

Public Audit Committee

Thursday 28 October 2021



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CONTENTS

	COI.
DECISION ON TAKING BUSINESS IN PRIVATE	1
"COMMUNITY JUSTICE: SUSTAINABLE ALTERNATIVES TO CUSTODY"	2
"COVID-19 VACCINATION PROGRAMME"	25

PUBLIC AUDIT COMMITTEE

7th Meeting 2021, Session 6

CONVENER

*Richard Leonard (Central Scotland) (Lab)

DEPUTY CONVENER

*Sharon Dowey (South Scotland) (Con)

COMMITTEE MEMBERS

*Colin Beattie (Midlothian North and Musselburgh) (SNP) *Willie Coffey (Kilmarnock and Irvine Valley) (SNP)

*Craig Hoy (South Scotland) (Con)

THE FOLLOWING ALSO PARTICIPATED:

Stephen Boyle (Auditor General for Scotland) Catriona Dalrymple (Scottish Government) Joe Griffin (Scottish Government) Leigh Johnston (Audit Scotland) Neil Rennick (Scottish Government) Eva Thomas-Tudo (Audit Scotland)

CLERK TO THE COMMITTEE

Lynn Russell

LOCATION

The James Clerk Maxwell Room (CR4)

^{*}attended

Scottish Parliament

Public Audit Committee

Thursday 28 October 2021

[The Convener opened the meeting at 09:00]

Decision on Taking Business in Private

The Convener (Richard Leonard): Good morning. I welcome everybody to the seventh meeting in this parliamentary session of the Public Audit Committee. I remind members and guests that the Parliament's rules on social distancing should be observed, and it would be greatly appreciated if you could wear a face covering when moving around, entering or leaving the room.

The first item on our agenda is to invite members to decide whether to take items 4 and 5 in private. Is that agreed?

Members indicated agreement.

"Community justice: Sustainable alternatives to custody"

09:00

The Convener: The second item on our agenda, and the main purpose of the first half of our meeting, is to discuss the Audit Scotland briefing, "Community justice: Sustainable alternatives to custody". We have with us three witnesses from the Scottish Government. I am delighted to welcome to the committee Joe Griffin, who is the director general of education and justice; Neil Rennick, who is the director of justice; and Catriona Dalrymple, who is the deputy director of community justice and parole.

We have a number of questions to ask, but perhaps Mr Griffin would like to begin by making an opening statement.

Joe Griffin (Scottish Government): Thank you very much, convener.

I thank the Public Audit Committee for inviting me to give evidence, alongside Neil Rennick and Cat Dalrymple. Following the Auditor General's evidence to the committee on 30 September, I welcome the opportunity to discuss Audit Scotland's recent paper, "Community justice: Sustainable alternatives to custody".

At a time when the Scottish Government is increasing its focus on community justice, Audit Scotland's briefing and its planned work for 2022 will be enormously helpful in informing our approach to that vital area. The various points that are raised in the briefing are relevant to not only community sentencing—the main focus of the paper—but wider community interventions such as diversion from prosecution and alternatives to remand.

Overall, we agree with Audit Scotland that there are some challenging issues to address in community justice, as well as opportunities to improve outcomes. However, I stress at the outset that it is important to see community justice in the wider context of the changing nature of crime over the past decade, when there has been a downward trend in overall levels of crime but an increase in the number of prosecutions for certain crime types, especially sexual offending. It is a complex picture.

I thank all those who are involved in delivering community justice services—justice social workers, community justice partners, third sector organisations and a range of others—for their work during the pandemic in maintaining critical services in incredibly challenging circumstances, supporting individuals on orders and keeping our communities safe. The on-going impact of Covid

on the sector and the wider justice system will be a key consideration in our next steps.

Again, I thank the committee for its invitation. I look forward to your questions.

The Convener: Thank you, Mr Griffin. As I said, we have a range of questions that we want to ask and ground that we want to cover.

I will begin by reflecting on the briefing, which put in fairly sharp relief the picture as Audit Scotland saw it. When we received evidence from the Auditor General, he said that there was

"a fairly static level of progress",—[Official Report, Public Audit Committee, 30 September 2021; c 37.]

which was an interesting—and perhaps a polite—way of describing what could best be described as a zig-zag in the outcomes of custodial versus non-custodial sentences.

It is important to emphasise that the findings of Audit Scotland were that, if people with sentences of one year or less were put in custody, there was a 49 per cent chance of reconviction within the next year, whereas if they went into the community justice system, there was a 30 per cent probability of reconviction.

We also know that there is an enormous cost to the public of people serving time in prison. Audit Scotland came to the figure of a cost of more than £37,000 a year for somebody to be kept in jail, compared with a cost of around £1,894 a year for an equivalent community sentence. That is a massive discrepancy and, as the Public Audit Committee, we are interested in such figures.

Do you accept those findings and all the other findings in the report?

Joe Griffin: We accept the recommendations that were made to the Government, and everything that Audit Scotland said is factually correct. However, it is important to look at the overall context when comparing custodial and community sentences. In that context, we can say that more progress has perhaps been made than is implied by the way in which the debate is sometimes framed.

I will state three key facts. First, the overall number of disposals has fallen by 40,000 in the past 10 years. Secondly, the number of individuals sentenced to prison in the past decade has fallen by 4,000, which is some 18 per cent. Thirdly, the number of short-term sentences of 12 months or less has fallen by 4,500 in 10 years, which is around a third. There is less activity in the justice system, and there are fewer sentences and fewer individuals going to prison.

However, the people who go to prison are going for longer, and it is the growth of longer-term sentences that is keeping the prison population high and keeping the share of custody—as opposed to community justice—sentences at the level that Audit Scotland has correctly identified. There are various reasons for that, which we can explore if the committee is interested. They relate to there being more confidence in reporting, changes in legislation and the success of the approaches that are being taken in youth offending, for example. The basic fact is that there are fewer people going to prison, but they are going there for longer.

In that context, community justice is making steady progress and, overall, the number of community sentences has increased; it increased by 7 per cent over the course of the past year. The community justice percentage share of all disposals is 22 per cent, which is an 8 percentage point increase in 10 years.

We have ambitions to do even better than that, for all the reasons that the convener has just outlined and that the Auditor General outlined in his briefing. The discrepancies in outcome and cost make us ambitious. People are still receiving short-term sentences—in 2019-2020, 1,400 people received a custodial sentence when the main charge was shoplifting—so there is more that we need to do. We need to ensure that there is capacity and reliability so that the judiciary feel confident to avail themselves of community sentences in appropriate circumstances. However, the progress in the growth of community justice has been steady and reasonable.

The Convener: Thank you, Mr Griffin. Feel free to bring in the other witnesses alongside you, if you think that they could helpfully illuminate some of those points further.

You spoke of totals. I am not in a position to dispute the figures that you presented to us, which we will look at in a bit more detail, but there is an emphasis in the Audit Scotland briefing on the proportions. It is a stated aim of public policy to change the balance between custodial and noncustodial sentences. However, over the past three years, the proportion of non-custodial sentences went from 59 per cent to 56 per cent, then back up to 59 per cent. That does not show a clear line of progress to the public or members of this committee; rather, it looks as though there has been one step forward, one step back, then one step forward again. Will you reflect on the proportions as well as the totals?

Joe Griffin: I am very happy to do so. The proportions that Audit Scotland demonstrates in its briefing are of custody and community sentences only, yet there is a much wider range of disposals, including fines and admonishments. The issue with comparing only custodial and community sentences is that custodial includes the short-term sentences that, increasingly, we want to displace

with community sentences. It also includes longer-term sentences, the number of which have been growing steadily over the course of the past decade. That stubborn percentage in the high-50s for the proportion of custodial sentences and our still high—compared with the rest of Europe—prison population are now being driven by longer-term sentences for fewer people.

In other words, the situation has changed. I submit that community justice has achieved a lot of its objectives over the course of that period, but the context has shifted pretty significantly—the rise in the prison population is now more driven by fewer people going in for longer sentences.

The Convener: So, you dispute the conclusion that there is

"a fairly static level of progress"—[Official Report, Public Audit Committee, 30 September 2021; c 37.]

or no progress at all. In your eyes, we are making progress in shifting the balance from custodial to non-custodial sentencing. Is that right?

Joe Griffin: I think that Audit Scotland was absolutely accurate when it said that the prison population is still high and that the proportion of prison sentences in the overall mix remains stubbornly high. However, that is being driven by fewer people going to prison for longer, not by a stubbornly high rate of short-term prison sentences. Such sentences still exist—I gave the example of shoplifting—but community justice and community sentencing have grown, and we have seen a shift to a longer-term picture. The slight disadvantage of only making a direct comparison between custody and community is that custody includes the short-term and the longer-term sentences.

