

# Meeting of the Parliament (Virtual)

**Thursday 15 October 2020** 





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### **Scottish Parliament**

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[The Presiding Officer opened the meeting at 12:20]

#### Covid-19

The Presiding Officer (Ken Macintosh): Good afternoon and welcome to this meeting of the Scottish Parliament. As viewers can see, the Parliament is meeting virtually, with members joining us remotely from their homes and constituencies around Scotland.

There is one item of parliamentary business, which is a statement from the First Minister, Nicola Sturgeon, on Covid-19. The First Minister will take questions following her statement.

The First Minister (Nicola Sturgeon): The Scottish Government is legally required to review Covid restrictions regularly. The latest review is due tomorrow, so I will shortly set out our conclusions and the reasons for them.

I will give an update on two developments: the laying of new regulations on face coverings and the publication of further details on how businesses that are affected by the temporary restrictions that were announced last week can apply for support.

Finally, I will talk a bit about the Scottish Government's proposed new strategic approach to tackling Covid, and how we intend to involve Parliament in the development, agreement and implementation of that approach.

First, I will give an update on the daily Covid statistics. The total number of positive cases that were reported yesterday was 1,351, which represents 17.6 per cent of people who were newly tested, and takes the total number of cases to 44,036. Of the new cases, 450 were in Greater Glasgow and Clyde, 374 were in Lanarkshire, 161 were in Lothian and 111 were in Ayrshire and Arran. The remaining cases were spread across all the other mainland health board areas.

I confirm that 601 people are in hospital, which is an increase of 31 since yesterday, and that 51 people are in intensive care, which is two more than yesterday. I very much regret to report that, in the past 24 hours, an additional 13 deaths have been registered of patients who first tested positive over the previous 28 days. That means that the total number of deaths, under the measure that is used in our daily figures, is now 2,585. Once again, I send my deepest condolences to everyone who has lost a loved one to the illness.

The figures confirm the trends of recent weeks: we are seeing high numbers of new cases, which is leading to increases in hospital and intensive care unit admissions and, sadly, to a rising number of deaths. Even in the nine days since I set out the new restrictions on hospitality, the average daily number of new cases in Scotland has risen from 788 to 1,178; the number of people in hospital with Covid has increased from 262 to 601; and the number of people in intensive care has doubled from 25 to 51.

For all that, we are still in a stronger position now than we were in in March. Infection levels are lower, the number of cases is rising less quickly, and test and protect is taking a lot of the strain of controlling the virus. Although we are not yet seeing in our statistics the impact from the measures, we acted quickly to introduce restrictions on household gatherings three weeks ago, and on hospitality last week.

However, the fact remains—for us, as for countries around the world—that this is a critical moment, and our position is precarious. That demands tough decisions from the Government, even if those decisions are, understandably, unwelcome, and it demands a willingness on the part of every one of us to behave in ways that will hinder the virus rather than help it to spread.

For all those reasons, I must confirm to Parliament that all the existing Covid restrictions and guidance will remain in place, for now. That means that we should all continue to work from home if at all possible, and that none of us should visit other people's houses, except for extended-household arrangements or for essential reasons such as childcare or looking after a vulnerable person.

Outdoors, and in indoor public places that are open, we must limit gatherings to a maximum of six people from no more than two households.

Bars, pubs, restaurants and cafes in areas outside the five health board areas in which there are tougher restrictions can open indoors only until 6 pm for serving of food and non-alcoholic drinks. Pubs, bars and restaurants in Greater Glasgow and Clyde, Lanarkshire, Ayrshire and Arran, Lothian and Forth Valley health board areas must remain closed completely, indoors and outdoors. Cafes in those areas can open only until 6 pm.

People who live in any one of those central Scotland areas should not travel outside their area unless they really need to, and people in other parts of Scotland should not travel to those areas unless it is absolutely necessary. We are also asking people to avoid travelling to areas of high risk in other parts of the United Kingdom. Detail on areas that are in that category will be kept updated on the Scottish Government's website.

We are specifically asking people not to go on trips to Blackpool, unless they are necessary. Yesterday, I said that, over the past month, 180 people who had tested positive for Covid reported recent travel to Blackpool. I can report that the figure is now 286.

The restrictions are hard for individuals and businesses, but they are essential. They mirror what many countries across Europe are doing, and we hope and believe that they will have an impact on transmission. However, I must make it clear that we will keep the situation under review, and that we will propose further measures if we consider that to be necessary to keep people safe. I will say more shortly about how we will approach decisions in the weeks ahead.

First, let me touch on two other matters. Last week, I indicated to Parliament our intention to introduce new regulations on face coverings. I confirm that regulations are being laid today, and that two measures will come into force tomorrow. The regulations will, in one respect, actually deliver some flexibility—they will exempt a couple from having to wear a face covering during their marriage or civil partnership ceremony. That is a small but important change that I hope will be welcomed by anyone who is about to tie the knot.

However, more significant is that the regulations will bring the rules on wearing face coverings in workplace canteens into line with the rules for restaurants and cafes. From tomorrow, everyone in a workplace canteen will have to wear a face covering when they are not seated at a table—for example, if they are queuing, entering or leaving the canteen or going to the bathroom. A further change will take effect on Monday, requiring that face coverings be worn in other communal workplace areas, such as corridors.

Responsibility for complying with the measures rests with individuals, but I urge employers to take steps in their workplaces to explain and promote the new regulations. The new rules are a proportionate additional step that will help employees to keep themselves and their colleagues that bit safer.

The second issue that I want to touch on briefly relates to support for business. I made it clear that we would support businesses and workers that were affected by the temporary restrictions that were announced last week. In total, we are making £40 million of support available, including a £20 million grant fund that will be administered by local authorities. Details of the application process for that fund have just been, or are just about to be, published on the Scottish Government's website.

Local authority websites will be updated next Tuesday to allow applications to be made, and it will be possible for businesses to apply at any time in the two weeks after that. I encourage all eligible businesses that need support to apply. There is, after all, an important principle here: many businesses are being required to take drastic action to help us to tackle Covid, so it is essential that we take significant action to help them to do so.

The new regulations on face coverings and the availability of support for businesses are the two immediate issues that I want to highlight today, but I also want to look ahead briefly to our approach to managing the virus in the weeks and months to come.

Last week, we introduced tough temporary restrictions that affect hospitality in particular. The regulations that gave effect to the temporary restrictions on hospitality are due to expire on 26 October. However, it is important to stress—although I believe that everyone already understands this point—that given the on-going challenge of Covid, that will not herald a return to complete normality. The restrictions on household gatherings, for example, will remain in place until it is considered safe to ease them.

