementation of any recommendations from the Office of the Scottish Charity Regulator (OSCR) on the future governance arrangements for NHS board endowment funds; notes the Scottish Government's commitment to publish a financial framework for health and social care, in line with the recommendations of the Auditor General, following publication of the Scottish Government's forthcoming medium-term financial outlook; believes that the Health and Sport Committee should have the opportunity to consider the framework to give further parliamentary oversight to the finances of boards and integration authorities; recognises that progressive financial and fiscal planning is necessary to ensure investment in Scotland's health, care and wider public services, and believes that the UK Government should set out its long-term plans for health and care funding in advance of the 2019 UK Spending Review, and that all health resource consequentials from this should be passed on in full in Scotland.

**The Presiding Officer:** The next question is, that motions S5M-12004 to S5M-12006, in the name of Joe FitzPatrick, be agreed to.

*Motions agreed to,*

That the Parliament agrees that, under Rule 12.3.3B of Standing Orders, the Culture, Tourism, Europe and External Relations Committee can meet, if necessary, at the same time as a meeting of the Parliament from 1.00pm to 2.25pm on 10 May 2018 for the purpose of taking evidence from UK Government Ministers on the Article 50 negotiations on the UK's withdrawal from the European Union.

That the Parliament agrees that, under Rule 12.3.3B of Standing Orders, the Justice Committee can meet, if

necessary, at the same time as a meeting of the Parliament from 1.00pm to 2.30pm on 24 May 2018 for the purpose of taking evidence from the Secretary of State for Scotland on the implications for the Scottish justice system of the UK's withdrawal from the European Union.

That the Parliament agrees that the Finance and Constitution Committee be designated as the lead committee in consideration of the supplementary legislative consent memorandum in relation to the European Union (Withdrawal) Bill (UK Legislation).

## Nuclear Weapon Transport (Civil Contingency)

**The Deputy Presiding Officer (Linda Fabiani):** The final item of business is a members' business debate on motion S5M-11539, in the name of Mark Ruskell, on civil contingency in nuclear weapon transport. The debate will be concluded without any question being put.

*Motion debated,*

That the Parliament understands that the Ministry of Defence regularly transports nuclear weapons on public roads in convoys that pass through or close to communities in the Argyll and Bute, Dumfries and Galloway, East Dunbartonshire, East Lothian, Edinburgh, Falkirk, Glasgow, Midlothian, North Lanarkshire, Renfrewshire, Scottish Borders, Stirling, South Lanarkshire, West Dunbartonshire and West Lothian local authority areas; believes that there is an inherent risk in transporting high explosives and radioactive material together on public roads; understands that information on what to do in an emergency involving a nuclear reactor is regularly circulated to residents close to the Coulport and Faslane bases but that no equivalent information relating to an incident involving nuclear weapons is available to communities along the regular convoy route; believes that although defence is a reserved matter, it would be for the civil authorities such as police, fire and rescue and local authorities to attempt to respond to any emergency as so-called category 1 responders, and notes the view that these civil authorities must have sufficient assessments and plans in place to respond.

17:04

**Mark Ruskell (Mid Scotland and Fife) (Green):** I thank members who signed the motion. Many members, such as Bill Kidd, have been champions of nuclear disarmament throughout their political careers. I started campaigning on the issue when I helped briefly to detain a nuclear convoy in Stirling back in the 1990s. However, tonight's debate is not about the campaign for nuclear disarmament, supportive of that as I am, but the responsibilities that come with maintaining a nuclear deterrent and whether we discharge those responsibilities in line with the law.

I pay tribute to David Mackenzie, Jane Tallents and their network of citizen monitors in Nukewatch UK, as well as to the investigative journalism of Rob Edwards, which has been critical in exposing failings over many years. I was pleased to help out with Jane and David's recent report, "Unready Scotland", which analyses the critical gap in our response to the transport of nuclear weapons in Scotland.

Convoys run between Coulport naval base and the atomic weapon plants in Berkshire around eight times a year. Apart from the odd training run, they generally carry nuclear warheads for maintenance or replacement that consist of radioactive plutonium and uranium alongside explosives. Under civil regulations, it is illegal to

carry explosives together with radioactive material, but that is not the case in a military convoy. The Ministry of Defence admits that a detonation of the explosive would have an impact radius of 600m with a dispersal of radioactive material over at least 5km and potentially even further, depending on prevailing winds.

Convoy routes are well known and the advent of social media has meant that they are the United Kingdom's worst-kept secret. In Stirling, they park up at the Defence Support Group barracks in Forthside behind a flimsy chain-link fence next to a Nando's and the Vue cinema—it is a disaster movie waiting to happen. They regularly run by Stirling castle, passing bemused tourists, and on to the A811 through Arnprior and Buchlyvie.

The risk of a catastrophic incident is mercifully small but, should it happen, the impact of a serious accident or terrorist attack could be devastating, and even a low probability over many years and decades is a persistent risk.

"The consequences of such an incident are likely to be considerable loss of life and severe disruption both to the British people's way of life and to the UK's ability to function as a sovereign state."

That sounds like hyperbole, but those are not my words. They are the words of the Ministry of Defence, which were revealed through a freedom of information request in 2006.

All decisions over the UK's defence policy, including the operation and renewal of Trident, are of course fully reserved to Westminster. Even in the event of a convoy incident, the responsibility to secure and contain the site would lie with MOD personnel. However, managing the impact beyond the immediate vicinity of the convoy would primarily be the responsibility of councils and emergency services in their roles as category 1 responders under the Civil Contingencies Act 2004, and the Scottish Government holds responsibility for ensuring compliance.

Replacing the Civil Defence Act 1948, the CCA brought in a new approach, requiring civil authorities to identify potential threats, examine the risks and list them on public registers, while ensuring that the public have appropriate information to respond should contingency plans ever have to be enacted. There are two main opt-outs under the CCA that identify when authorities do not need to inform the public. The opt-outs apply if national security could be compromised through sharing sensitive information, and if information was likely to cause public alarm.