The Convener: I want to move on. I will bring in other committee members shortly, but one thing that stood out in the briefing, which other members will address, is the quite significant geographical variations in community sentencing—for example, by local authority areas. What is your understanding of the reasons for such wide and marked variations, depending on where someone is in Scotland?

Joe Griffin: The Audit Scotland briefing focuses on community payback orders, and there is a table in it that shows those wide discrepancies. Again, it does not provide the whole picture, because other community disposals and other alternatives to prosecution are also in the mix. The areas that appear in the table as having relatively low rates of community payback orders have, for example, relatively high rates of fines. Therefore, it is not a complete overall picture that is provided.

However, the issue of regional discrepancy has troubled us for a while. It is a feature of the

system. To some extent, it is inevitable, because there are different demographics and different population mixes, and every individual decision is made by the judiciary based on the circumstances in front of them at the time.

A lot of it comes back to the importance of partnership working, because community justice is the product of different organisations working together. There are eight statutory partners, and more that sit around the table. A lot of variability is built in, in terms of local resource, local priorities, local performance and the quality of the partnership working—that is, the degree to which people buy into the process. That is partly at the heart of the issue: because community justice is holistic and cross-cutting, whatever system you have for it requires partnership working, and it can sometimes be harder to hold partnerships to account than individual organisations. The issue lies in that mix.

We have some plans, which I can talk about, for how we want to improve that regional variability in due course. The situation needs to get better, but if we are to get the whole picture, we need to see the other forms of disposal in the mix as well.

The Convener: Thank you. Mr Beattie will ask questions about the governance structure later on.

I turn to sentencing, on which I invite Willie Coffey to ask his questions. An interesting report has been published today by the Scottish Sentencing Council that goes to the heart of some of the committee's questions and areas of concern.

Willie Coffey (Kilmarnock and Irvine Valley) (SNP): Good morning. I want to start the discussion about the judiciary's response to the whole situation by asking whether you think that they are keeping pace with the changes that are occurring. From the data that we have, it seems that someone who has previously had a custodial sentence is twice as likely to be reconvicted as someone who has had a community disposal. That is not reflected in the numbers and percentages of community disposals that we are seeing. Therefore, the question that we are interested in is whether the judiciary are keeping pace with the changes.

In this morning's press release from the Scottish Sentencing Council, Lady Dorrian cites a number of key themes, including greater consistency and resource constraints. She also talks about legislative barriers and, importantly, the public's perception, which is that there is a problem with confidence in community disposals. What do you think that the potential barriers might be to the judiciary catching up with the process?

09:15

Joe Griffin: We welcome the Sentencing Council's report. It is incredibly useful to have an insight from the judiciary on how they view community justice and on what some of the obstacles may be.

The council reported on the purpose of sentencing in 2018, when it set out five essential purposes: protection, punishment, rehabilitation, the opportunity to make amends and an expression of disapproval of the act. It is through that lens that the judiciary look at community justice.

The Sentencing Council's latest report demonstrates that the judiciary understand the benefits of community justice. I get the sense that there is a shared ambition to see more of it, for the reasons that you set out. The council also makes a helpful contribution by pointing out some of the things that might plant a seed of doubt in a sheriff's mind when they are examining a situation and deciding whether a community disposal is the best course of action. Much of that analysis is quite well aligned with the Audit Scotland briefing and with what Community Justice Scotland says in its annual report to Government.

It feels as though we are on the case with some of the issues. A review of the community justice strategy is under way. Work needs to be done on the outcomes framework and the data, which is not where it needs to be. I am sure that we will come back to that. A number of the other issues that the council points out reflect the holistic nature of the system. Dealing with offending behaviour means looking at homelessness, drugs, alcohol, employability and so on. It is important to have a quality partnership to bring forward disposals that face different ways and give confidence to the judiciary.

Overall, we see the Sentencing Council's report as being a helpful contribution. The growth in the use of community sentences and the fact that the Sentencing Council has taken the time to inform the debate in that way suggest that the judiciary have a shared interest in the continued growth of community justice.

Willie Coffey: From our perspective, or from the public's perspective, although there is evidence that people who are given short sentences are twice as likely to be reconvicted, that does not seem to be reflected in the number of community disposals that are being given. Is there an imbalance that should be explored further with the judiciary?

Joe Griffin: Yes. For the reasons that the convener pointed out, we are ambitious. There is a better track record on outcomes, relative costs and efficiency. That is one reason why the

Government recently extended the presumption against short sentences, which was set at three months a few years ago but is now at 12 months. We have not yet been able to measure the impact of that, because of the Covid pandemic, but we have seen a real decline in the number of short-term sentences. They are still used, which may reflect a lack of confidence among some of the judiciary that a community sentence is the best disposal for the person in front of them.

The question is about the judiciary keeping pace: I do not have a sense that they are in denial. The briefing gives a sense that the judiciary recognise the advantages and want a system that they can rely on so that they can confidently pass community sentences where that is appropriate. It is our job, together with our partners in the sector, to ensure that, everywhere in Scotland, the judiciary can have confidence in the capacity for and quality of community disposals.

Willie Coffey: Lady Dorrian has referred to legislative barriers to the imposition of community-based sentences. The legislation is there. Where are the barriers?

Joe Griffin: I might ask Neil Rennick to answer that. My interpretation is that that is about the legislation dealing with auxiliary areas such as alcohol and drugs. A sheriff will want to take into account the different statutory frameworks that pertain to those areas, which can get quite complex when set alongside the community justice framework. Neil, is that your understanding?

Neil Rennick (Scottish Government): That is a good reflection. As the director general says, the briefing is hugely helpful, because it makes specific suggestions about reforms that we can look at, particularly in areas such as dealing with people who have mental health issues or a background of drug use. It could provide some flexibility in how community payback orders operate to provide a mix of interventions that is better suited to each individual's needs. That is helpful and is something that we will definitely look at.

Willie Coffey: Are those barriers preventing us from imposing community-based sentences and forcing us to have custodial sentences?

Neil Rennick: I have had the chance to look at the SSC report only briefly—we will look at it in a lot more detail—but my reading of it is that the issue is the mix of the choices that are available under the legislation in designing a package for each individual, along with access to services, particularly mental health and drugs services. We need to look at the options that are available and ensure that they are available in each community. We will definitely pick up on that.

The Convener: Craig Hoy has questions to probe into that area a bit more.

Craig Hoy (South Scotland) (Con): The Scottish Sentencing Council's report says that the council is of the view that

"there is a lack of public awareness of, and confidence in, community disposals."

I want to dig a little deeper into that, as it suggests that more work needs to be done to raise and enhance public understanding of community justice.

The report also refers to an Ipsos MORI survey that was done a few years ago which looked at various scenarios and tested public opinion and confidence in relation to custodial sentences versus community sentences. One issue is whether greater awareness will ultimately lead to greater confidence in community justice. A scenario that was put to those who were polled concerned an individual who was found to have indecent images of a child on their laptop. People were asked whether that individual should get a custodial sentence, and 77 per cent were of the view that that should carry a custodial sentence. However, that would most likely attract a community payback order, because there were no images of abuse of the child.

Who should be in the driving seat: the Government, the public or the judiciary? I do not have confidence that greater awareness will lead to greater confidence in the system. What is the Government's current thinking on that?

Joe Griffin: Neil Rennick or Cat Dalrymple should feel free to supplement my comments.

Far be it from me to question the judiciary's interpretation. I think that there is still work to be done in increasing the visibility of community justice. To be honest, that is not a great term, but I am not sure that we have yet found a better way of describing the group of issues concerned, which relate to sentences, community payback orders and other matters, the preventative work that we need to reduce crime in the first place, and the rehabilitation of offenders and people coming out of prison. Those issues are the responsibility of the community justice system, and we have yet to find a way of describing that group of issues that is as readily understood as prison is. Prison is a wellestablished concept in the public mind. There is, of course, something in what the judiciary says in its report.

The Scottish Government has some responsibility. The public debate involving the Administration in different guises has looked at the balance of prison and custody for a considerable period of time. That goes back to the Scottish Prisons Commission and Henry McLeish's report

in 2008. There has been a consistent political and public dialogue about that.

At the national level, Community Justice Scotland is able to increase the visibility of community justice in the work that it does. At the local level, there has to be on-going work with communities on understanding the nature of the system that we are talking about.

The point about whether awareness necessarily equates with greater confidence is interesting. As always in the justice system, looking at individual cases will raise pros and cons and different perspectives. I go back to the five principles of sentencing that the Scottish Sentencing Council has set out. The public could have greater awareness of those. There are five aspects that a sheriff will weigh up at any given time in the specific circumstances concerned, such as whether protection needs be given a real focus, or a rehabilitative element.