More generally, we intend to replace the temporary restrictions with a new strategic approach to managing the pandemic. Part of that new strategic approach will set out the different tiers, or levels, of intervention and restrictions that might be applied in the future, either locally or across Scotland, depending on how the virus is spreading. When we publish the new framework—which will then, of course, be the subject of debate and a decision by Parliament—we will indicate, based on the latest advice from the national incident management team and our clinical advisers, what level of intervention should apply to each part of the country when the temporary restrictions end on 26 October.

The tiered approach to intervention will clearly be a central part of the new strategic framework. However, I stress that the framework will go beyond that; it will also seek to strengthen and improve the effectiveness of measures that we currently have in place to strengthen our resilience in living with the virus for the period ahead.

For example, the framework will set out our work to improve compliance with the FACTS advice, with a particular focus on supporting people to self-isolate when they are asked to do so by test and protect teams. It will outline the support that we will make available in the future for businesses that are required to close. The framework will describe how we will continue to support people on low incomes, for whom the Covid restrictions can have especially harsh impacts. It will also draw on the conclusions of our on-going review of our testing strategy, and will set out our future projections of testing capacity and

the clinical decisions that we have reached on how that capacity can be used most effectively to suppress the virus through the winter months.

In the week ahead, we intend to share and discuss the provisional content of the strategic framework with other parties. That cross-party engagement will include the offer to party leaders of a detailed briefing session with me, the Cabinet Secretary for Health and Sport and the Government's key clinical and technical advisers early next week. Mike Russell is also facilitating discussions on how Parliament as a whole can better scrutinise not just the forthcoming framework, but future changes to Covid regulations more generally.

A global pandemic of an infectious virus will often require emergency action and quick legislation, but we recognise that that imperative must, as we prepare to live with Covid for an extended period, be balanced by the need for robust and, whenever possible, pre-emptive parliamentary scrutiny. We therefore intend to work across the chamber, and across wider society, to ensure that we get that balance right in the weeks and months ahead.

One reason why that is so important is that we are at such a critical and precarious point in our journey through the pandemic. Scotland has already acted first among the nations of the United Kingdom in applying tough restrictions. We have done so at a time when our levels of Covid, although far too high for comfort, are actually lower than levels in the other UK nations. I believe and expect that they will make a difference, but although we have put in place tough measures, we cannot rule out having to go further in the future.

For example, the approach to travel that is being adopted by the Welsh Government to mitigate spread of the virus from high to low prevalence areas not just within each of the four UK nations, but where necessary between the four nations, needs to be considered here, too, and is being considered. As we consider the issues, plan future steps and, where necessary, take emergency action, we will seek to ensure that Parliament is fully informed and involved in the decisions.

The final points that I want to make today are about context, perspective and individual agency. I make these points to acknowledge, and not in any way to minimise, what we are all going through right now. I am acutely aware that as we enter winter with tough restrictions still in place, and mounting worries for many people about jobs and livelihoods, it can be hard to escape feelings of despair and helplessness. However, I want to encourage everyone to hold on to some key truths and to the hope that comes from them.

First, this pandemic will not last forever. It will pass and we will—I hope, soon—be able to foresee the time when we can start to talk about it in the past tense. Secondly, we are not alone, either as a country or as individuals. This is a global pandemic. Countries across the world are going through exactly the same as we are going through, and are taking the same decisions that Scotland is being forced to take.

Here in the UK, Northern Ireland has introduced tough new curbs in the past 48 hours, which reflects the very high prevalence of the virus there. Additional restrictions are being introduced in parts of England and, as I mentioned, Wales is introducing further restrictions on travel.

Across Europe, restrictions on hospitality and other facets of everyday life have been reintroduced recently in Belgium, the Netherlands, France, Spain, Germany, Ireland and many other countries. Governments and populations around the world are wrestling with how to tackle and live with the virus, and we must try to learn from each other.

I know that, here at home, many people are struggling with feelings of loneliness, isolation and anxiety, but support—both practical and emotional—is available if people need it. Details of that can be found on the NHS Inform website.

As we deal with the difficult few months that lie ahead, let us all remember to be kinder to each other than we might normally be. Let us look out for people, offer help if we can, and remember that this is no-one's fault. I know that our experiences are different, but the pandemic is something that we are all living through. None of us is exempt from the impact, and we are all finding it hard, so let us try to help each other as much as we possibly can.

I know that this could sound clichéd, but I make no apology for saying that love, kindness and solidarity are more important right now than ever before. Even just a smile and a kind word can help to make a tough day slightly better, so we should never underestimate the difference that we can all make, in ways large and small, to help each other through this difficult period.

Thirdly, let us remember that, although we cannot, unfortunately, magic the virus away or guarantee that we will not get it or pass it on, none of us is powerless against it. We can all, and we must all, act and behave in ways that will help to stop it in its tracks. That will make us safer as individuals, it will help to protect our loved ones, our wider communities and the national health service, and it will save lives. So, although I know that it is difficult and frustrating, please abide by all the rules and guidance. They are there for our individual and collective protection.

Finally, remember FACTS. Face coverings protect other people and help other people to protect you. Avoiding places with crowds of people also protects you and others. Cleaning your hands and surfaces does so, too. Keeping 2m distance from people in other households reduces the chances of the virus spreading from one person to another. Self-isolating and getting a test if you have symptoms will break the chains of transmission, too.

Now more than ever, it is vital for all of us that we follow all that advice and do everything that we can to beat Covid back. By doing so, we will protect ourselves, those whom we love and our communities. We will help our NHS to care for the people who need it and, above all, we will save lives.

**The Presiding Officer:** I intend to allow around 50 minutes for members to ask questions. We will start with the party leaders.

Ruth Davidson (Edinburgh Central) (Con): I thank the First Minister for the advance sight of her statement—[Inaudible.]—myself and my party to the families and loved ones of those who have lost their lives in recent days.

In the past week, we have seen outbreaks of Covid closing wards at the Queen Elizabeth university hospital in Glasgow and the Western general hospital in Edinburgh. The Edinburgh outbreak, in my constituency, has been particularly devastating, focusing—[Inaudible.]

—visitors to patients in other wards and those who are being treated in the affected ward itself—[Inaudible.]—by definition immunosuppressed and being told that they cannot leave a ward where Covid is present.

Investigations are under way to establish how the virus was brought on—[Inaudible.] No one would seek to prejudge the outcome of those investigations and, given what we have seen of isolation and end-of-life care during the pandemic, we would not seek to further restrict loved ones from being at patients' bedsides in such circumstances. However, patients, staff and visitors need reassurance that everything possible is being done to stop the transmission of Covid within hospital settings and to ensure that, as far as possible, those who may be asymptomatic do not bring the infection on to hospital estates.

[Inaudible.]—outbreaks, issues have been raised—[Inaudible.]—checks and controls once people have come on to each campus. Can the First Minister say whether further infection control measures, such as temperature testing, are being considered on a ward-by-ward basis across Scotland's hospitals?

**The Presiding Officer:** Thank you, Ms Davidson. I am afraid that the sound quality was a bit bad, but I hope that the First Minister gathered most of the question.