Providing live information about convoys would be inappropriate, but, as I said, the existence of the convoys is not a secret and they park next to a Nando's. The culture of secrecy surrounding the convoys and a failure to acknowledge and plan for

the risks is in itself cause for public alarm. The admission by Police Scotland officers under oath during the trial of a protester last year that they had no idea about what is contained in the convoys alarms me. I want the emergency services to have a clear idea of what they would be dealing with.

There is also a starkly inconsistent approach in the level of public information that is provided about radiation hazards around the Clyde naval bases and the dearth of information that is provided on the nuclear warhead convoys. Under radiation emergency regulations, residents who live in areas surrounding the bases are informed every three years with just enough information to prepare them should an incident ever occur. Threats are listed under local resilience partnership risk registers for naval bases and civil nuclear power stations.

In 2016, I asked local authorities on convoy routes what risk assessments had been completed. The answer was none; nor had any council communicated with the public about the potential threat. Councils are clearly breaching the responsibilities that they have under the CCA to assess risk, plan and inform. Several of the surveyed councils did not even seem to be aware that they had convoys running through their areas.

If councils are relying on generic risk assessments produced by resilience partnerships, it is concerning. Convoys pose a unique set of risks because they contain explosives and nuclear material travelling together. If councils are relying instead on the MOD for risk assessment, again that should concern us. Even if those assessments exist, they are not available to councils, and the MOD has no role beyond dealing with containment at a convoy incident site.

A number of councils pointed to guidelines that were produced by the MOD about what to do in the event of a convoy incident—the local authority and emergency services information, or LAESI guidelines. However, it is clear that first responders face huge challenges in following the guidelines on a range of issues, from communications to cordon access. For example, no evacuation procedure on the scale of a 600m cordon has been planned or trialled in Scotland. The guidelines for providing shelter from radioactive material within 5km also pose major problems. They require people to stay indoors and for ventilation systems to be shut down. Do hospitals know that? They require schoolchildren to be kept indoors and not be picked up. Do schools know that?

In closing, I turn to the role of the Scottish Government. So far, the response to the "Unready Scotland" report has been very disappointing. The position of the Scottish Government on Trident,

although welcome, is largely irrelevant to this debate, which is about dealing with the responsibilities that we have here and now under the current devolution settlement.

I hope that I have demonstrated that resilience partnerships are woefully ill prepared to deal with a convoy incident and are failing to discharge the legal duties under the Civil Contingencies Act 2004. Only a review that is headed up by the Scottish Government and involves the MOD, the Convention of Scottish Local Authorities, Police Scotland, the Scottish Fire and Rescue Service, Scotland's national health service and expert stakeholders can start to address the failings. That is the call on the Government tonight, and nothing less will do. *[Applause.]*

**The Deputy Presiding Officer:** I would prefer it if those in the public gallery did not show appreciation or otherwise during the debate. Thank you.

We move to the open debate. There are a lot of requests to speak, so I ask for speeches of a strict four minutes, please.

17:12

**Bill Kidd (Glasgow Anniesland) (SNP):** I will not take even four minutes, because I have just one thing to say that I think is important to say. First, though, I thank and congratulate Mark Ruskell for achieving this important members' debate. I declare an interest in the subject of the debate, as co-convenor of the Parliament's cross-party group on nuclear disarmament and, internationally, as a co-president of Parliamentarians for Nuclear Non-Proliferation and Disarmament.

It was in the latter role, last July, that I was the only elected representative of any body in the UK to attend the United Nations conference that passed the Treaty on the Prohibition of Nuclear Weapons. Sadly, not even the UK's appointed ambassador attended the conference. However, 122 nations voted in favour of the prohibition of nuclear weapons, with one against and one abstention. While there, I presented a statement of support for the historic treaty from our First Minister to the president of the conference. It reiterated the Scottish Government's call for a world that is free of nuclear weapons, with our contribution to be led by Scotland having Trident removed from its land and waters as quickly and as safely as possible.

Therefore, I am confident that the Scottish Government takes the issue of nuclear weapons seriously. I know that it takes the issue at hand—Ministry of Defence convoys transporting high explosives and radioactive materials along public roads—very seriously. That issue needs to be

addressed by both Holyrood and Westminster assessing the preparedness of the areas in Scotland and England through which those convoys travel. From Burghfield in the south of England to Faslane in Argyll, no one should be ignorant of what those convoys carry past their homes and communities or of the potential dangers that an accident or an incident would pose.

To that end, I ask the minister to consider the Scottish Government setting up a group with the specific remit of conducting an open review of the readiness of all Scottish areas through which nuclear weapons convoys travel in order to ensure civil contingency preparedness across the board. That should be done to ensure the defence of our population, our environment and the futures of our young people along every route of these despicable convoys, until we achieve the removal of Trident from our country.

17:15

**Edward Mountain (Highlands and Islands)**

**(Con):** Before I begin, I declare that I was a soldier in our armed forces. I served in Germany in the 1980s and 1990s, during the cold war, when nuclear weapons formed part of the Union of Soviet Socialist Republics' offensive plan and thus had to form part of the North Atlantic Treaty Organisation's strategic defence plan. Before anyone asks whether I was happy with that, my response is that I believe that deterrents work. I accept that many in the chamber, including Mark Ruskell, will probably not agree with me, but I respect their opinion and I hope that they will respect mine.

I have listened carefully to the concerns that have been raised by Mark Ruskell, but I question where he got his information from, because the information that I have is very different. I will run through that information and look at the nuclear facts as I understand them.

Fact 1 is that when nuclear weapons are transported, they are not armed and ready to explode. They are transported in a manner that means that they are fully contained and inert.

**John Finnie (Highlands and Islands) (Green):** Will the member take an intervention?

**Edward Mountain:** I will finish my point and bring in John Finnie before I get to fact 2.

The transport containers for nuclear weapons are designed to be robust and are sealed. The UK Government stated in 2015 that weapons are

“transported in a benign configuration and secured in a custom-designed container that is tested in accordance with International Atomic Energy Agency standards to protect against a range of scenarios, including impact on a

motorway at speed, a drop from height and a fuel fire, among others.”