The Government can add things into the mix. One of the things that the Management of Offenders (Scotland) Act 2019 enables us to do, with Parliament's support, of course, is to use increased electronic monitoring. With the advances in technology in that area, electronic monitoring gives us the potential to increase the protective aspects even of community disposals. In the context of bail—this week, around 28 per cent of the prison population are on remand, which is a significant figure—the greater use of electronic monitoring gives a greater degree of security and protection while allowing us to pursue the rehabilitation aspects and the opportunity to make amends that community disposals give us.

I do not know whether Neil Rennick or Cat Dalrymple have anything to add.

Neil Rennick: One other area to mention is the role of the Scottish Sentencing Council, which has a specific statutory role in raising awareness of sentencing. It has done some interesting work, including the publication, in 2019, of a report on public awareness of sentencing. That showed that there were very high levels of awareness of community payback orders and electronic monitoring as sentencing options, with 98 per cent of people saying that they were aware of those sentences and a majority of people—63 per cent—saying that they had confidence in the fairness of the justice system.

However, it is clear that we need to do more when it comes to improving the wider understanding of the breadth of options that are available around community payback orders and community sentences, and building confidence in that as a rehabilitative model. I mentioned the work that Community Justice Scotland has done in that area in promoting better understanding of

individual cases of people who have been through the community justice system and turned their lives around. That has been a really positive contribution.

Craig Hoy: Is there a risk that, if you do not persuade the public through a process of raising awareness, you could damage confidence in the concept more generally? In the example that I gave, which involved an offence that 77 per cent of people believed should carry a custodial sentence, that offence would, in practice, attract a community payback order. In such cases, do we just have to say "Tough" to the public, because the system does not reflect their concept of justice?

Joe Griffin: No, I do not think that we would ever take that approach.

Every case will be different, and every set of circumstances needs to be understood in its own terms. In the context of the justice system, we think about the aggregate of that. When the public has concerns, there are ways in which the Government can help to respond. I gave the example of greater use of electronic monitoring, alongside other disposals that seek to reassure the public.

When it comes to the justice system, an understanding of the public mood is incredibly important. That is more a matter for our ministers than it is for us, as civil servants, although we support and advise them by gathering information about that. The people who are involved in orders and their families and victims absolutely need to have confidence in the system. We certainly would not question that.

The Convener: I want to bring us back to the nitty-gritty of the Audit Scotland briefing, on which Sharon Dowey has a series of questions.

Sharon Dowey (South Scotland) (Con): There is a lack of data on the wider outcomes—including on employment and health—for people who have been through the justice system. There is also a lack of data to enable Community Justice Scotland to assess how much progress community justice partnerships are making towards national outcomes. Why has Community Justice Scotland been unable to effectively assess how much progress has been made against national community justice outcomes?

Joe Griffin: I will be really clear about that and say that that is an area where we need to improve. The governing framework for data is called the outcomes, performance and improvement framework, which dates back to November 2016. It was put in place just before the establishment of Community Justice Scotland. The framework includes a statement that community justice should be looking to achieve seven outcomes that are defined at a national level. Four of those relate

to the health and the functioning of the system, and three relate to individuals who go through the system. Behind that, there are 26 national indicators that seek to track what is happening.

We have learned that a couple of things are not working well with that, one of which is to do with the fact that around half the indicators are qualitative; they are statements about an improvement or a state of affairs. Because they lend themselves to a subjective narrative, the returns that Community Justice Scotland gets from partnerships are invariably of such a nature. The Community Justice Scotland annual report provides a summary of what people have described by way of improvements in processes or relationships.

09:30

That makes it quite difficult to aggregate, as could be done with numbers or quantitative data. Such data would let us say that we are improving by a certain percentage across the 30 partnerships, but we are dealing more with language and judgment. Of the quantitative indicators—they make up about half of the indicators—some are readily measurable at national level but not at local level.

At the time, the aspiration was to put in place a data system that could do justice to the breadth of what community justice could achieve. That created a couple of challenges. One is the inability to measure some indicators at local level. We thought at the time that the methodology would evolve and that we would find ways to do that. We have not done that yet, so we must reflect on that.

The second challenge is about the breadth and complexity of what we are talking about. Someone who has committed an offence is also a person. They will have health and employability needs, as we have discussed. The ability to measure all those needs and to track them consistently at the individual level is bedevilled by all sorts of different data sets and data protection agreements, some of which are reserved and some devolved. It is a complex picture. That is not a cop-out. We should try to do justice to the complexities that those individuals face but, in all honesty, we have not achieved that in recent years.

The legislation always said that Community Justice Scotland should review the framework after five years. It is doing that now, and the work is well under way. The suggested improvements to the framework will be published early next year, together with our review of the overall strategy for community justice.

We accept that the system is not working as well as we would like it to. It does not give me, as the accountable officer, the data that I would like

to see. We have a clear plan for improvement and we must learn the lessons, including those that Audit Scotland has helped us to understand.

Sharon Dowey: What work have the Scottish Government and other stakeholders done to examine whether the wider outcomes such as health or future employment have been achieved?

Joe Griffin: Neil Rennick or Cat Dalrymple may want to come in here.

I must again reflect on some of the challenges. The way that the data works means that we are not looking at an individual person who can be pursued through different bits of the system. At an individual level, we hope that the criminal justice social worker who is working with that person will have a good understanding of how they are getting on, but that is not reflected by a multiagency data set that would let us flick to tabs for bodies such as the Department for Work and Pensions or the local alcohol and partnership. The system does not have the complexity and sophistication to allow us to follow individuals in a data-led or quantitative way. The criminal justice social worker, who works in a relational way, ought to be able to see how a person is getting on.

Neil or Cat might wish to add to that.

Catriona Dalrymple (Scottish Government): Mr Griffin has explained the challenges of measurement in the sector. To understand our impact, it is important to understand the interventions that we implement. Those interventions are evidence based, so we begin with the reasonable belief that we should contribute to the outcomes that we are seeking, even if we cannot exactly measure that contribution.

Our strategy is based on principles supported by academic and evaluative literature. We know that seeking to divert people from the justice system early on, diverting people from custody whenever that is appropriate and addressing offenders' underlying needs and addictions will all improve outcomes and help to achieve the ultimate aim.

Sharon Dowey: The Auditor General's briefing states that Audit Scotland's 2012 report "Reducing Reoffending in Scotland" said that a lack of data made it difficult to assess the impact of community justice authorities. The issue was also mentioned in the outcomes, performance and improvement framework report of 2016, and our predecessor committee mentioned the issue in its 2019 report on key audit themes. The committee raised significant concerns about a recurring key audit theme of incomplete and poor-quality data.

I take on board your point about the multiagency and complex nature of the issue and the fact that a review is under way, but how and when will the data issues identified in the Auditor General's briefing be addressed? We do not want to have another report from the Auditor General that again states that there is incomplete data. The first report that I mentioned goes back to 2012, which was nine years ago.

Joe Griffin: I completely understand the point. The Government and the civil service have digested the legacy report from the predecessor committee—we have read and discussed it. The Auditor General has been to the executive team, and we have discussed some of the key themes that he and his organisation have been observing. We understand the point, and we need to get better at this. In this sector, our early expression of that will be next year, in the revised framework that we are discussing. I am sure that we will be back to discuss that in due course, but we need to get that right, and we are determined to do so.

I would not want to imply that some things will be easily remedied and that we will be here in a year's time saying that we are happily able to track individual offenders in respect of every different agency and area of public life. It would be very hard to do that for any individual citizen, and it is particularly hard to do it for people who are living quite complex lifestyles, sometimes bordering on the chaotic. There may be insufficient accommodation, and so on.

I underline my absolute commitment and the commitment of the civil service and my colleagues on the executive team to improve things as part of how Government approaches public policy. We will do better on community justice, through the production of the new framework next year. However, I need to be honest and say that there will still be intrinsic difficulties, which will take time for us to work through.

Neil Rennick: I will clarify one point that has helpfully been raised. The concerns that were raised by Audit Scotland in its 2012 report on reducing reoffending absolutely fed into the work on the development of the outcomes, performance and improvement framework, or OPIF. There was a two-year process of workshops, and a crossagency working group developed the OPIF. As the director general says, that was an ambitious document that tried to reflect qualitative and quantitative indicators.

Through testing the framework and through Community Justice Scotland applying it in the new system, gaps and issues have been identified, which we absolutely accept. We are grateful for the work that Community Justice Scotland did last year in reviewing the framework and for the work that it is doing now to inform us and to help us to develop the new framework that will sit alongside the new national strategy. It is not that the

concerns that were raised in 2012 were not responded to; they were responded to, with some significant work. However, as the director general says, this is an incredibly difficult area in which to find the right mix of indicators, and we continue to work on that.