The First Minister: I apologise in advance, Presiding Officer—it was very difficult to hear what Ruth Davidson was saying, as the sound was breaking up. I certainly got the general thrust of her question, but I did not necessarily get all the detail. I will do my best to answer it on the basis of what I was able to hear.

Hospital-acquired infection is a concern at any time, and it is a particular concern right now, in the context of Covid. We are advised on the steps that it is necessary and appropriate to take by the national antimicrobial resistance and healthcare-associated infection body, and we will continue to take its advice.

A number of steps have been taken, including the restricting of visiting to hospital—I know what impact that has on individuals—and a range of other measures. A number of groups of people are tested going into hospital, including all people over the age of 70 who are admitted to hospital, all people who are admitted to intensive care units, all people who are symptomatic on admission, all people who are admitted as in-patients for elective surgery, all people who go into hospital for organ transplants and all in-patients, including those who are asymptomatic, in wards with an outbreak. Of course, all people who are discharged into care homes are tested, as well.

I think that Ruth Davidson asked about the possibility of introducing temperature checks. We will continue to keep all of that under review and to take decisions based on clinical advice.

We now publish weekly figures on nosocomial hospital-acquired infections, and the health secretary and I continue to be updated and advised by the chief nursing officer and the deputy chief nursing officer about the situation in particular wards and hospitals and the steps that are being taken. Infection prevention and control in the sense not just of preventing Covid from getting into hospitals but of controlling it and preventing its transmission in hospitals is of paramount importance, and we will continue to ensure that everything possible is done. That includes the appropriate provision of personal protective equipment for those people who work in our hospitals.

Richard Leonard (Central Scotland) (Lab): I, too, thank the First Minister for providing advance sight of her statement. I add our condolences to all those people who have lost loved ones to Covid-19 over the past week.

I have spoken many times before about the importance of public consent in the backing for

public health measures in the fight against the pandemic. We have now seen the minutes of the meeting of the scientific advisory group for emergencies that was held on 21 September, which was attended by Scottish Government advisers, so we know that SAGE concluded that, over the course of the next six to nine months, multiple circuit breakers might be needed and that testing must be a priority. It also said that, to be effective, measures must be consistent, without ambiguity or contradiction, and that they should be equality proofed and co-produced, with the early engagement of those who are most likely to be affected.

Despite that, last week, the First Minister chose measures that were imposed with no engagement with the people affected, that have resulted in ambiguity and confusion and that will hit hardest people on the lowest incomes. Meanwhile, the current test and trace strategy and system is not good enough. Will the First Minister explain to us why she ignored that scientific advice?

The First Minister: The Scottish Government absolutely did not ignore the scientific advice from SAGE. In fact, if we look at the actions of Governments across the UK, we can see that the Scottish Government acted to implement many of the recommendations that SAGE made.

As I have set out previously, Governments have to take account of the scientific advice. Of course, as we go further into the pandemic, we must balance the imperative of stopping the virus with the harms that are done through some of the measures that we have to use to do that. We have to reach balanced decisions that stop the virus and protect people's jobs and livelihoods, as well as their wider wellbeing and health.

One of the recommendations that SAGE made on 21 September was that there should be a nationwide ban on people visiting other people's houses. We introduced that on 22 September; at the time, we were the only Government in the UK to do that.

The SAGE advice also said that there should be restrictions on hospitality. We introduced significant restrictions on hospitality nationwide last week, and even more significant restrictions in five health board areas across central Scotland. Indeed, as he is entirely entitled to do, Richard Leonard last week and today raised criticisms of the Government for doing that.

The other aspect of the SAGE advice that has been consistent Scottish Government advice has been for people to work from home where possible. Further, although we did not move to a completely online approach to university education, because we believe that it is important for young people to have some semblance of

normality in their student life, we put in place tough guidance to help universities manage the start of the term. Of course, all that has been done at a time when our schools were starting to go into the holiday period. I would argue that the Scottish Government has taken the SAGE advice and implemented it.

I will make two final points. The first is about public consent and support. I agree strongly that that is important. It is one of the reasons why, every day, I feed in directly to the public and take questions from the media. I do that because I think that it is important to constantly set out not just our decisions but our reasons for them. I believe that there is strong public support for the approach that we are taking. That is not the same as saying that the public are happy about or welcome all the restrictions, but I believe that the public understand why they are so important.

Secondly, I agree that the right balance needs to be struck between the need that I set out in my remarks to take quick and decisive actions in the face of a pandemic of an infectious virus and the need to have as much consultation and engagement as possible. That is particularly important as we go into this next stage of handling the pandemic, which is why we will take the approach to parliamentary engagement that I set out, starting next week, and seek to consult with wider society as much as possible.

I will make no apology for, on occasion, due to the threat that we are dealing with right now, being prepared to take quick, firm and decisive action if we deem that to be necessary to save lives.

Patrick Harvie (Glasgow) (Green): As others have done, I express my deepest sympathy to those who have lost someone due to the virus and our concern for those who are still suffering from it.

I thank the First Minister for her statement. In particular, I welcome the fact that it recognises that the new framework must place greater emphasis on supporting those who need to self-isolate. That is an area that clearly needs more attention.

The First Minister has also said that we will see the outcome of the review of the testing strategy at the same time as we see the new framework.

Yesterday, though, we learned that the September meeting of the nosocomial review group, which the First Minister mentioned, has already approved a new testing strategy for hospitals in line with that published by the European Centre for Disease Prevention and Control. That means a greater role for regular, weekly routine testing. I welcome that, but can the First Minister say why that decision was taken in advance of the review of the general testing strategy? Have other decisions about testing been

made in advance of that strategy? Does that signal a new acceptance on the part of the Scottish Government that routine, weekly testing on a much bigger scale than we have seen to date has a critically important role to play in tackling the virus?

The First Minister: We have not reached final decisions on the review of the testing strategy. That review is under way. The session that I mentioned in my statement that party leaders will be invited to early next week will be an opportunity for us to share our current thinking and get the views of party leaders before we finalise the decisions. However, in Scotland, as in many countries, we have had debates and made decisions about the balance between, on the one hand, symptomatic testing—which has to be the priority, because that catches people who have the virus and allows us to identify their contacts and break the chains of transmission—and, on the other hand, testing groups of asymptomatic people on a more routine basis. For some time, we have been doing that in certain groups, most notably those who work in our care homes, who are tested on a weekly basis, and the groups of people without symptoms who are tested when they go to hospital, which I set out earlier.

We will be looking to extend that, but the selection of groups for routine and regular testing has to be driven by clinical advice and considerations. Clearly, we have to be able to deliver it within our capacity, but we are substantially increasing that. We have to take clinical advice about the areas where that is likely to be most effective, particularly when it comes to affecting the vulnerable and helping to suppress the spread of the virus. Those are the clinical voices that we are listening to and, as I say, we will share our up-to-date thinking with the other parties early next week.