**John Finnie:** Are you able to say what the source of that information is?

**The Deputy Presiding Officer:** I remind members to always speak through the chair.

**Edward Mountain:** The information came from a UK Government statement that was delivered in 2015. Various papers from the UK Parliament relate to the transport of nuclear weapons.

Fact 2 is that nuclear weapons are inherently stable. They are not like old explosives such as nitroglycerin, as many people believe. They do not explode when subjected to heat, shock or flame. They are stable and basically benign when they are transported. Providing that they are well-maintained, which our weapons are, there is no risk of exposure to the materials from which they are made.

Fact 3 is that when nuclear weapons are transported, the physical security is extremely high. We will never know the extent of that security, nor should we. What I know is that what we see is what we are meant to see. What we do not see is what we are not meant to see until it is needed. That is based on the evidence that I have from when I was a soldier and involved in moving nuclear weapons in Germany.

Fact 4 is that contingency plans are extremely high and involve all the key services—military and civilian. I know that plans are in place and I know that they are practised. To be clear, all civil authorities are consulted before a nuclear weapons convoy begins its journey.

Fact 5 is that the transportation of nuclear weapons through residential areas is assessed rigorously and governed tightly by international and national regulations.

The transportation of nuclear weapons and materials by road in the UK has been taking place for more than 50 years and, in that time, there has never been an incident that has presented a risk to the public or the environment. Although I respect Mark Ruskell’s opinion, I am afraid that I do not agree with it. Let us argue on the facts and not argue about anything else. Let us stick to the facts while we have the debate.

17:19

**Claudia Beamish (South Scotland) (Lab):** I thank Mark Ruskell for bringing this issue to the chamber today. I also thank Nukewatch for its consistent work on this issue, and Rob Edwards and many others. I commend the members of the public who dedicate their time to this issue. It is often civilian watchdogs who hold our Governments to account on these guarded issues.

I should also declare an interest as a member of the cross-party group on nuclear disarmament.

While we still have weapons of mass destruction in this country and the requirement to transport them, it would seem absolutely obvious that every eventuality should be planned for robustly and consistently. Inconceivably, however, that has been revealed not to be the case. The “Unready Scotland” report shows the routes that the warhead convoys take, and many of the communities that I represent across South Scotland are on those routes. I am disappointed to say that, at the moment, there are no nuclear-free local authorities in South Scotland.

The Scottish Government has responsibility for community safety and emergency planning. Like some of my constituents, I have concerns about the failure of local authorities to ensure compliance with the Civil Contingencies Act 2004. That failure puts people at risk—people in communities and in the emergency services.

Although an accident is unlikely, a series of credible scenarios could trigger fire explosions and a breach of plutonium containment—I differ from Edward Mountain in that view—resulting in radioactive materials possibly leaking from warheads. I do not want to be alarmist about this, but that is the case.

Before they became entirely redacted in 2015, the reports from the Ministry of Defence were concerning. In 2006, the MoD reported that convoy crew fatigue could cause hazards; in 2010, it said that the risk of accident was getting progressively worse due to spending cuts; and, in 2014, it reported a threat to safety as a result of a shortage of engineers. Those are, of course, questions for the UK Government, but they also highlight the need for the Scottish Government to ensure that it is prepared. We are talking about a unique threat to our emergency services, which would likely be the first ones on the scene. I fear that it is a failure of transparency—as well as a failure of legal compliance—that the general information on the convoys is not made public. There are obvious reasons why that information should not be spread widely and why up-to-the-minute updates should not be given, but national security surely does not justify a failure to inform the public of the existence of convoys. We all have a democratic right to know.

I would welcome a comment from the Scottish Government on rail convoys, which also pass through the region that I represent.

The Ministry of Defence says that the risk of nuclear weapons convoys is

“tolerable when balanced against the strategic imperative to move nuclear weapons”.

While nuclear weapons remain in the UK and across the world, such ugly judgments will have to be made. Nuclear weapons are not someone else's problem; they are utterly inhumane, militarily useless—as stated by many senior military figures—morally unacceptable and, in my view, illegal, which Scottish Labour recognised in 2015.

However, this is not a debate about nuclear weapons; it is about the safety of their transportation. Everyone with responsibility for that needs support, and the civilian partnerships need to be well interlinked. I ask the minister to highlight in her closing speech how that is being approached—not in detail, obviously, for national security reasons. We all need to be able to reassure our constituents that, although nuclear weapons are trafficked through their areas, it is done in as safe a way as possible.

I thank Mark Ruskell not only for his work but for his wise words and the information that he has provided us with. Like him and others in this chamber and beyond, I call on the Scottish Government to consider the open review of the preparedness of Scottish civil authorities to deal with serious nuclear weapons convoy incidents. The Scottish Government must act on this and show the people of Scotland that it is doing so.

17:24

**Clare Haughey (Rutherglen) (SNP):** I, too, thank Mark Ruskell for bringing this important debate to the chamber today. It is also a pleasure to speak after my colleague Bill Kidd, who undoubtedly speaks on the subject with greater authority than most people. As Bill Kidd made clear, we in the Scottish National Party are resolute in our position that nuclear weapons are abhorrent, are financially unjustifiable and do not protect us against the threats that we face today. Such weapons of mass destruction have no place on our planet, have no right to be housed in Scotland and should in no way be transported on our busy roads.

A little under three years ago, my former Rutherglen Westminster colleague, Margaret Ferrier, held in the UK Parliament a debate on transportation of nuclear weapons. As she outlined then from research that had been conducted by Nukewatch, nuclear warheads were transported through the Rutherglen and Hamilton West constituency at least three times between January 2014 and January 2015. On those occasions, the weapons were moved in large convoys of about 20 vehicles travelling along the M74, through my constituency, then on to Glasgow city centre.

Trucks carrying nuclear material can be on motorways or main roads at any time of day or night without residents on the route ever knowing.

More recent figures that have been collated by Nukewatch show that the number of Trident warheads being transported to and from the Clyde increased fivefold between 2015 and 2016. Therefore, it is very likely that nuclear weapons have continued to be moved within my constituency and at a more frequent rate than was previously imagined.