Joe Griffin: I will add one thing about the evolution of the system. Community payback orders have now been in place for 10 years, which is a reasonable period of time, but not a long period compared with the period for which we have had prison. In my time in this area, I have observed a shift, with a mindset and a focus on the management of offenders, which considers risk, timescales and the numbers of community payback orders. Increasingly, we are thinking about broader sets of outcomes in terms of housing and drugs and alcohol that will support the person's rehabilitation journey. That transition has been taking place over the past few years.

The system is maturing, and the data system needs to mature along with it. As Neil Rennick says, we will find some complex things along the way. The different philosophy of community justice, in which we are looking to be effective in reducing offending and cutting crime by addressing some of the underlying causes, is reflected in the need for an improved and more complex data set.

Sharon Dowey: I just want to ensure that, wherever we focus the money, we are getting the outcomes that we want.

Joe Griffin: Absolutely—100 per cent.

The Convener: You understand, Mr Griffin, that the committee has a healthy appetite for data.

Joe Griffin: You will understand, convener, that, as accountable officer, I, too, have a healthy appetite for data.

The Convener: It is about outcomes, performance and improvement.

Joe Griffin: Of course.

The Convener: That needs to be measured, and it needs to be measured in a meaningful way.

Earlier, we mentioned the governance and accountability lines, particularly since the passing of the Community Justice (Scotland) Act 2016. Colin Beattie has a series of questions about that.

Colin Beattie (Midlothian North and Musselburgh) (SNP): Yes, I will ask about roles and accountability. In particular, I draw the witnesses' attention to paragraph 9 of the Auditor General's briefing and the first bullet point under paragraph 13. That bullet point is the first priority that the Auditor General lists, which is that the Scottish Government needs to consider

"Whether all stakeholders involved in the planning and delivery of community justice have a shared understanding of lines of accountability and areas of responsibility."

Do they?

Joe Griffin: I cannot give an authoritative answer in respect of 30 partnerships with eight statutory partners in each. My impression is that there is a good level of understanding. The 2016 act is clear. There is a complexity that comes from trying to combine a local approach that needs to be cross cutting and joined up, which is the partnership bit, with a national function—the Community Justice Scotland bit, which relates to gathering data and securing improvement and in which the Scottish Government also has a role.

The duties in the 2016 act are such that we can see different levels of effectiveness and engagement. The act is very clear that the partners need to plan together. What that looks like has the scope to be variable in different areas. One of Community Justice Scotland's themes is that there is not enough strategic needs planning at the local level to provide a real sense of the capacity and different needs in the community sector.

It is hard to give an authoritative answer and guarantee that everybody has a shared understanding of accountability and responsibility. The 2016 act is clear enough. It has been in place for a number of years and the Care Inspectorate now undertakes scrutiny in community justice, which is incredibly helpful. It is providing good feedback that helps people to improve.

Colin Beattie: Do you believe that the individual stakeholders involved have a common understanding of their responsibilities and roles?

Joe Griffin: Yes, I do. To put it another way, I have no reason not to. It is a reasonable question to ask. Because of the scale of what we are talking about—eight statutory partners in 30 partnerships—it is hard for me to answer, but I am not hearing a steady stream of information to say that there is a problem with this or that agency.

Colin Beattie: I detect a certain amount of uncertainty in your responses over whether everybody understands their roles and responsibilities. Perhaps one of the issues is that the community justice partners still remain accountable through their usual accountability arrangements. Does that create an issue?

Joe Griffin: The issue is that you need to have a partnership approach at local level. We came out of the community justice authority model, which was widely thought not to be working effectively, into the local partnership model partly to reflect the local aspect and partly to reflect the partnership aspect. As I said, you cannot tackle offending effectively unless you look at all the

different areas. The partnership will always have to be a feature of that.

Holding partnerships to account is more complicated than holding individual organisations to account. An incredibly important part of community justice is criminal justice social work. That function sits within local authorities. It is clear how it is held to account through local authority processes. How you hold the partnership to account collectively is more of a grey area and more nuanced. Individual organisations need to report through their accountability chains.

Colin Beattie: Given that we want everybody to understand fully where they are and what they do and to work together cohesively, would Community Justice Scotland benefit from additional powers to support its role—for example, powers that would enable it to drive a more strategic approach to planning—and create a better, more disciplined line of accountability?

Joe Griffin: Community Justice Scotland has more interventionist powers than it has used. It has the power to make directions.

Colin Beattie: In that case, given the uncertainties, why have you not done that?

Joe Griffin: It would be for Community Justice Scotland to do that, not the Government. Community Justice Scotland has not availed itself overtly of that power. However, behind the scenes, it has had discussions and intervened to promote collaborative working. In addition, since 2019, the Care Inspectorate has restarted its scrutiny in that sphere, which has also provided challenge to and led to improvement in a number of different areas that were previously struggling.

09:45

There is always a balance to be had between direct quasi-punitive intervention and trying to achieve something through collaboration and improvement. Up until this point, the approach has been more one of collaboration and improvement, but other powers are available.

I am sure that we will reflect on the issue. As I mentioned earlier, we are reviewing the strategy, as the legislation requires us to do. It might be that partners feel that, as a result of that, we need to turn up the dial in relation to some of the more direct interventions. I am certainly open to hearing evidence that that would be an effective thing to

Colin Beattie: Given that you believe that Community Justice Scotland has the powers to act, why is it not using them? This is not the first time that this issue has come up. During the consultation on the proposals for the legislation that became the 2016 act, many stakeholders said

that they were unclear about roles and responsibilities. It still sounds as though there is a weakness in that regard. If Community Justice Scotland has the powers, why does it not use them? If it does not use them, why does the Government not push it to use them?

Joe Griffin: As I said, my understanding is that Community Justice Scotland has chosen to act behind the scenes. Its approach is more about promoting collaboration and improvement than it is about availing itself of its interventionist powers, the use of which would be seen as significant. Neil Rennick or Cat Dalrymple might be able to shed more light on what Community Justice Scotland's thinking is behind that.

Neil Rennick: It is exactly as the director general has said. The new model has been operating, prior to Covid, for three years. Where concerns were identified, Community Justice Scotland has taken the approach of going into local areas and working with them to try to drive improvement. The Care Inspectorate undertook an inspection in West Dunbartonshire and it identified a number of concerns. Community Justice Scotland has been working with that area to address those concerns and deliver improvement.

Colin Beattie is right that the direction power exists for Community Justice Scotland. It is for it to decide whether to apply that. Community Justice Scotland has reassured us that it is intervening and working with the local partnerships to drive improvement. However, it has also identified wider issues, including the issues around data that the director general has mentioned, and it is looking to drive improvement across the whole system in that regard.

I do not know whether Cat Dalrymple has anything to add.

Catriona Dalrymple: I note that Community Justice Scotland can and will highlight certain issues in its annual community justice outcome activity report. In its last report, it highlighted concerns about three areas that had not renewed their outcome improvement plans as required.

Colin Beattie: Community Justice Scotland has highlighted some areas, as has the Auditor General. There seems to be a problem that must be addressed. Community Justice Scotland has the powers. I am not asking for it to be draconian, but if going behind the scenes, having a wee chat to people and trying to usher them down a particular path is not working—and it demonstrably seems not to be working—action needs be taken.

Joe Griffin: I am open to that line of argument. As I said, we have a consultation under way about the strategy and how it is working. I am open to seeing evidence that a more interventionist approach would deliver results.

I would not quite characterise the system as "not working". I think that there are—

Colin Beattie: I did not use the term "not working".

Joe Griffin: Forgive me, Mr Beattie—I did not mean in turn to mischaracterise you. Up to this point, I have not seen any evidence of egregious problems that I think would justifiably have caused Community Justice Scotland to go in with a directive and interventionist approach.

Colin Beattie: Yet stakeholders and Audit Scotland have expressed concerns.

Joe Griffin: They have, and Community Justice Scotland takes the view that the best way to address those is through the collaborative approach.

Colin Beattie: You mean Community Justice Scotland carrying on with what it has been doing before, which has not really given the hoped-for results.

Joe Griffin: I think that there are positive results. Neil Rennick mentioned West Dunbartonshire. That is a good example of how a partnership that was finding some things difficult was able to respond to the Care Inspectorate's scrutiny and make improvements to the inspectorate's satisfaction.

There is a combination of things. There is the data that we have, there is the Community Justice Scotland approach, as it judges to be necessary, and there is also the scrutiny from the Care Inspectorate, which has restarted since 2019 and which has been important.

We have to get the data sharpened up so that we have a clear idea of performance, including relative performance, across the piece. There is then a judgment to be made by Community Justice Scotland about what will best get the improvements and results that it needs. I would be poorly placed to say that we must never take a more interventionist approach, so I am open to that line of argument.