One group that I have been openly talking about in that regard this week—I stress that no decisions have been taken, but it is under active consideration—are regular visitors to care homes, because that would be another way of protecting the people in care homes while allowing greater normality for visiting arrangements.

All those issues are under consideration. We look forward to providing an update next week and bringing the final proposals to Parliament the week after next.

Willie Rennie (North East Fife) (LD): Last week alone, 567 people waited for more than two days to get a call from test and protect. It is alarming that, months after the pandemic first hit, the Government is still playing catch-up. When will the dangerous delays be eliminated?

The First Minister says that she expects the current restrictions to make a difference, but the medical officers say that the R number will still stay way above 1, so the restrictions will not make enough of a difference. As the First Minister—[Inaudible.]—continue to grow, what does that mean for the elimination strategy, and are we stuck with a package of restrictions that the modelling says will not work?

The First Minister: Unfortunately, Willie Rennie froze on my screen in the middle of his question, so I missed part of it. However, I think that I got the thrust of it.

Test and protect is working incredibly well. Over recent weeks, I have talked openly about a frustration with it—it is improving, but it is still not as reliable as we want it to be.

The turnaround time from somebody being tested, the test being processed through the Lighthouse laboratory network and the result of the test going into the test and protect case management system is not as quick as we want. It is part of the UK Government system and we are working with the Government to improve it.

The performance level of test and protect—from the time when a positive test result is notified, to individuals being successfully contacted and their phone interviews being completed—is extremely high. In figures from the most recent week, almost 95 per cent of contacts took place within 48 hours, which—to provide some context—was almost 3,500 people.

As I said, test and protect is working well. I would never stand here and say that there were no improvements that we wanted to make or that there was no further resilience that we wanted to build into the system. At the scale at which it is operating just now, it is a relatively new system, so we have to strengthen it as we go along, which is happening.

Equally, I am not of the view that anybody should be suggesting to the wider population anything other than that the system is working well, because we need people to have confidence in it. It is important that anybody who has symptoms comes forward and gets tested and, if their test is positive, that they and their close contacts—having been contacted by test and protect—abide by the advice to self-isolate.

We will continue to take steps to strengthen the system and will work with the UK Government to strengthen the parts that are not within our control.

We have introduced measures that we hope will bring the R number below 1. We assess these things every day, although there is a lag effect between measures being introduced and having an effect on the figures. As I have said, if our ongoing assessment suggests that it is necessary, we will not hesitate to bring forward proposals for additional restrictions to be introduced.

The household restrictions and, more recently, hospitality restrictions that have been in place in Scotland for the past three weeks—or the past week, in some cases—are the toughest restrictions that have been put in place anywhere in the UK. Northern Ireland will now go further, which is absolutely justified, as the prevalence of Covid in Northern Ireland is around two and a half times higher than it is in Scotland right now. We continue to keep all that under review and to take whatever steps that we consider to be necessary.

I think that Willie Rennie will continue to ask me about the elimination strategy, I will continue to try to explain to him what the elimination strategy is and he will continue to ask questions that suggest that he has not heard my answers. That is all entirely fine.

We have not given up on an elimination strategy. An elimination strategy is not eradication; Covid can be eradicated only when we have a vaccine or immunity at a level that will allow that to happen. An elimination strategy means that policies are designed to drive infection rates as low as possible. That is a harder job in the period that we are in just now—going into winter—than it was over the summer, when everybody was still in lockdown.

It is still very much our objective to drive infection rates as low as possible and to use this period to strengthen how we do that, while we have temporary restrictions in place. That will continue to be our objective. Incidentally, partly because of the initiative of the Scottish Government, that is now the stated objective of all four UK nations.

Annabelle Ewing (Cowdenbeath) (SNP): I very much welcome the Scottish Government's plans to develop a new strategic framework to take account of the evolving progression of Covid-19. Can the First Minister provide an assurance that, through that work, the Scottish Government will continue to take into account the advice and modelling from SAGE, along with any other emerging scientific evidence, and that that advice will be published so that the public can better understand the reasons for the decisions that are being taken?

The First Minister: Yes, we will continue to be driven by scientific and clinical advice. Of course, as I have said previously, Governments require to reach balanced decisions that recognise that the ways in which we tackle Covid have consequences themselves and do harm to people economically, socially and in relation to wellbeing.

We need to reach balanced decisions that minimise the overall harm that Covid is doing to our society, our economy and our everyday lives. In doing so, we will be very much guided by advice from bodies such as SAGE. I have already set out the steps that the Scottish Government took in the light of SAGE's recommendations back in September.

We will continue to seek to co-ordinate and align our actions, as far as possible, with those of other UK nations. I participated in a COBRA meeting with the Prime Minister and other devolved Governments on Monday of this week. We have looked, and are looking, carefully at the UK Government's three-tier system for England. I have said that it would make sense to align the strategic approach as much as possible, although it will be for each Government to take operational decisions. It is important that we get the overall strategic framework right for Scotland.

Of course, earlier in the pandemic, we established the chief medical officer's Covid advisory group, with the specific purpose of ensuring that consistent scientific and technical advice is given to me and to ministers, based on Scottish circumstances. We will always look at how much of the advice that we receive is published, and we hope to expand that in the future. Last week was the first time that we published a paper from our clinical advisers that set out the evidence behind the decisions that we were taking.

We will be guided by clinical and scientific advice and, of course, by the wider factors that we have to take into account. We will seek to share as much of that advice as we can with Parliament and the wider public.

Jamie Greene (West Scotland) (Con): It will be nearly two weeks since businesses were closed before guidance on how to apply for financial support is published fully. Quite frankly, businesses have been passed from pillar to post this past week. They have thrown out stock and sent staff home, but they still have overheads to pay. The reality is that, with every additional day without income or Government support, some businesses that closed their doors might never reopen them.

Knowing that, why was a proper plan not already in place or put in place quickly to get cash to businesses immediately? How quickly will applications be turned around so that the money reaches the bank accounts of those who need it? They need it now, not in two weeks.

**The First Minister:** When applications open, local authorities will work to turn around the applications and get out money as quickly as possible. We waited for details of the chancellor's

package to come out last Friday before finalising our own package.

Before I give a little more detail about the support that is being offered to businesses, I make the point that, unlike with some of the decisions that are being made elsewhere, we are being up front in what we are asking businesses to do—which is, in some circumstances, to close—and offering financial support.

One possible issue with the tier 2 restrictions that were published for England is that hospitality businesses in particular are having significant restrictions put on their ability to trade but are not being legally required to close and so will not get additional financial support. In Scotland, we want to ensure that, where we ask businesses to do something that restricts their ability to trade, we give them financial compensation, where that is possible and within the limits of our resources.