Members will be aware of the Ministry of Defence's document entitled "Local authority and emergency services information (LAESI) Edition 11", which outlines the many council areas in the UK through which the nuclear convoys may travel. It names 21 of the 32 local authorities in Scotland, including South Lanarkshire Council, Glasgow City Council, the City of Edinburgh Council and North Lanarkshire Council. As Mark Ruskell's motion correctly points out,

"no ... information relating to an incident involving nuclear weapons is available to communities along the regular convoy route".

It is frightening to think that if an incident were to take place, our authorities would be poorly prepared to take swift action.

We are incredibly lucky that no major incidents have occurred in the 50 years for which nuclear weapons have been transported. However, there have been a number of near misses. For example, in 2007, several vehicles in a convoy were separated and became lost in the Stirling area due to heavy fog. It was reported that it took several hours for the convoy to regroup. In that time, anything could have happened to its cargo. However, such problems are not new. In 1987, 30 years prior to that, two vans, each with two nuclear warheads, came off the road after skidding on ice. Fortunately, the weapons were not damaged in the accident, but it took the authorities about 18 hours to recover the vehicles.

The weapons should not be in transit in the first place, especially not during challenging weather conditions. The Ministry of Defence admitted in 2016 that, in the three previous years, 43 safety incidents had been reported to it. Accidents can and do happen, and the risk that the UK Government continues to take is not a risk that is worth taking.

I repeat the calls that other members have made. The people of Scotland, civic Scotland, the Scottish Trades Union Congress, Scotland's churches, the Scottish Parliament and the majority of Scotland's MPs do not want the Trident nuclear weapons system to be renewed. If we want our constituencies to be clear of nuclear weapons, I suggest that we all urge the UK Government to scrap its nuclear obsession.

**The Deputy Presiding Officer:** I note that quite a few members still wish to speak, so I am minded



to accept a motion without notice to extend the debate by up to 30 minutes.

*Motion moved,*

That, under Rule 8.14.3, the debate be extended by up to 30 minutes.—[*Mark Ruskell*]

*Motion agreed to.*

17:28

**Gordon MacDonald (Edinburgh Pentlands) (SNP):** I thank Mark Ruskell for securing this important debate. It is important for the communities that I represent because, up to eight times a year, a convoy of Army vehicles carrying nuclear warheads and weapon materials uses the Edinburgh bypass as it travels between Coulport, where the UK's nuclear weapons are stored, and the Atomic Weapons Establishment plant in Burghfield, Berkshire, where the weapons undergo maintenance, refurbishment or decommissioning.

On Monday 26 March, the second nuclear convoy of this year travelled along the Edinburgh bypass through my constituency just yards from communities from the Calder in the west, to Baberton Mains, Juniper Green, Bonaly, Torphin, Colinton, Oxfangs, Swanston and to Fairmilehead in the east. However, the people who live there have never received any information on what to do in the event of an accident involving transported nuclear weapons. The convoys carry radioactive material consisting of plutonium and uranium, which in the event of an accident have a potential dispersal range of at least three miles, which would require total evacuation of almost all my Edinburgh Pentlands constituency, including schools, a college and two universities.

That is not just some hypothetical situation raising unnecessary fears. The City of Edinburgh Council was the lead authority in exercise senator 2005, which simulated damage to a convoy transporting a nuclear warhead on the Edinburgh bypass, resulting in a hypothetical release of radiological material over a wide area of Edinburgh. The council also took part in a similar exercise in 2011 in North Lanarkshire, in which an accident involving a nuclear convoy was simulated.

In addition, a report by the International Campaign to Abolish Nuclear Weapons that was compiled using freedom of information requests, on military convoys carrying nuclear weapons, highlighted that 180 mishaps and incidents, including collisions, breakdowns and brake failures have occurred during the past 16 years. Thankfully, none of the incidents resulted in a release of radioactive materials.

Despite taking part in two exercises, and despite the reported potential dangers, the City of

Edinburgh Council, in response to a survey that was carried out in 2016 by Mark Ruskell, admitted that it had

“not carried out an independent assessment of the risks to Council residents specifically relating to the transportation of nuclear weapons”,

and that it had

“not communicated with its public in regard to the risks associated specifically with the transport of nuclear weapons.”

The Scottish Government has a resilience division that supports organisations to work together to build Scotland's resilience to emergencies, with staff based in Edinburgh, Perth and Glasgow. Its website, Ready Scotland, explains that there are three regional resilience partnerships, which are broken down into 12 local resilience partnerships. It states:

“These groups bring together all the relevant organisations in an area to develop an effective approach to dealing with emergencies. They have robust plans in place to respond to all kinds of events. These plans are regularly tested in joint exercises and during real emergencies.”

However, on searching the website, I found no reference to nuclear accidents involving MOD vehicles. Why is that? The UK Minister of State for the Armed Forces highlighted in a Westminster Hall debate in 2015 that the Scottish Government and local authorities are not given advance notice of convoys, and that the Radiation (Emergency Preparedness and Public Information) Regulations 2001 apply only to areas surrounding nuclear sites and not to road transport.

In addition, legislation that was passed by the UK Government back in 2004, the Civil Contingencies Act 2004, places constraints on authorities' ability to keep the public informed—first, in order to avoid conveying “sensitive information”, which covers information that is deemed to be harmful to national security or public safety, and secondly, in order to avoid alarming the public unnecessarily. As the House of Commons library stated in its briefing on nuclear convoys:

“The MOD is reluctant to give too much information about the transportation of nuclear material”.

That veil of secrecy and UK Parliament acts and regulations make it virtually impossible, in my view, for any local authority or the Scottish Government to prepare for a nuclear accident. If we cannot prepare properly for a potential nuclear accident, let us ban transportation of nuclear warheads as a first step towards removing weapons of mass destruction from Scotland.

**The Deputy Presiding Officer:** Just because we have an extra 30 minutes, it does not all have

to be used up. Maurice Corry can have a little bit of extra time, in the interest of fairness.

17:34

**Maurice Corry (West Scotland) (Con):** I thank the Presiding Officer, and I thank Mark Ruskell for this members' business debate. Although I know that I will never get Mark Ruskell to agree with me on the wider issue of nuclear weapons and the vital role that they play in preserving world peace—and I am sure that he knows that he will not get me to agree with his position on nuclear weapons, either—the issue is important and we need to discuss it.