Colin Beattie: Have you accepted the Auditor General's report?

Joe Griffin: Yes.

Colin Beattie: In that case, you also accept that there is an issue around accountability and lines of responsibility. It is therefore a question of what you will do to change what is happening now in order to ensure that those required outcomes are achieved.

Joe Griffin: There is a complexity in the system in relation to accountability. We do not have plans to review the 2016 act and therefore to make significant changes. However, we think that we

have to address the data—that is really important. We also have to look at the overall strategy.

Colin Beattie: Data is essential, but if people do not necessarily fully understand the responsibilities and areas of accountability and so forth, you have a fundamental problem right from the start. It seems that the softly, softly approach behind the scenes over a number of years has not delivered. There must therefore be a need to revisit that to see what needs to be done to pull it together.

Joe Griffin: As I said, a review is under way at the moment. The legislation always provided for that. I am happy, during the course of that review, to hear evidence that a different approach would get better results. However, I do not accept that there are egregious problems in the system. As I pointed out in my earlier remarks, we are making steady progress.

Although there is the opportunity to hear how taking a different focus in some different areas could lead to improvements, the Government does not have plans to revisit the accountability framework that is set out in the act. You will always need some degree of partnership at local level and you will always need some kind of oversight and improvement function at national level. That strikes a balance, and we need to keep improving the way in which it functions rather than revisiting the fundamentals.

The Convener: We are in our final few minutes. If other members want to come back in for another go, they are welcome to do so.

Going back to the overall outcomes and where we began, it struck me that, although we have a national strategy that has been in place since 2016 and an act of Parliament that provides for a new institutional structure to deliver community justice, the conclusion of the Audit Scotland report was that little progress appears to have been made in the intervening period.

I understand the points that Mr Griffin made at the beginning about the total volumes and how that has changed. However, as the Public Audit Committee, one of our maxims is follow the money. The Audit Scotland report states:

"Community justice funding makes up less than five per cent of overall justice funding, and there has been little change in recent years."

If we are following the money and this is a priority and everybody wants to see a change in the balance between custodial and non-custodial, why is that so static?

Joe Griffin: That is a fair point. It is partly because it is a relatively cheaper system to run than prisons, as we have been talking about. Some of the unit costs are quite instructive; the

unit cost of a community disposal is far smaller than that of a custodial one, for example. A prison system is a more expensive system to run. We have increased funding by 13 per cent since 2016-17, and the Government has made commitments to increase funding still further. It also relates to the transition that I described earlier, in that community payback orders were first introduced 10 years ago and it is a system that is growing and maturing.

The other crucial thing about community justice is its breadth. To some extent, the funding for criminal justice social work that the Government provides through section 27 of the Social Work (Scotland) Act 1968, which is hypothecated, is only part of it. The reason for having a partnership approach, which brings complexity in terms of accountability, is that other partners also bring resources to the table. When I speak to colleagues in localities, they tell me that that is happening. Drug and alcohol partnerships, local authority housing and accommodation services. Skills Development Scotland and so on bring their resources to the table. That is quite hard to quantify, but those resources are part of the mix. We are on a transition and a journey to increase the share of 5 per cent to a larger number, but there is the more complex issue of other funding sources being an important part of the picture.

The Convener: Two things arise from that. Would it be possible to get that information or data into the public domain? If the point that you are making is that 5 per cent does not capture the full extent of the additional resources that are now going into community justice, it would serve your argument and the case for your department's performance to demonstrate that more resources are going into that. As I said, quite an important maxim is follow the money.

The other question that arises for me is whether you have any targets. We asked that question in the session with Audit Scotland on the briefing. I mentioned the proportion of non-custodial sentences going from 59 per cent to 56 per cent to 59 per cent. Do you work towards any formal or informal or internally or externally set targets for that number?

Joe Griffin: We do not. The idea of a target for the prison population has been mooted—it was mooted by Mr McLeish in his Scottish Prisons Commission report. A target of some 5,000 was mooted to ensure that the prison population remained at a level that was comparable to those of other European countries. I think that ministers took the view at the time—this still pertains—that a couple of factors make that difficult, one of which is the independence of the judiciary. It would be problematic for the Executive to constrain the

independence of the judiciary to make sentences in that very crude and target-based way.

The second factor is the unpredictability of the system. Earlier, I described the big change that we have seen away from short-term custodial sentences to fewer sentences, of longer length. We could not have foreseen that in 2008. Similarly, we do not know for certain how the justice system will develop in the next decade. We know how we would like it to develop, and we have plans for where we want it to go. However, as far as the prison population is concerned, targets are problematic.

On the issue of community disposals more generally, my mind is not closed to the idea that we could consider that. We have to look at the range of community disposals and not get too fixated on community payback orders, important as they are. We have to understand the full mix and the pre-sentencing options that also exist. We can give some thought to that in the refresh of the strategy. However, a target for the prison population is problematic.

The Convener: I was not suggesting a target for the prison population; I was referring to the whole basis of the conversation this morning, which is about the proportions and how we get a shift from custodial to community-based justice options. That is not about a cap on the prison population; it is about how we shift from disposals that are custody based to disposals that are not custody based. My question is: are you set any targets for that shift in balance from one to the other?

Joe Griffin: The answer to the question is no. However, I go back to the point that we have seen a shift from short-term prison sentences to community sentences—there is no question about that; the data is clear—but, in parallel, we have seen an increase in long-term prison sentences. The nature of the challenge has changed. That could call into question the usefulness of targets for that percentage, because we are not comparing the same things that we were 10 years ago. However, the clear answer to your question is no, we do not have plans for a target.

Neil Rennick: The director general is absolutely right about the importance of the switch round in the reduction in short-term sentences. Obviously, things can feel very unclear when we talk about percentages and numbers. Even in the short space of time since the new arrangements came into place, in 2016-17, we have seen a 1,500 drop in the number of people going into prison for short-term sentences. That is 1,500 people not having disruption to their housing, their employment and their family life. Those are important changes that have happened in the short term and, as the director general said, there are much larger

numbers over the longer term—a reduction of 4,000 in the number of people going to prison.

10:00

Although we have not set targets for specific elements of the justice system, because what happens there reflects decisions by the independent judiciary, we have provided targeted funding for specific areas. A good example is supervised bail. Over a period of time, there was a recognition that the judiciary's use of supervised bail had been dropping and that availability was an issue. Our provision of around £1.5 million of targeted funding for that over three years has resulted in a significant increase of 60 per cent in the availability of supervised bail.

It is clear that we still have further to go, but that is a good example of how the provision of targeted funding, rather than the setting of a particular target, has had an impact in improving availability. Prior to the pandemic, we were looking at wider areas where we could apply that approach but, because of the impact of the pandemic, we have allowed local partnerships more flexibility in their use of money over the past 18 months. However, we think that that approach has worked well for supervised bail and that it might have benefits for other areas, too.

The Convener: Thank you, Mr Rennick. That was a very helpful and instructive answer, although it provokes a final question.

Everyone talks about the logjam in the criminal justice system because of Covid, during which the courts have operated on a very different basis. Mr Griffin, can you tell us about the department's view of how the backlog will be managed? "Opportunities" might not be the right word, but does the current situation give you a junction in time to drive what happens in a slightly different way?

Joe Griffin: I do not know whether the recovery, specifically, does that, but the recovery work is taking place at a time when we are considering other matters in other ways. There is the review of the strategy that we have talked about, as well as the national care service consultation, which could have implications for criminal justice social work.

The recovery from Covid is an important part of all that work. As you will know, so far, we have provided additional funding of £11.8 million. In the light of Mr Sunak's announcements yesterday, we will look at the budget to see to what extent we can sustain that in coming years.

Neil, do you have anything to add in response to Mr Leonard's question about the opportunity that the recovery presents to help us to make the shift that we have discussed?

Neil Rennick: Absolutely. That opportunity has been recognised as we have gone through the pandemic. Very deliberately, the recovery programme that we are following is described as a recover, renew and transform programme. Built into it is the idea that there is an opportunity to do more than just return the system to the way that it was in April 2020, and that has been picked up.

As the director general said, we need to look at a balanced system. As we recover and court activity gets back to pre-Covid levels, that will have an impact downstream for prisons and community sentences. Therefore, it is very deliberately the case that £11.8 million of the £50 million recovery package is going directly to community justice to strengthen that recovery and to make sure that the capacity is there as those cases feed through.

The Convener: Thank you for ending on that very positive note.

I thank Mr Griffin, Mr Rennick and Ms Dalrymple for joining us. We appreciate your input, your candour and your vitality, at times, in responding to the questioning. Thank you very much for your time and your evidence.

I look forward to seeing Mr Griffin again soon, perhaps.

Joe Griffin: Thank you, convener.