I will set out what the £40 million that we announced last week will be comprised of. First, there will be a restrictions fund, which will provide one-off grants of up to £3,000 to bars, restaurants and other businesses that are required to close by the regulations and which will be based on rateable value.

Secondly, there will be a hardship fund, with grants of up to £1,500 that will help businesses that remain open but are being impacted by restrictions. We also intend to top up the salary contribution in the existing furlough scheme so that we can help workers as well as businesses, which is really important. We are still working with the UK Government to establish how we can most effectively make those payments.

Lastly, a discretionary fund will be made available to help businesses that do not fall into the categories that I have outlined but that nevertheless need help. For example, that could help businesses in the hospitality supply chain.

That is an important package of support from within the Scottish Government's resources, and we think that it is appropriate and necessary. We will work with local authorities to ensure that the support gets to businesses as quickly as possible.

Maureen Watt (Aberdeen South and North Kincardine) (SNP): Last week, I asked the First Minister whether she agrees that we should move to a system of alert, which would be one way of triggering financial support for employees and businesses, and which would provide consistency on the measures that are imposed. Clearly, the Westminster Government has gone ahead with a tiered system, but it has done so without clarifying the financial support or, I suspect, discussing the measure with the other national Governments.

The First Minister mentioned that she had a COBRA meeting earlier this week, but can she provide an update on how the four-nation talks are progressing so that we can get some consistency and allow devolved Governments to take the necessary local measures to meet local circumstances?

The First Minister: I will make two points in response to that. First, we saw the detail of the tiered framework for England on Monday, and it was discussed at the COBRA meeting. I have said previously that we will look carefully at that as we develop our strategic tiered approach, and we will try to have as much alignment with it as possible.

Members of Parliament and members of the public will have heard the chief medical officer for England say on Monday that the third tier of the English system, which is the highest tier, at the base level, probably does not go far enough to get infection down. That is one aspect that we are looking at, to see whether we would modify it in Scotland. We will publish our proposals before Parliament returns from the October break, and Parliament will have the opportunity to scrutinise, debate and decide on them when it returns.

The second aspect is how the tiered approach to intervention fits with financial help. We understand that there is an agreement with the UK Treasury that it will be for devolved Governments to decide their tiered approach and what triggers a move for part or all of a country from one tier to another. It will therefore be the decisions that we take here in Scotland, or the decisions that are taken in Wales and Northern Ireland, that will trigger the financial support. That is positive.

Obviously, as with all Treasury schemes, we want to work through the fine detail, but we think that we have seen positive developments over the past few days, and we will continue to pursue them constructively.

Jackie Baillie (Dumbarton) (Lab): The First Minister rightly references the Covid-19 advisory group, which is the Scottish Government's version of SAGE. There is also a sub-group on public health. I understood that the advisory group would meet weekly, but the most recent minutes that I can find are from 21 September and 12 August. Can the First Minister tell me whether the Scottish expert group is meeting weekly, and say whether she will commit to publishing all the papers that it considers? At the moment, we get only very highlevel minutes. I agree with the First Minister that transparency and the sharing of that expert advice will assist everybody's understanding of the risks and the measures that are needed to tackle the virus.

The First Minister: The chief medical officer's advisory group meets regularly, and it will often

meet in response to requests from the Scottish Government for advice about particular aspects. It publishes its minutes, and we will certainly consider what more information, including papers that inform its discussions, can be published. It is a group that we ask to advise us independently and, therefore, it must be involved in decisions about what it shares about its deliberations.

There is always room for improvement in everything. I have never shied away from that in this context. However, I think that we are, generally speaking, pretty transparent about the decisions that we are making and the reasons for them

I know that Jackie Baillie was one of those who took issue with my daily updates, but the reason why I have continued to give them publicly is to share as much of our thinking with the public as we can on an on-going basis. We will continue to do that. I have already set out the steps that we can take to strengthen parliamentary scrutiny and engagement and, of course, we will inform those discussions with as much scientific opinion and evidence as we can.

One of the caveats that I want to make is that, at an earlier point of this pandemic, all of us—particularly people like me, who were faced with making the decisions—liked to think that science would, effectively, make those decisions for us. What we have learned along the way is that that is not the case.

The science and the evidence can take us only so far. Ultimately, people who are in decision-making positions have to make judgments, apply those judgments and be held accountable for those judgments. We will continue to do that openly but also firmly and decisively, because of the nature of the threat that we are dealing with, which, often, does not wait for Governments to go through traditional decision-making processes.

I am not going to comment on what is happening elsewhere, but I have huge sympathy with leaders in parts of the north of England just now who are trying to come to agreements with central Government about decisions that should be taken. However—and this will apply here, during our deliberations—I am also conscious that, while we deliberate and seek to come to decisions, Covid is spreading, so we need to be able to act quickly, firmly and decisively.

John Mason (Glasgow Shettleston) (SNP): We know that some people will be resistant to self-isolation, but we also know that other people who want to self-isolate will struggle financially. Can the First Minister say a little bit more about the £500 grant that is available? How do people get it, and who gets it?

The First Minister: The importance of self-isolation cannot be stressed enough. It is one of the key ways—possibly the key way—of stopping transmission of the virus. A person who has symptoms and tests positive should self-isolate in order to try to avoid passing the virus to others. If the people with whom that person has been in contact also self-isolate, they too can avoid passing on the virus. Self-isolation is a tough thing to ask people to do, but it is essential.

The new £500 payment, which came in this week, will be available to people on low incomes who will lose wages because of self-isolation. It will be tied to benefits—principally, to universal credit. People will have to have been advised to self-isolate through the test and protect system, and will be required to be off work, so we encourage employers to allow people who are self-isolating but are not ill with Covid to work from home and to continue to be paid, as far as that is possible. The details of all of that have been set out, and the payment will be administered by local authorities through the Scottish welfare fund, which is a tried and tested way of getting money quickly to those who need it most.

This week, we confirmed that there will be a new proactive service that will also be administered by local authorities, and will be delivered initially to people who are on low incomes, people who are in the shielding group and people whom we know to be vulnerable. A person who is advised to self-isolate will get a proactive call that will take the form of a 30-minute triage to establish whether they need support with food or medicine deliveries, and will then get another two shorter phone calls during their period of self-isolation to ensure that they are okay. That service will be rolled out to other groups over the coming period.

The national assistance helpline is also available to anyone who needs it. I take this opportunity to give out its number—0800 111 4000—in case anyone who is watching needs help. People who cannot access help anywhere else can call that helpline, through which practical help and advice are available.

Rachael Hamilton (Ettrick, Roxburgh and Berwickshire) (Con): We know that wellbeing is important. In her statement, the First Minister people signposted who are experiencing loneliness, isolation and anxiety to the NHS Inform website. An end to the pandemic is not in sight and winter is fast approaching, but not everyone has access to the internet. Furthermore, many essential face-to-face services have not resumed. What more is the First Minister's Government doing to help people who are excluded from digital participation, including the elderly and the

vulnerable, single parents, and people who live on their own?