I declare an interest; I live in Helensburgh, 5 miles from Faslane—I was born and bred there—and I am fully aware of many matters that have been mentioned in the debate. I start with something on which I agree with Mark Ruskell: local and civil authorities should consider the transportation of nuclear weapons on roads through their areas. Those bodies should risk assess the potential for danger to the public as part of their wider contingency planning procedures and I am sure that that work would find that the risk to the public was low or negligible.

I do not agree with the words in Mark Ruskell's motion that the transporting of nuclear weapons is "an inherent risk". If it is done safely, as it is in this country, the public has nothing to fear. It is important to note that there has never been an accident involving defence nuclear materiel in the UK that has led to, or come anywhere near leading to, the release of radioactive material into the environment.

**Alison Johnstone (Lothian) (Green):** Maurice Corry, as Mr Mountain before him, seems to suggest that, because there has never been an accident, there never will be an accident. Does the member not believe in the precautionary principle and that we must make sure that communities are as well prepared as they possibly can be, in the event of such an horrendous occurrence.

**Maurice Corry:** I could not possibly disagree with that point.

Mark Ruskell's motion speaks about the organisations that would be responsible for responding to an accident, and gives the impression that local and civil authorities would be left to their own devices. I follow on from what Edward Mountain said earlier and note that within every convoy is embedded an immediate response force—or IRF—which is specifically trained to deal with such situations. The convoy commander would take over as the incident co-ordinator and be in charge of co-ordinating the response. That means that, at an incident, there would immediately be sufficient equipment and

trained personnel to alert and brief the police, fire and ambulance services to assess whether or not there had been a release of radioactive material and to assist the police in establishing an initial safety and security zone.

Additional measures that would be put in place would include trained personnel to co-ordinate with the police in providing information for the media and public—the media are very strong here. Convoy personnel are also cross-trained to enable them to undertake other roles.

**Mark Ruskell:** I acknowledge the resources and expertise of the personnel that the MOD would have in connection with a convoy. However, the debate is about the Civil Contingencies Act 2004 and what happens beyond the immediate site of a convoy and the 600m cordon that would require evacuation and the 5km zone where schools and hospitals would have to shut down. That bit is the devolved responsibility.

**Maurice Corry:** I appreciate those facts and I am just coming to them.

Those arrangements are, of course, just at the site. On a wider national level, every time a convoy moves, a joint operations cell—or JOC—monitors all road movements of defence nuclear materiel and would activate any additional response needed to support the IRF. The JOC would contact the police immediately in the event of an emergency and provide them with precautionary public protection advice and discuss any additional support requirements. That would include going further out into the boundaries that Mark Ruskell spoke about in his intervention.

With regard to contingency planning by local and civil authorities, the Ministry of Defence deserves some credit. It has made information available on what actions should be taken by local authorities and emergency services by creating named documents, such as the one that was referred to earlier—"Local Authority and Emergency Services Information"—an example of which I have in my hand, from when I was an Argyll and Bute councillor. We had the Clyde local liaison committee, which met annually and had a calendar of emergency exercises. That calendar now goes from 2018 to 2023, and those exercises address the areas that Mark Ruskell has spoken about, beyond the Clyde base and beyond 5 and 10 miles. I was trained as a nuclear defence instructor in the army, so I am well aware of how those things progress and exercises go forward.

In Argyll and Bute, in relation to Her Majesty's Naval Base Clyde, exercise evening star is held annually, and a larger scale exercise called exercise short sermon is held every three years. Those include the local residents as well as

community councillors, councillors and indeed members of Parliament.

**Mark Ruskell:** Will the member take an intervention?

**Maurice Corry:** I will.

**The Deputy Presiding Officer:** Please be very quick.

**Mark Ruskell:** I thank Maurice Corry for his indulgence in giving way yet again. That is the point. Why do we not have the civil contingency approach to convoys that we have around the naval bases on the Clyde?

**Maurice Corry:** That is a fair point. In Argyll and Bute, we have been very used to this. It is certainly something that I would commend to the minister if she wanted to go and look at what happens in those two exercises, because we also address the question of incoming and outgoing convoys.

The JOC would contact the police immediately in the event of an emergency and provide them with precautionary public protection advice for the areas outwith the cordon. If we take an incident to include convoys as well—apart from the base situation of, for example, an overheated reactor on a nuclear submarine going red, which is sometimes how the exercises are performed—then we could use the same process for them. There is no reason why we could not transfer that process to the convoys, and I would certainly go along with that.

On engagement with the MOD's document "Local Authorities and Emergency Service Information" by the local and civil authorities, my experience in the Ministry of Defence in supporting local government suggests that it would be open and willing to engage with contingency planning officers in the local authority areas, not just in relation to individual places but in relation to convoys and in addressing other planning issues.

One of the problems is that, as elected councillors move on, the collective memory is sometimes lost, so a lot is imposed on the emergency planning officers for each local authority. As far as I am aware, they are the ones who should keep the councils up to date and provide the necessary planning.

In conclusion, I think that this is an area where local and civil authorities can improve, but I believe that the current arrangements for transporting nuclear defence materiel are safe and that the public should have no fears about that. I think, however, that we need to look at what is done in certain areas, such as Argyll and Bute, which I know quite a lot about, and progress it elsewhere.

17:42

**Bruce Crawford (Stirling) (SNP):** Like others, I warmly congratulate Mark Ruskell on bringing this important debate to the chamber this evening. I also thank Nukewatch UK for its interesting and important report "Unready Scotland: the critical gap in our response to the transport of nuclear weapons", which highlights the dangers that communities are put in by the nuclear weapons convoys, including communities in places in my constituency such as the city of Stirling, Gargunnoch, Arnprior, Buchlyvie and Drymen.

One of the reasons why I joined the SNP—now too many years ago to remember—was because of its strong ethos in opposition to nuclear weapons. Tonight, I could talk about the eye-watering amount that the UK Government has committed to spending on these status symbols at a time of austerity. I could talk about the moral absurdity of considering using nuclear weapons and the fact that, today, they are strategically more useless than they have ever been at any time in history.