The Convener: I suspend the meeting to allow for a changeover of witnesses.

10:04

Meeting suspended.

10:08

On resuming—

"Covid-19 vaccination programme"

The Convener: The third item on our agenda is evidence from Audit Scotland on its briefing paper, "Covid-19 vaccination programme", which was produced recently. Our witnesses will give evidence on the research and audit that has been carried out by Audit Scotland. I welcome Stephen Boyle, the Auditor General for Scotland, and Leigh Johnston, who is a senior manager at Audit Scotland. Joining us remotely is Eva Thomas-Tudo, who is a senior auditor for performance audit and best value at Audit Scotland.

If Eva Thomas-Tudo wants to come in, she should put an R in the chat function. If the witnesses in the room want to come in, they should simply indicate to me or the clerks, and we will do our best to bring them in.

I ask Stephen Boyle to give a brief opening statement.

Stephen Boyle (Auditor General for Scotland): Thank you, convener. Good morning. Today, I am bringing to the committee a briefing paper on the Covid-19 vaccination programme. It focuses on the management of the programme and the progress that has been made so far, and it outlines some of the next steps, including the preparations for delivering the extended flu and booster programme over autumn and winter.

The Covid-19 vaccination programme is the largest mass vaccination programme that has ever been carried out in Scotland. Audit work often highlights where things have gone wrong, but it is important that we also give credit when we see success. Excellent progress has been made in vaccinating a large proportion of Scotland's population. More than 90 per cent of people aged 18 and over have received at least one dose of a Covid-19 vaccine. The programme has been effective in reducing the number of people who become severely ill and die from Covid-19. Vaccines have been delivered in a variety of settings, and the rate of vaccine wastage has been low.

My paper recognises that there has been variation in uptake across sections of Scotland's population. The Scotlish Government has been taking action to encourage people to take up the offer of vaccination, but a smaller proportion of young people, those in our most deprived communities and those from some ethnic minority backgrounds have been vaccinated so far.

The vaccination programme is being implemented under uncertain and challenging circumstances. Clinical advice from the Joint Committee on Vaccination and Immunisation continues to evolve and has needed to be implemented quickly, most recently through booster programmes. The Scottish Government and national health service boards have done well to respond quickly to newly issued advice, with eligible groups offered vaccines within days of clinical advice being published.

NHS boards and health and social care partnerships have predicted that vaccination costs will be £223.2 million in 2021-22. However, the expenditure that is needed might change, depending on any further advice from the JCVI. The Scottish Government has confirmed that it will fully fund vaccination costs for the 2021-22 financial year. We will continue to monitor the funding and spending and will provide an update in our overview of the NHS in Scotland in early 2022.

Thus far, the programme has relied on temporary staff from across a wide range of NHS disciplines. That diverse workforce has enabled the vaccination programme to progress quickly, but it is an expensive model. The Scottish Government has recognised that a longer-term solution is needed, and work is under way to recruit a permanent workforce.

The delivery of the vaccination programme has been a success thus far, with good collaboration, joint working and new digital tools developed at pace. There are opportunities for the Scottish Government and the NHS to use the learning from the programme to inform the implementation of further stages of the vaccination programme and the wider delivery of NHS services.

As ever, Leigh Johnston, Eva Thomas-Tudo and I look forward to answering the committee's questions.

The Convener: Thank you very much. The briefing is wide ranging, and we have a wide range of questions to ask.

I will get us under way with a couple of questions. The briefing is broadly positive, as you said, but there are challenges that lie not behind us but ahead of us. We know that there will be increasing pressures on the national health service, which we normally see during the winter, and that there is a considerable backlog of treatment. There is also the continuing pressure of delivering the vaccination programme. Are there adequate structures, leadership and governance in place to withstand those pressures and to meet those challenges?

Stephen Boyle: I do not think that there has been any attempt to understate the extent of the

pressures that the NHS faces in the winter ahead. On a number of occasions over the past few weeks, I have heard the Cabinet Secretary for Health and Social Care try to manage public expectations and to set out what we are facing. You rightly point out that the NHS is facing the challenge of recovering its services in relation to the backlog.

10:15

It is worth pointing out that, before the pandemic, the NHS was experiencing extreme challenges and Audit Scotland had reported on the challenges around sustainability. Having all those factors alongside the delivery of a vaccination programme will remain challenging. We say in our briefing that the structure, funding and pace of the delivery programme were all done well and that an effective programme was delivered. It remains to be seen whether it will act as a template for the delivery of NHS services over the winter. We have made positive comments about the vaccination programme.

Our next opportunity to pass comment, in particular on how NHS services are tackling the backlog, will come in the NHS overview report that we will produce early in 2022.

The Convener: We will look forward to that.

Will you confirm whether the costings in the briefing cover the booster vaccination programme that has already started for some categories of the population? Do you have any sense of the projected costs for vaccination programmes in future years? Has your work on this year's vaccination programme given you any sense of where things are with the booster programme and what any possible future vaccination programme might look like or what it might cost?

Stephen Boyle: I will begin, then I will ask Eva Thomas-Tudo to give more detail about the numbers that are captured in our report.

There are a number of variables, including the predictability of future costs and the extent to which clinical advice about the use of vaccines might change. That creates uncertainty. We have some empathy for the NHS, which will find it challenging to say with much confidence what that might look like.

The figure, which we give in the briefing, of £223 million for the rest of this financial year is based on assumptions about the programme delivery that the Scottish Government gave to NHS boards, including assumptions about staffing and premises. If those assumptions remain static during the delivery of the booster programme, we can have some degree of confidence. We are less

able to say what the future cost profile might look like

There have been some funding announcements in the past few days about additional allocations to support delivery by NHS boards and NHS National Services Scotland activity for the rest of this financial year. Like others, I will closely watch what comes out of the draft Scottish budget later this year to see what the future cost of the delivery of the vaccination programme might be.

Eva can update the committee with any further information.

Eva Thomas-Tudo (Audit Scotland): The figure of £223.2 million that is mentioned in our briefing paper is based on predicted costs from NHS boards and health and social care partnerships as part of a review of quarter 1. It incorporates the predicted costs of the booster programme. As we say in the briefing, the figure depends on the accuracy of the predictions, and the final costs for this financial year will depend on whether the JCVI issues further advice about requirements for the delivery of vaccinations before the end of the financial year.

The Convener: That is helpful. Are you saying that the figure does not include the cost of the booster programme? Have I picked that up correctly?

Stephen Boyle: We are saying that it does include that cost.

The Convener: It does include that cost. That is good.

You mentioned recent announcements. An additional £482 million was announced, to include funding for personal protective equipment, test and protect and the delivery of Covid-19 vaccinations. Does the Auditor General or any member of the team have a sense of how that will fit the expected likely demand?

Stephen Boyle: We have not done any audit work on that yet. We have seen the breakdown and the allocation that is applied to the NHS boards, and the national boards in particular. A significant thing that we see in that is the size of the allocation to NHS National Services Scotland, which received £109 million. We mention the extent of the variability throughout the briefing paper and we have seen it throughout our work, along with the pace of change in clinical advice in relation to the allocation of booster programmes.

I think that it reflects the current status of booster programmes. If that changes, we would anticipate that there will be further funding requirements for the NHS and health and social care partnerships. As I mentioned, we will track that closely through our audit work. We will have opportunities to provide an update in the NHS

overview report and then in the annual audit work that we will carry out on the NHS boards over the course of next year.

The Convener: Thank you. Of course, we will come back—it might even be next week—to the PPE report that you produced, which is on part of this terrain as well.

As I said, we have a wide range of questions. I begin by asking Sharon Dowey to come in on an important area for us.

Sharon Dowey: Good morning, Mr Boyle. You have already touched on the subject of my question. In paragraph 18, the briefing explains that

"The vaccine programme has ... been reliant on temporary staff and volunteers",

including

"nurses, GPs, dentists, optometrists"

and so on, and that that has been expensive. Have you undertaken any work to cost that delivery model? What has been the cost to the public purse?

Stephen Boyle: We have. Our briefing paper captures our work up to the end of September and, as I have mentioned a couple of times, we will continue to track and monitor that with further reporting in the NHS overview report and then through the annual audit work during 2021-22.

Our understanding is that, thus far, about £55 million has been spent on that staffing model. We know that the Scottish Government is beginning to think about its plans for a more medium-term or long-term model for how it might deliver what we expect to be an on-going Covid-19 booster programme. What that might end up costing will inevitably depend on the staffing mix that the Scottish Government chooses to settle on. We have less reliability on what that figure might be, but our understanding is that the model has cost about £55 million thus far.

Sharon Dowey: You said in the briefing that, as restrictions ease and NHS services recover, the availability of the temporary workforce will reduce. With that in mind, do you foresee any implications for the roll-out of Covid-19 booster vaccinations?