The First Minister: That is an important question. I have just read out a phone number, because I know that not everybody has access to the internet. I will again give the number of the national assistance helpline: it is 0800 111 4000. If people need help, that helpline will signpost them to where that help is.

Over the course of the pandemic, we have funded a number of organisations to enable them to expand their helplines. We did that for Age Scotland, for example, early on in the pandemic. There are a number of other ways in which we are supporting organisations that deliver mental health support, and organisations that deliver support for victims of domestic abuse. Information on help is available, and we will take whatever steps we can to ensure that everybody has access to it digitally or through being able to phone a helpline and be signposted to the help that is needed.

Rona Mackay (Strathkelvin and Bearsden) (SNP): Care home residents and their close families and friends will have been delighted to hear of the extension to visiting times and of the increased personal interaction that allows them to hug and to hold the hands of their loved ones again. How will those changes be monitored and reviewed to ensure that we keep care home residents safe and support their mental health and wellbeing?

**The First Minister:** I thank Rona Mackay for raising a really important issue.

People who regularly tune into First Minister's question time or my daily updates will have heard me describe the difficult balance that we are trying to strike in relation to visits to care homes. We absolutely must do everything possible to keep people in care homes safe. We know from our experience earlier in the year about the impact that the virus can have on people in care homes, but we also know how distressing it is for residents of care homes and their loved ones when they cannot have normal contact, visiting and interaction. It is not an easy balance to strike, but we are trying hard to get it right.

The new guidance that is in place is just that—guidance. Care home providers that think that they are not ready to offer that level of interaction are not being forced to do so, and there are lots of protections in the guidance to ensure that inappropriate risks are not taken. The guidance recommends that restrictions be eased only when certain conditions are met. The care home must have been Covid-free for 28 days, it must be actively participating in the weekly care-home testing programme, and its risk assessments must be approved by the local director of public health.

Where there is physical contact, appropriate personal protective equipment must be worn, and physical distancing is still recommended in all circumstances, apart from in cases in which there are other protections and touching and closeness are beneficial.

The protections are stringent, and we will keep all the guidance under review as we try as best we can to strike that difficult balance.

Monica Lennon (Central Scotland) (Lab): South Lanarkshire is currently the council area with the highest positive test rate. The Hamilton area accounts for almost half of Covid-19 cases, and there are other notable hotspots in the area, including Larkhall. What is the Scottish Government's understanding of the factors that are at play in Hamilton, Larkhall and the South Lanarkshire Council area? Are there any plans to extend the school holidays in South Lanarkshire or those elsewhere? It is very welcome that Hamilton is getting a mobile testing unit. What other resources will be made available to NHS Lanarkshire and South Lanarkshire Council in the days and weeks ahead?

The First Minister: We will set out in detail the resources that we are seeking to make available to councils and health boards. Many of them have already been set out. Provision of local access to testing through mobile testing units and, increasingly, through the new walk-in centres that are being established are important. We are also trialling innovative point-of-care testing technology that will allow much greater ease of access.

We know that certain areas have particularly high levels of infection, which is guiding the decisions that we are taking. I would say that the information that Monica Lennon has asked for in her question is available through the new Public Health Scotland resource. Anyone can go to the Public Health Scotland website and see the current infection level in their neighbourhood. "Neighbourhood" is defined as an area of the country with 4,000 people in it, which means that the information is extremely localised. Our incident management teams, which consider situations locally and nationally, will use the data to guide the decisions that we make.

Much of what we are doing at the moment is being done with the aim of keeping schools open. It is very important for the wellbeing and education of young people that we do so. That is one of the reasons why we took, at a relatively early stage, the decisions to impose household and hospitality restrictions. We cannot rule anything out in the face of what we are dealing with, but a key objective is not to have schools closed beyond the normal holiday periods. That is why we are asking other people to sacrifice going to the pub for a pint, going out for a meal or coming together in

each other's houses. We hope that those sacrifices, which are necessary to get the virus under control, will enable children to continue to go to school as normal. We keep all that under review, guided by the data and the evidence, on an on-going basis.

Joan McAlpine (South Scotland) (SNP): Will the First Minister encourage Sky Sports to make the old firm match free to watch this weekend, to remove any motivation for people to gather in each other's houses to watch it? Further, can she confirm that her important advice that football fans should not travel from Scotland to Blackpool to watch the game in a pub this weekend also applies to anyone planning to travel from Dumfries and Galloway to Carlisle to do so?

The First Minister: I strongly endorse all of that. Yesterday, I said that people should avoid travelling to Blackpool if they can avoid doing so. That is not because I have it in for Blackpool--I think that Blackpool is a great place. I know that many people in Scotland love going to Blackpool at this time of year and that many of us have happy childhood memories of trips to Blackpool, and we look forward to getting back to normal. However, we know through test and protect that a significant number of people who have travelled to Blackpool have gone on to test positive with Covid. We cannot be certain that that is where they got it, but it is an increasing theme that is emerging in the test and protect interviews, so people should not travel to Blackpool just now if they do not have to.

That applies particularly to old firm supporters this weekend. We have heard some suggestions that some people have been planning to travel to Blackpool to watch the match in pubs. I ask them to please not do that. I know how important football is to many people across the country, and everyone understands that old firm matches are big occasions. However, I ask people to please watch the game at home and not to travel elsewhere to watch it with other people, either in pubs outside their own area or in other people's homes, because, by doing that, they are putting themselves and other people at risk. That certainly applies to football supporters from Dumfries and Galloway and anywhere else in Scotland who are thinking of going to parts of England such as Carlisle. It is a really bad idea to do that, and I ask people not to do it and, instead, to stay at home and watch the football.

That is why I strongly agree with the point that Joan McAlpine made, and I encourage Sky Sports to make the Rangers v Celtic match free to view. That is a small but important contribution that it could make to help to keep people safe right now, as it would enable them to watch the match in the comfort and safety of their own home and would

make it less likely that someone who does not have access to the pay-to-view services will be tempted to go somewhere else to watch the match. If anyone from Sky Sports is listening, I encourage them to think about making the match free to view this weekend.

Oliver Mundell (Dumfriesshire) (Con): I note the First Minister's comments about avoiding highrisk areas elsewhere in the UK, but will she guarantee today that, whatever public health decisions her Government makes, my constituents who live and work on both sides of the border will continue to be able to travel to England and back in situations in which such travel would be permitted if it were undertaken solely within Scotland? Does she agree that attempting to close internal borders in the United Kingdom causes significant concern and anxiety for many?