However, this debate is an opportunity to highlight the everyday danger that they present to the people who live in ordinary communities in Scotland, and especially my constituents, who, among others, have Trident weapons convoys passing through their area regularly. Any accident or terror attack involving those warheads, particularly during a convoy through populated areas, would pose a potential serious risk to public safety, not to mention the potential long-term health and environmental damage that the radioactive poison that is contained in a Trident warhead could inflict.

Of course, the presence of nuclear convoys through the peaceful communities of the Stirling area encourages protest. Just last year, a man was fined £200 for laying underneath a Trident truck in Stirling. So much for security. What a terrifying prospect: a regular member of the public can actually get up and touch one of these things and interfere with its progress.

As the Nukewatch report points out,

"The risk acceptability gap between civil transport and the nuclear weapon convoys is ... vast."

Mark Ruskell touched on that. Civilian vehicles are prohibited from carrying explosives in conjunction with radioactive material. The reason for that restriction is clearly the heightened level of danger, and yet the risk of an attack or accident in relation to a Trident convoy does not prohibit them from carrying radioactive substances inside missile warheads.

With an estimated eight nuclear convoys a year travelling through Scotland, the Nukewatch report

questions how ready our country is for a major incident involving such convoys.

My question is, how ready can we really be? These things can never be safe as long as they travel through local towns and villages—they will always pose a potential threat to safety. As the report points out, assessing a risk means that we combine the likelihood of an event with the severity of its impact. Even if the likelihood was to be reduced to an insignificant amount, the severity of an accident involving nuclear warheads would be so great that the risk remains very high. That does not relate to whether anything has happened in the past; it is about what could happen in the future.

It is interesting that the response from Stirling Council to a consultation that forms part of the report suggested that nuclear convoys are arguably less at risk during times of rest stops at MOD Forthside in Stirling city. I say to Mark Ruskell, never mind the Nando's and the Vue, my office is much closer to that base than those fantastic establishments are. It is obvious that there is far less risk of an attack at an MOD facility than there is on a public road. However, the UK Government is set to close MOD Forthside entirely in 2022. Where will the convoys be expected to take rest stops thereafter? What would the findings of a risk assessment be then?

I am seriously concerned about nuclear convoys travelling through my constituency as well as other parts of the country. What does the future look like? Once the closure of MOD sites such as Forthside takes place, how can such convoys continue to operate, including with secure rest stops? Will the goal posts simply be moved again to make the risk more acceptable in those circumstances?

Those are hard questions that I put directly to the MOD ahead of today's debate and I look forward to getting a detailed response from it as soon as possible on this important matter.

One thing is absolutely certain: the best way to reduce the risk posed by the transportation of nuclear weapons is to rid ourselves of those obscurities once and for all.

17:47

**Tom Arthur (Renfrewshire South) (SNP):** I am grateful for the opportunity to participate in the debate. I thank Mark Ruskell for bringing this important issue to the chamber, although I do not think that I will ever look at a Nando's in quite the same way after this—the situation that Mark Ruskell described certainly has the quality of a disaster movie. I was particularly struck by his reference to “bemused tourists”. Clearly we want to encourage as many people as possible to come

to Scotland, but that is one tourist attraction that we could do without.

I will pick up on a couple of points that have been raised. I am sure that Edward Mountain will correct me if I misheard him, but I understood him to state that all civil authorities are informed of nuclear transportations. However, as I understand the situation, there is no obligation for local authorities to be informed of them. I say that because I was in contact with Renfrewshire Council about the matter this afternoon. My constituency of Renfrewshire South does not have nuclear convoys passing directly through it. However, as the convoys make their journey west towards the Erskine bridge on the M8, they pass nearby.

I commend Nukewatch for its work, although I do not think that it received a response from Renfrewshire Council, if I recall correctly. I am sure that Mr Ruskell will correct me if I am wrong. The council made it clear to me that it takes its responsibilities as a category 1 responder very seriously and that it seeks to work collaboratively with category 2 responders. The thing that I will take from the debate is that I will seek to engage directly with my colleagues in the local authority to make sure that they are up to date.

The questions that are raised about devolved competencies are these: should we have a refresh or a review of existing procedures and should members of the public be informed?

I am of a generation of people who were born towards the end of the cold war. I did not grow up with the persistent threat of the mushroom cloud and nuclear Armageddon—although given political developments over the past few months, my generation might experience that threat. Mark Ruskell talked about civil defence; we talk about civil contingencies now. Awareness of the risk of nuclear war and civil defence in particular situations was second nature for my parents' generation, but it is not for mine, so there has perhaps been a commensurate decrease in awareness of the risk that is posed by nuclear weapons being housed in Scotland. I will be interested to hear what the minister has to say about whether there is a need to refresh civil contingency measures. There is certainly a need to increase awareness among parliamentarians and members of local authorities. Maurice Corry made that valid point. Many councillors in my local authority area are probably closer to my age and might not recollect the threats of a bygone age. Perhaps it is just a question of making people more aware of the issue, without being alarmist.

There are specific concerns in my Renfrewshire South constituency. Glasgow airport is on the doorstep and any event that resulted in extended closure of the M8 or surrounding roads would be

massively disruptive. I am keen to hear what the minister says in response to such concerns and to learn what action, if any, the Government seeks to take.

**The Deputy Presiding Officer:** I am more interested in how you will justify accusing me of being from “a bygone age.”

**Tom Arthur:** I would accuse you of no such thing, Deputy Presiding Officer.

17:51

**Ross Greer (West Scotland) (Green):** I thank my colleague Mark Ruskell and Nukewatch for their work in preparing the “Unready Scotland” report, which lays bare the danger that nuclear weapons convoys pose, not just to the communities that they pass through but to communities such as those in Tom Arthur’s constituency, which the convoys pass close to.

The report shows the inadequate preparation by local authorities, which in many cases do not seem to realise—either through genuine misunderstanding or a deliberate attempt to evade their responsibilities—that they have a clear responsibility in this context, which Mark Ruskell outlined.