Stephen Boyle: It is potentially difficult to be definitive on that point at the moment, but that is generally not what we are seeing. I will ask Leigh Johnston to comment on the rate of progress that we are seeing in the booster programme, which is not captured in the briefing, given the timing. However, we are not seeing any real difference in the pace of the roll-out of the programme.

By way of context, it is perhaps worth mentioning a point that we made in the briefing. As

we will all recall, in the early stages of the initial Covid vaccination programme, much of the work was undertaken in large public venues such as sport stadiums and concert halls. As social distancing has eased and lockdowns have ended, the availability of those venues is no longer what it was and much of the programme is now being undertaken in more local settings. That will continue to roll out over the course of the booster programme.

As I said, we are not seeing real divergence thus far, but it is perhaps worth turning to Leigh Johnston for a moment, as she can give the committee an indication of where we see the rate of progress of the booster programme being.

Leigh Johnston (Audit Scotland): To update the committee, I note that as of yesterday, which was 27 October, 568,373 booster vaccinations had been delivered. We should also recognise that, on top of that, 53 per cent of our 12 to 15-year-olds have now been vaccinated.

To touch on Mr Leonard's earlier point, I note that the vaccination programme will remain a priority, so I think that, in order to prevent the NHS from becoming overwhelmed this winter with all the other, additional winter pressures that come along, the NHS will maintain the staffing to make sure that the booster and the flu vaccine are rolled out as a priority.

Sharon Dowey: As has been mentioned, the Scottish Ambulance Service was drafted in to support the delivery of the vaccination programme. Is that still happening? That service is, as we know, under pressure, too. Have those staff been moved back, or are they still helping out?

Leigh Johnston: The Scottish Ambulance Service was involved in the mobile vaccination units but, given the pressures that it is under, I am sure that those staff will now be doing their day job, if you like. However, as we said in the briefing, there might be a need to reimplement the mobile vaccination centres to reach the more difficult populations. I also point out that, as demand for vaccinations has reduced and as we have moved on to the booster programme, which involves a smaller number of people than the number involved at the height of the mass roll-out, there has been less need for those mobile clinics.

Stephen Boyle: On the point about the workforce and venues, we also recognise the contribution of the armed forces to the delivery of the vaccination programme and the support that they have provided to the NHS in Scotland, but the expectation is that, as we move to a more predictable delivery of the NHS vaccination programme, such a situation will not continue. It was just one of the other variables that was present in the early stages of the vaccination

programme. The need now is to put in place a more permanent workforce to deliver the programme in future, which is what the NHS and the Scottish Government are doing.

Sharon Dowey: That brings me to my last question. We understand that the Scottish Government is undertaking workforce planning to secure a permanent and sustainable vaccination workforce. Do you know how far advanced those plans are? What must the Scottish Government consider in that planning?

Stephen Boyle: I will ask Eva Thomas-Tudo to respond in a moment, as she has been tracking some of that in conversation with Government and NHS officials.

We know that work is under way and that, as we mentioned in paragraph 19 of the briefing, the Scottish Government is, in respect of workforce planning, thinking about the use of registered nurses with regard to having a more sustainable delivery model for the vaccination programme. We also understand that it is thinking about the cost profile in that respect. Those plans and that work are under way.

That is probably a line of questioning that the committee might wish to explore directly with the Government, as that would be a better way of getting a more direct assessment of its progress.

Eva Thomas-Tudo: Our understanding is that the Scottish Government is expecting to recruit a permanent workforce. The exact size and nature of that workforce will be for the Government to confirm, but we understand that it hopes to recruit healthcare support workers as much as possible to work alongside registered nurses, which would be a more cost-effective model than it has been able to use so far. The role of that workforce would be to support all vaccinations rather than just Covid-19 vaccinations across Scotland on a more sustainable basis but, as we have said, the Scottish Government will be able to provide a more up-to-date picture.

The Convener: One area that is highlighted in the report is digital access and the use of digital tools. Craig Hoy has a number of questions on what is an evolving picture, and I think that Willie Coffey might want to ask briefly about it, too.

Craig Hoy: When it looked at information and communications technology projects, our predecessor committee—and, I am sure, its predecessor committees—often found that their management, or mismanagement, had significant and negative impacts on public funds. Your briefing refers to a number of digital tools being "developed at pace". Have you picked up on any ICT issues that are similar to those that were highlighted in previous sessions?

10:30

Stephen Boyle: We absolutely recognise the point that you make, Mr Hoy. Audit Scotland has not come up short in reporting to predecessor committees on troubles in ICT projects. I have made the point a couple of times that that reporting was not always representative of the success or otherwise of Scottish public bodies in delivering ICT projects. As I alluded to in my introductory remarks, the nature of our reporting can often lead people to infer that the troubles that we report on are representative of the entire delivery of ICT projects or public services. However, this feels like a departure from some of the commentary that we have made on troubled ICT projects.

As I also alluded to in my introductory comments, there is a real opportunity to learn from the development of some digital tools. We cited four of those in paragraph 20 of the briefing. They include tools that were available to clinicians, data stores and tools for scheduling—I will say more about that in a moment.

We saw through our audit work that digital was a key driver and an essential component of the vaccination programme roll-out, and that it was done well. There is now an important opportunity to apply some of that learning across the NHS and more widely in the Scottish Government.

Craig Hoy: I want to look at NHS boards' use of the system to allocate and reschedule appointments. The national vaccination scheduling system, or NVSS, has obviously been adapted over time to improve its functionality. An example of an issue from my constituency in the early days is that people in East Lothian were not necessarily given appointments there, but were routed to West Lothian, Midlothian and Edinburgh, even when there was capacity in East Lothian. I think that many of those issues have been fixed, but what risks, if any, continue to exist for health boards in using the NVSS?

Stephen Boyle: I recall that, in the early stages of the roll-out, people were asked to travel further than they might have expected, and perhaps without available public transport to make it easy for them to access vaccine services. In paragraph 22 of the briefing, we referred to some of the flexibility that evolved during the roll-out of the programme. Some NHS boards for islands identified that managing the programme and the scheduling arrangements would be more easily done at a more local level, because of their understanding of their patients' needs.

Stepping back, I think that there is an opportunity to recognise the importance of flexibility as the roll-out extended, particularly with regard to scheduling. We have seen that, when

drop-in arrangements have been available, which has enabled people to access services at their convenience rather than by using the scheduling tool, their use has sometimes superseded the use of the prescribed appointment times for patients. They have provided the flexibility for people to make their own choice. People accessing the vaccine, including boosters, in a way that is most convenient for them is now an important component of the programme, and that should continue. We might also extend the use of that flexibility to address some of the lower uptake points in different parts of Scottish society.

Craig Hoy: A report in *The Scotsman* this morning, which is based on a Scottish Parliament information centre report, says that up to three quarters of people in certain neighbourhoods of certain areas have not yet been vaccinated. There is a concern that reliance on digital means that some people are hard to reach, because they do not have a reliable internet connection or do not have devices. What is your impression of what more the Scottish Government should and could do to ensure that those who fall into that category are captured and brought into the vaccination programme?

Stephen Boyle: I will ask Leigh Johnston to come in on that, as she has looked in quite a lot of detail at the arrangements that have been used thus far.

From my consideration of the data, I think that the Public Health Scotland data tools are clear in terms of the roll-out of the first stage of the vaccination programme and the second vaccine. Its analysis by age group, NHS board area and local authority area set out interesting findings that are perhaps not what we would expect, given our previous consideration of the availability of information technology for some of Scotland's older population. That group is almost entirely vaccinated above certain age groups. However, that issue matters.

On access to the vaccination programme across Scotland's full population, it has not been rolled out entirely to some groups in society, including younger people, people who are economically deprived, and some parts of Scotland's ethnic populations. We talked about that in the briefing, as well as some steps that have been taken. We also listened carefully to the cabinet secretary speaking in his recent evidence to the COVID-19 Recovery Committee about steps that the Government and health boards are taking for different communities-including in religious settings and with Gypsy Traveller communities—to broaden the reach of the programme and dispel concerns that vaccination-hesitant people might have.

Perhaps Leigh Johnston could talk about the specifics.

Leigh Johnston: It is important to recognise that there are a number of reasons why some groups of people are not getting vaccinated. Those include access reasons; work reasons, such as losing income, which could hit people hard; and psychological and social reasons for not wanting to get vaccinated, such as beliefs about what the vaccine contains.

The Scottish Government has done a lot of work to encourage groups in which uptake has been lower to get vaccinated. We have listed the range of the things that the Government has done, which include work on understanding the data, assertive outreach, and work with organisations to tailor messages.