The First Minister: A global pandemic causes significant anxiety and concern for many, and I think that the vast majority of people look to their Governments to take whatever action they deem is necessary to keep people safe from an infectious virus and to stop people dying.

debates and decisions are constitutional or political ones and I strongly encourage everybody not to see them in that way. The First Minister of Wales is not a known nationalist—he does not support independence for Wales—but he understands the public health importance of making sure that people from high prevalence areas in other parts of the UK do not travel into Wales, and vice versa. I understand that in a Scottish context, and I hope that that is understood across the country. Last night, I wrote to the Prime Minister to request four nations discussions so that we can come to a agreement on commonsense how, necessary, we restrict travel to keep people safe. Countries the world over are taking such measures at the moment, and nobody there—to the best of my knowledge—is making political or constitutional points about them, because they recognise the public health imperative.

In any travel advice that we give, we always exempt essential travel, which would include travel on the part of people who have to go to work. We are encouraging people to work from home, where possible. That applies to Mr Mundell's constituents as much as it applies to people across the country. However, where people have to travel to work, that is an exemption from any travel advice that we give. That would be the case for the advice that we give on cross-border travel, just as it is the case for our advice to people who want to travel from Glasgow to Edinburgh or anywhere within Scotland.

For goodness' sake, let us be sensible and grown up about such discussions. In the future,

when we have come out of the pandemic, there will, I hope, be plenty of time to get back to the traditional debates that we all enjoy having but, for now, let us all keep focused on the public health imperative of keeping people safe from the virus.

Alex Neil (Airdrie and Shotts) (SNP): When does the First Minister expect to be in a position to evaluate the impact of the additional 16-day restrictions that have been imposed during the current Covid reset? Will the scientists be able to identify the particular impact that the temporary hospitality measures will have had on the R figure?

The First Minister: We assess the impact of all the measures that we have taken on an ongoing—literally, a daily—basis. We look at growth rates in the virus, the number of cases per 100,000 and the direction of travel in those. We do that nationally and in every part of the country. In addition, we and our clinical advisers assess the impact of measures on a more medium-term—in the context of coronavirus-basis. We know that there is a lag effect between implementing measures and seeing their impact because of the incubation period of the virus and the time that it takes somebody who gets infected to display symptoms and, if they are to become ill, to become ill, to be admitted to hospital andunfortunately, as happens in some cases—to die from it.

By 26 October, we might not know about all of the impact of the temporary restrictions that are in place, but I hope that we will be able to get an initial assessment from our advisers of the effect that they are having. That assessment will guide the decisions that we take about what replaces the temporary restrictions and what parts of the country we propose would go into what tier of the new tiered strategic approach that I spoke about earlier

Neil Bibby (West Scotland) (Lab): Scotland's pubs are being hit hard by the restrictions, but many of them were getting an unfair deal before Covid. Today, Heineken was rightly fined £2 million for serious breaches of the statutory pubs code in England and Wales, yet there is no statutory regulation of the pub code here in Scotland.

To provide fairness for Scotland's publicans, to help the sector to recover from the current restrictions and to build back better from the crisis, will the Scotlish Government support my Tied Pubs (Scotland) Bill next month? My bill has the backing of Scotlish small businesses, trade unions and consumers. Only the discredited multinational pub companies stand in the way. Does the First Minister agree that Scotland's publicans need a fair deal now more than ever?

The First Minister: I agree that publicans need a fair deal. We will certainly consider the terms of the bill and make decisions on the basis of that assessment. We look at all proposals with a sympathetic eye.

More generally, the guidance that is in place for the hospitality sector has a statutory underpinning in Scotland but, as we move to the new strategic approach that I have spoken about, we are looking across different sectors, including hospitality, at the ways in which it might be necessary to tighten up restrictions and the enforcement regime that goes with them. As I said last week, we have already asked the retail sector to return to 2m physical distancing and many of the other measures that were in place earlier in the pandemic. We will look at that in the context of hospitality as well, and that will include pubs.

Christine Grahame (Midlothian South, Tweeddale and Lauderdale) (SNP): The First Minister referred to the Welsh rules on travel restrictions from English Covid hot spots. I already have constituents in Melrose and Innerleithen, for example, who are concerned by the influx of tourists from England, because they do not know from which area of England those people are coming. How close is the Scottish Government to replicating the Welsh Government's travel restrictions and bans? Given that people regularly cross the border for essential work, how could that approach be policed?

The First Minister: We are looking carefully at the Welsh approach. As of yesterday, when Wales announced that it would introduce regulations on cross-border travel, those regulations were still being finalised. We will look at them when we can do so.

I do not want to minimise the issues. We have given guidance to people—I have given it again today, and I have tried to be clear about what we are asking people to do and, more importantly, not to do. On travel, there is an argument that we should make the approach more regulated and give it a legal underpinning. We have to keep that under consideration for travel within Scotland, for travel to Scotland from other parts of the UK, and for travel from Scotland to other parts of the UK. We are considering that at the moment.

A more regulated approach would throw up practical challenges around enforcement, although there are challenges with guidance in that regard. The police cannot stop everybody coming into or leaving Scotland, and some people would have legitimate reasons to travel. We therefore have to think through the practical considerations. However, at a time when we are all trying to suppress the virus and when we know that importation of the virus from outside the UK and from one part of the UK to another is a risk, it

would be remiss of us not to consider seriously how we can strengthen our ability to restrict travel from high to low prevalence areas.

I want to be clear and open with Parliament that such an approach is under active consideration. If we decide to do that, we will set out the approach fully and, at that time, we will set out the issues of enforcement and how we intend to address them.

Maurice Golden (West Scotland) (Con): Scottish Care has raised concerns over the poorly managed flu vaccination programme. The First Minister has said that vaccinations are an "absolute priority". Can she ensure that the most vulnerable, many of whom have been let down by the response to the coronavirus crisis, will not fall victim to winter flu?

The First Minister: The flu vaccination programme is crucial and critical. That is true every year, but particularly this year, given that we know about the risks of concurrent infection with flu and Covid and that, if we have many people with flu at the same time as we are dealing with Covid, that will put additional pressure on the NHS.

The flu vaccination programme is crucial. It is being delivered differently this year, because of Covid, which presents challenges to the usual way of people getting the flu vaccine. The programme is going well, although there have been challenges, one of which I will come on to in a second. Health boards estimate that, by the end of this week, more than 600,000 people will already have been vaccinated, which is around 25 per cent of the total number who will receive the vaccine.

Issues have been raised in the past day or two about the lack of prioritisation among those who are eligible, and particularly about some older people not being prioritised for the vaccine early in the vaccination schedule. The issues are particularly about NHS Greater Glasgow and Clyde, although other health boards might be affected because they use the same system.

Scottish Government officials were in very close contact with NHS Greater Glasgow and Clyde about the situation yesterday, and they have talked to the board about the steps that it will take to ensure that older people in the most vulnerable categories are prioritised for appointments. That is important.

The overall vaccination programme is progressing and will continue to progress over the weeks to come.