We should be absolutely clear what the convoys contain, why there is a risk and where the responsibility lies. The convoys transport nuclear warheads, with the dangerous radioactive materials and explosives that are required in combination to create a viable weapon of mass destruction. The immediate risk is not detonation of one of the warheads, which Edward Mountain was right to highlight. It is exceptionally hard—almost impossible—to detonate a nuclear bomb by accident. The risk is that as a result of an accident or an attack on a convoy we could face what equates to the most powerful and dangerous dirty bomb imaginable. An accident that involved a convoy would risk releasing radioactive material and dispersing it into the surrounding area. The immediate area within 600m of the accident could be contaminated. Wind could carry radioactive particles a further 5km, and many people suggest that that is a conservative estimate.

Any release of radioactive particles would be devastating for local communities and for Scotland and the UK as a whole, but most people are not even aware that the convoys pass through our cities, towns and villages: people are entirely unaware that convoys drive down the streets in which they live. On leaving Faslane naval base and Helensburgh, in my region, the convoys often travel to the A82. That takes them through Balloch, Alexandria and Dumbarton and all the way to the Erskine bridge and on to the M8. From there, they travel along the M8, passing Paisley,

Renfrew and the south side of Glasgow. We are talking about hundreds of thousands of people in the danger zones.

The convoys travel through a number of local authority areas—Argyll and Bute, West Dunbartonshire and Renfrewshire—as well as close to the border of East Dunbartonshire when they return along the M80. The journeys take place half a dozen times a year, and sometimes a couple more times.

What is really worrying is the inconsistency in local councils’ preparedness to deal with an accident and the potential release of radioactive material. No local authority—not one—has carried out specific risk assessments for the convoys, although councils should have done that. Some authorities seem to be unable even to explain generalised emergency response plans.

As members have said, the convoys are primarily the responsibility of the Ministry of Defence and the UK Government. However, being prepared for an accident involves local councils and other public bodies in Scotland. All public bodies that are category 1 responders should be prepared.

Argyll and Bute Council provided us with some information on its risk planning. That should be expected of the local authority that houses the naval base that contains the weapons. Maurice Corry provided the chamber with useful information on that council’s preparations with regard to the base. It has worked in partnership with other local councils, including East Dunbartonshire Council, in its regional risk partnership. However, such a generalised approach still falls short of a satisfactory risk assessment for nuclear convoys.

To make matters worse, as Tom Arthur highlighted, Renfrewshire Council—which is not alone; West Dunbartonshire Council is another—provided no information at all. Instead, West Dunbartonshire Council stated that the matter is the responsibility of others including the MOD, Police Scotland and the Scottish Government. Yes: they are all responsible—but so is the local authority. Under the relevant legislation, which is the Civil Contingencies Act 2004, such councils are category 1 responders and so are obliged to maintain emergency plans. Not a single local authority in Scotland has such a plan for the convoys.

Given that the convoys go through a number of local authority areas, the Scottish Government has a role here, and an opportunity to step in and co-ordinate a review of the preparedness of our civilian authorities. We must ensure that all responsible bodies are prepared in the event that the worst happens. That is not something that

could—or should—be left to chance. It is not responsible to pass the buck to the MOD when the 2004 act places clear obligations on our civilian authorities. After all, what would happen in the event of an accident involving one of those convoys? Would the residents of Balloch, Alexandria, Dumbarton, Erskine, or any of the other towns and villages that they pass through, be well served by those whom they expect to serve them? My constituents should expect those who are responsible for their safety to be prepared.

Given that the convoys are a known risk, there is no good reason for councils across the central belt and the south of Scotland to be so completely unprepared for that specific risk. By raising the issue today, I hope that we can prompt them to take the actions that they should have taken some time ago, and to live up to their responsibilities for community safety.

**The Deputy Presiding Officer:** I call Annabelle Ewing to respond to the debate—for seven minutes or so, please, minister.

17:56

**The Minister for Community Safety and Legal Affairs (Annabelle Ewing):** I, too, congratulate Mark Ruskell on securing this important debate. The importance of the issue is well illustrated by the number of members who sought to make their contributions.

In responding to the debate, I reiterate, at the outset, that the Scottish Government is firmly opposed to the possession, threat and use of nuclear weapons. We are committed to the safe and complete withdrawal of Trident from Scotland, and have repeatedly called on the UK Government to cancel plans for its renewal.

As has been noted in the debate, the responsibility for transportation of nuclear warheads lies with the MOD. However, the Scottish Government expects any such transportation to be carried out safely and securely, and has made that expectation clear to the UK Government. Indeed, public safety is our absolute priority, and we have sought assurances from the MOD that robust arrangements are in place to ensure the safety and security of nuclear convoys at all stages of the transportation process.

Although, as members have said, there has never been a defence nuclear transport incident that has posed a radiation hazard, I can well understand the concerns that members have expressed tonight and, indeed, the public concern about such convoys. I would like to take this opportunity to stress that we in the Scottish Government take the matter very seriously indeed,

which is why very significant resilience planning is in place. I will clarify what that is, because there are certain misapprehensions about how it operates in Scotland.

Members might wish to note that Scotland's three regional resilience partnerships—which include local authorities but are, in fact, led by Police Scotland and the SFRS and supported by Scottish Government resilience co-ordinator teams—are not in the woeful position of having no plans in existence. Rather, they regularly undertake a risk and preparedness assessment process. Moreover, resilience register work is maintained, which enables the resilience partnerships to identify and assess the main risks that are relevant to their regions and determine how prepared they are to deal with the consequences of those risks.

**Mark Ruskell:** I thank the minister for outlining the work of the resilience partnerships. Does that work specifically include assessment and planning regarding nuclear convoys?

**Annabelle Ewing:** Yes. My understanding is that that is the case. The resilience partnerships look at a number of risks, including those presented by nuclear convoys. Therefore, although I understand Mark Ruskell's determination to find out what is happening in Scotland, relying simply on the response, or otherwise, to his survey might not give him the full picture.

The UK national risk assessment and national risk register, as well as the Scottish risk assessment and resilience partnership community risk register arrangements, provide an evidence-based priorities approach to risk at the UK, Scottish and local levels.

The national risk register, which is produced by the UK Government, is publicly available and seeks to inform the public about the range of risks that the UK may face. The community risk registers are published by the three resilience partnerships to communicate the key risks for the north, east and west regions of Scotland. Those are also publicly available, and provide advice on what to do and who to contact in an emergency.

In common with other countries, we in Scotland practice integrated emergency management. That concept recognises that the most effective preparation for any event rests on planning for a range of consequences rather than the characteristics of a specific event. The Scottish Government is satisfied that, through the use of integrated emergency management, Police Scotland and the Scottish Fire and Rescue Service, which are the lead agencies, local authorities and other category 1 responders are

well prepared to deal with a diverse range of emergency events.

As I have advised, Police Scotland and the Scottish Fire and Rescue Service take the lead on resilience planning for nuclear convoys in Scotland. Local authorities, as category 1 responders, have, as has been mentioned, a duty, along with Police Scotland and the SFRS, to warn the public and to provide information and advice if an emergency is likely to occur or has occurred, under the Civil Contingencies Act 2004 (Contingency Planning) (Scotland) Regulations 2005. However, as has also been said, in performing that duty, they must take account of the importance of not alarming the public unnecessarily.

As far as the MOD is concerned, it maintains wider arrangements to respond to any incident, which includes the nuclear accident response organisation and the necessary contingency plans to deal with any accident. The MOD has provided assurance that the routes adopted are carefully selected as part of a rigorous risk assessment process and are regularly reassessed for their continued suitability. Moreover, the MOD has provided assurance that operational planning always takes into account such factors as road and weather conditions. Given that we are not privy to all the detailed information on which the MOD bases its judgments, we are not in a position to independently corroborate all those assurances.

As far as notice is concerned, the MOD provides that to Police Scotland and the Scottish Fire and Rescue Service but refuses to share details more widely, on what it says are grounds of national security.

On operational planning and guidance, it should be pointed out that preparing Scotland provides guidance for any emergency, regardless the cause. The guidance deals with preparing for, responding to and recovering from emergencies in Scotland and forms the basis of emergency arrangements. It takes cognisance of the MOD's publicly available document "Local Authority and Emergency Services Information", which provides information for the emergency services, local authorities and health authorities on contingency arrangements to be implemented in what the MOD views as the unlikely event of an emergency during the transportation of defence nuclear material.

**John Finnie (Highlands and Islands) (Green):** You might be seeking to reassure us, but there is a huge gap between what you say, minister, and what is in the "Unready Scotland" report. Do you recognise that the Scottish Government must address that issue?

**The Deputy Presiding Officer:** Always speak through the chair, please, Mr Finnie.

**Annabelle Ewing:** In response to Mr Finnie, I say that I am trying to say where we are at the moment and what we might be thinking of doing, going forward.

I tried to say gently to Mr Ruskell that I understood that he, in good faith, conducted a survey and got the replies that he did. However, the resilience structure is not quite as the results of that survey would suggest. The resilience structure is not headed by local authorities; as the member will be aware, at the very top, the resilience structure is headed by Police Scotland, which works closely with the SFRS, alongside the resilience partnership first responders, such as local authorities. It is important to understand that structure when putting the survey result into context. [*Interruption.*]

**The Deputy Presiding Officer:** Excuse me, but I am still here.

**Annabelle Ewing:** Sorry, Presiding Officer.

On emergency response arrangements, emergency services in Scotland have plans in place for responding to any major incident, regardless of the cause. There are well-established resilience structures in place to manage the consequences of any emergency. The structures have been and continue to be robustly tested, and proven, through exercises and real events.

The Scottish Fire and Rescue Service has plans in place and has made pragmatic preparations to deal with incidents involving defence nuclear material, including convoys of such material. Similarly, Police Scotland can give assurance that up-to-date plans are in place to deal with all major incidents, including nuclear incidents, and that its procedures relating to defence nuclear material are current. Its resilience staff liaise regularly with the MOD police on a range of matters.

As I said at the outset, the Scottish Government believes that nuclear weapons are immoral, illegal, and a colossal waste of money. We wish to see the Trident replacement programme scrapped and we have called repeatedly on the UK Government to do that.

Absent reclaiming power here for this Parliament, we in Scotland are reduced to being lumbered with whatever the UK Government decides. That is the unenviable position that Scotland is in—I hope not for too much longer. In the meantime, we see the transportation of nuclear weapons on our roads continue, because we have no power to stop it.

What the Scottish Government can do is to ensure is that we take our resilience

responsibilities with the utmost seriousness. That is witnessed in the on-going resilience work of our police and fire and rescue services and in the work of the three regional resilience partnerships.

I have listened carefully to the concerns raised by members and I can confirm that I will be writing to Her Majesty's inspectorate of constabulary in Scotland and to Her Majesty's fire service inspectorate in Scotland to ask them to consider conducting a joint review of the resilience work of Police Scotland and the SFRS. That review would be able to look at the close working arrangements with local authorities and the other responders in Scotland's regional resilience partnerships to ensure that response arrangements are indeed up to date and current, because we all want to have that assurance. I trust that that will provide members who have participated in the debate and, indeed, our guests in the public gallery with some reassurance about the serious approach that the Scottish Government takes to these matters.

Of course, to pick up on a point that Bruce Crawford made, as far as nuclear convoys are concerned, the only way to really deal with the issue once and for all is to ensure that powers over such matters—that is to say, the powers of a normal independent country—lie with this Parliament.

*Meeting closed at 18:07.*



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.

---

Published in Edinburgh by the Scottish Parliamentary Corporate Body, the Scottish Parliament, Edinburgh, EH99 1SP

---

All documents are available on the Scottish Parliament website at:

[www.parliament.scot](http://www.parliament.scot)

Information on non-endorsed print suppliers is available here:

[www.parliament.scot/documents](http://www.parliament.scot/documents)

For information on the Scottish Parliament contact Public Information on:

Telephone: 0131 348 5000

Textphone: 0800 092 7100

Email: [sp.info@parliament.scot](mailto:sp.info@parliament.scot)

---



The Scottish Parliament  
Pàrlamaid na h-Alba