James Dornan (Glasgow Cathcart) (SNP): The Jenniburn Centre in Castlemilk, in my constituency, has sensibly and understandably been closed since March. Given that it is a free-

flowing and multifunctional community facility, its trustees believe that it is still not safe for the centre to reopen and return to use.

The UK Government's furlough scheme replacement—the job support scheme—will support only businesses whose premises have been legally required to close due to local coronavirus restrictions, which does not apply to the Jenniburn Centre. How can the Scottish Government support such businesses and charities? Will the First Minister continue to urge the UK Government to extend the existing furlough scheme in order to help charities such as the Jenniburn Centre to get through the pandemic?

The First Minister: I pay tribute to the Jenniburn Centre, in James Dornan's constituency, and other such organisations across the country that have found themselves severely impacted by the pandemic. Since the start of the pandemic, the Scottish Government has provided substantial funding to charitable organisations to support them through this period. That is in addition to the £2.3 billion of support that has gone to businesses.

James Dornan has outlined, in relation to the Jenniburn Centre, an example of the shortcomings of the job support scheme. Although the support that is incorporated in that scheme is welcome as far as it goes, it does not go far enough. The scheme does not provide a sufficient level of support, and it does not necessarily provide support to organisations that are not required to close but which voluntarily restrict their operations to keep people safe.

I give an assurance that we will continue constructively, I hope, to discuss with the UK Government how the scheme can be improved to ensure that we have a level of financial support for businesses and organisations that is commensurate with the steps that we are asking those organisations and businesses to take in order to keep people safe.

The Presiding Officer: I call Lewis Macdonald.

Lewis Macdonald (North East Scotland) (Lab): [Inaudible.]

The Presiding Officer: I am sorry, Mr Macdonald, but your microphone is not working. Can you start again and we will see whether we can get your microphone working?

Lewis Macdonald: [Inaudible.]

The Presiding Officer: I am not quite sure what the problem is. We will move on to Edward Mountain and come back to Lewis Macdonald in a second.

Edward Mountain (Highlands and Islands) (Con): I do not know whether you can see me,

Presiding Officer, because my video appears to be off.

The Presiding Officer: We can hear you.

**Edward Mountain:** Thank you, Presiding Officer.

I have received no response to the urgent emails that I sent to the First Minister on 29 September and earlier this month on the subject that I will now raise. I was contacted by a constituent who is currently at home with terminal cancer. Amanda is on her short final journey and, naturally, wishes to see her family, including her grandchildren. She is not up to going to the local cafe or hotel. Furthermore, the weather and her health mean that outside visits are not suitable. She does not want to ask her family to break the law, but her family are in a difficult situation—and I would suggest that many others are, too.

Does the First Minister agree that we should do everything that we can to allow people such as Amanda to see their children and other members of their families? Will she do everything in her power to review the situation and allow such visits to happen without people breaking the law?

The First Minister: Yes, I agree. I am sorry that Edward Mountain has not had a response to an email that was sent on 29 September. I am sure that he will appreciate that lots of emails come in, but I will ensure that that one is identified this afternoon and that a response is provided. If for some reason we have not received the email, I will ensure that my office gets in touch with Edward Mountain's.

I take this opportunity to send my best wishes and thoughts to Amanda at an unimaginably difficult time for her and her family. Of course, we want to do everything possible to allow families to be together in the final stages of a loved one's life. We strive to make that possible in as easy—if that is not an inappropriate word in the circumstances—a way as possible.

Obviously, I do not know the precise circumstances of Amanda's situation, but I will ensure that that email is looked at today and that we get a response as quickly as possible to ensure that Amanda can—as I hope that she will be able to—see the loved ones who she understandably wants to see.

**The Presiding Officer:** We will try Lewis Macdonald again.

Lewis Macdonald: [Inaudible.]

The Presiding Officer: Mr Macdonald, you will have to turn on your microphone. I think that the issue is that you control it. Please try to put it on yourself.

We are still having difficulties. I am sorry, Mr Macdonald. We will go to Johann Lamont and then we will try again one more time.

Johann Lamont (Glasgow) (Lab): The First Minister will be aware that many services that were available before Covid were withdrawn during the early stages of the crisis. Such services include care for older people and disabled people in their own homes. [Inaudible.]

The Presiding Officer: Oh dear. First Minister, we seem to be beset with problems at the end of this session. I will try one more time with Lewis Macdonald and, if we cannot reach him, we will try Neil Findlay, who also wants to ask a question.

**Lewis Macdonald:** [Inaudible.]

The Presiding Officer: It is not working. Sorry, Mr Macdonald—we will have to abandon that.

Neil Findlay (Lothian) (Lab): Staff who support older people in care homes are regularly and routinely tested, but staff who support older people in their homes or in hospital are not tested in that way. The First Minister said earlier that science only takes us so far before political decisions need to be made. Will the First Minister now make the political decision to routinely test all health and social care staff?

The First Minister: That is one of the proposals that we are actively considering in the review of the testing strategy, which I spoke about. I referred to regular visitors to care homes in that regard; care-at-home staff are another such group. I hope that Neil Findlay will take from that an indication of the direction in which we are going.

As I said, we will set out the outcome of the review of the testing strategy when we return to Parliament, so that members can scrutinise it properly. Suffice to say that I agree with the sentiment behind Neil Findlay's question.

Presiding Officer, if it is not possible to make contact with Lewis Macdonald and Johann Lamont and they want to email their questions to my office later today, I will endeavour to get answers to them.

The Presiding Officer: Thank you, First Minister. I am sure that they will take you up on that.

Pauline McNeill (Glasgow) (Lab): The First Minister said earlier that there was a discretionary fund for businesses. As she will know, many businesses in the hospitality sector are struggling, particularly given the short notice that was given of this week's lockdown. Some businesses are saying that, although they might not be legally required to close, because other businesses around them are closed, they might be able to

retain and protect jobs better if they had the discretion to close, too.

Will the First Minister provide a bit more detail about the discretionary fund? Would she consider some flexibility for those businesses that are not required to close and allow them to benefit from the discretionary fund if no one is attending their business?

The First Minister: We will set out more details of the discretionary fund as soon as possible. There is another part of the support package—a hardship fund, which I mentioned earlier—that will support businesses that remain open but whose business is directly affected by the restrictions. I obviously do not know the details of the businesses that Pauline McNeill is referring to, but they might fall into that category. The fund provides grant support of up to £1,500 per business, which is in addition to the discretionary fund.

The Presiding Officer: I apologise to Johann Lamont and Lewis Macdonald. The First Minister has offered to get a response as soon as possible to any written questions that they can put to her.

I thank all colleagues for their contributions. That ends the First Minister's statement. Parliament will resume with a hybrid session on Tuesday 27 October.

Meeting closed at 13:39.

This is the final edition of the Official Re	<i>port</i> for this meeting. It is part of th and has been sent for legal dep	e Scottish Parliament <i>Official Report</i> archive posit.		
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