Public Health Scotland has a Covid-19 vaccination programme surveillance strategy, which sets out how it monitors the uptake of the vaccine among a range of other things, including adverse impacts. It specifically points out that PHS will look at where uptake is lower among certain groups and how to encourage people in those groups to get vaccinated. It also outlines the purpose of an on-going evaluation of the Covid vaccination programme. On 6 October, a report came out that outlined the learning from the flu and Covid-19 vaccination programme. It detailed what PHS has learned about lower uptake in some groups and what helped to encourage people in the different groups to get vaccinated.

Craig Hoy: One of the Government's core rationales for the vaccination passport system was the hope that it would lead to an uplift in vaccination rates among certain target groups, one of which is young people. The system is still in its infancy, but do you have any evidence to suggest that it is doing that?

Stephen Boyle: We have not looked at that yet. The timing of our briefing captured data and arrangements up to September, so the decisions on the application of the roll-out of the vaccination passport are not covered in the briefing. However, as we have mentioned, there are opportunities for us to take stock and report further. We will look to do that through our overview report early next year.

The Convener: I am not sure that we want to dive into a full-scale debate on vaccination passports at the Public Audit Committee.

Willie Coffey is next. Willie—you have questions on the digital stuff and on population reach.

Willie Coffey: I have just a few, convener.

Were lower rates of vaccination among certain age groups and certain communities attributable to digital access issues, or are there different reasons for lower numbers of people in those age groups and communities coming forward for vaccination?

Stephen Boyle: I will ask members of the team to come in in a moment to express their views on what we have seen through our work.

The answer is that a combination of factors are involved in differences in access rates. It is largely about the timing of roll-out of the programme and perceptions in society that certain people were less at risk. As Leigh Johnston mentioned, people's working arrangements are a factor that will have played in. That is probably the limit of what I can say. Beyond that, I point to academic research about societal motivations for people to access the vaccination programme.

It is clear from our work that the data tells us that younger people have not been vaccinated to the extent that some more at-risk groups in society have, but there is probably cause for optimism because uptake in the youngest group that is eligible for vaccination—12 to 15-year-olds—is already at more than 50 per cent. That pace of progress feels positive, at this stage.

Willie Coffey: You have said that the digital apps work really well and had to be developed at pace. Members of the public always ask me where the data is kept. Sometimes, I ask general practices questions about constituents and issues. Where is the data? Who keeps it and who makes it secure?

Stephen Boyle: We will do our best to answer that. Perhaps we will have an opportunity next week when we talk further about NHS National Services Scotland, which provides much of the functionality to support delivery of services across all our health settings. Leigh Johnston might want to say a bit more about that.

In the briefing, we refer to the national clinical data store, which holds the data components that we all have. We all have what is referred to as a community health index—CHI—number that is our unique reference. That forms the foundation for the roll-out of various programmes, including the extensive vaccination programme.

The data comes with huge responsibility. Of course, it is hugely important that it is managed safely and that all the right safeguards are in place to manage people's personal and private medical data securely. During our work, we did not see any issues that required reporting, although we closely monitor the matter. That is done by our auditors of NSS. Much of the structure and the systems within NSS give the necessary assurance.

All that is in place, but I recognise the point that Willie Coffey's constituents have made. Much of what is done is done behind the scenes.

Willie Coffey: I have a query about the compatibility of our digital platforms with other jurisdictions' systems. We have heard stories from here, there and everywhere that when people have moved from country to country the digital apps are not compatible. Are we largely ironing that out, or are there still issues to resolve?

Stephen Boyle: I acknowledge the point. The issue surfaced in particular when people who had received their first vaccination in another part of the United Kingdom sought to access their second one in Scotland. In evidence that was given to the COVID-19 Recovery Committee earlier this month, it was acknowledged that that had been challenging, but that progress was being made to resolve it. We did not examine that in detail for the briefing paper. My sense is that the situation—although it was, undoubtedly, challenging for individuals—was not terribly widespread. The challenges seem to be ebbing.

The Convener: Colin Beattie has questions.

Colin Beattie: Actually, I would like clarification on something first.

You mention in the briefing paper that vaccines were allocated according to the Barnett formula, so I presume that they were allocated on a population basis. Were there any issues with that, given the fact that Scotland has different demographics and, therefore, different priorities for the volume of vaccine that would be needed at any particular time? Was that taken into account in any way and did you note whether any issues arose from it?

Stephen Boyle: Good morning, Mr Beattie. I will ask Eva Thomas-Tudo to supplement my response on the assumptions that were used in the overall planning.

The short answer is no. Our understanding is that there was fairly straight application of the Barnett model, using the population share of Scotland in the UK as the basis for which vaccines were provided. That was done across the four nations of the UK. I will pause now, if Eva wishes to share additional insights.

10:45

Eva Thomas-Tudo: Scotland's share of the vaccines that are coming into the UK is based on the Barnett formula. Detailed modelling was done by the Scottish Government to allocate the share of vaccine more effectively across Scotland based on what NHS boards were able to deliver at any given time. That seems to have been pretty effective, given how quickly roll-out happened and the high uptake of the vaccine across Scotland.

Colin Beattie: You are reassured that the demographic differences did not have an impact.

Stephen Boyle: I understand your point about whether there ought to have been a more detailed analysis of, for example, rural components, age profile and risk factors, and whether it should have led to negotiations between the four nations, but as we say, our understanding is that that was done at a higher level on the basis of relative population share.

Colin Beattie: I turn to some of the points that Willie Coffey raised. Exhibit 4 contains some fairly detailed information, the source of which is, I understand, Public Health Scotland. Given our previous experience with data, are you comfortable that the figures are accurate?

Stephen Boyle: You are right that the source of the information is Public Health Scotland. The exhibit refers to uptake of the vaccine in the 10 socioeconomic groups in Scotland by ethnicity and age. We have not undertaken a forensic audit of the reliability of the data because the work was for a briefing paper, as distinct from an audit. We will have an opportunity to do so, but we are not seeing any data issues. We rely on the volume of the data and transparency in its provision by Public Health Scotland. If we encounter data issues, we will update the committee. We have not seen any, thus far.

Colin Beattie: I will ask more questions about that in a second. Page 5 of our Scottish Parliament information centre briefing shows the proportion of the population that has received the vaccine. Pretty much all the way down the line there is a discrepancy between those who got dose 1 and those who got dose 2. It is a not insignificant discrepancy, overall. Why is that?

Stephen Boyle: Forgive me, Mr Beattie—I do not have the SPICe paper.

Colin Beattie: Ah. It is a private paper. It shows that, by local authority area, there is a discrepancy of a few percentage points between take-up of dose 1 and take-up of dose 2. Did you encounter that during your audit? Did you note that?

Stephen Boyle: I will ask colleagues to come in on this. I accept that there was a marginal difference between the number of people who received one vaccination and the number who received two. The numbers do not equate exactly. There is probably a range of factors behind that; again the data is probably drawn from Public Health Scotland.

Colin Beattie: It is.

Stephen Boyle: Thank you. People might have had the sense that one vaccination would be sufficient. We could also speculate that there were factors in play to do with people's work. I recognise the data that you are referring to, in which there is a marginal difference between

numbers of people who opted for one vaccination but did not take a second.

Colin Beattie: The analysis of vaccine take-up indicates that it is not necessarily the case that there is higher take-up in the cities than there is in rural areas, which is what I would have expected. Vaccine uptake is below 50 per cent in areas that are occupied by students. Is it possible that that figure is skewed by the fact that many students who were resident in, for example, Edinburgh, went home during Covid and got their shots there? Does the data mask a better situation than the analysis suggests?

Stephen Boyle: The transient nature of student populations is very likely to be a factor—in particular, in relation to whether they registered with a practice under their student accommodation address or under their parents' address, and where they would expect to receive their vaccine. Given that we are so far through the first and second stages, the matter is important for individuals. That is probably one of the learning points for NHS boards to tackle.

Overall, roll-out of the vaccination programme, in which more than 90 per cent have had their first dose and marginally less than that have had their second dose, has exceeded expectation, which was initially that about 80 per cent of people would get vaccinated. It is important that those points are explored further.

Colin Beattie: As you have highlighted, vaccine take-up has been lower in some groups of the population than it has in others. Your briefing states that the Scottish Government is taking action to address that lower uptake. What action is being taken and is it sufficient?

Stephen Boyle: Leigh Johnston might comment on steps that have been taken on specific groups. Whether the Government's actions are sufficient is a question that we will return to in order to make a judgment for the overview report and beyond. We will return to the question of what steps have been taken in relation to younger people, economically deprived communities and ethnic groups.

Leigh Johnston: I do not have access to the SPICe paper, so I cannot see the data to which Colin Beattie referred. Our briefing does not break down the information by local authority area, either. Our breakdowns are based on population estimates, which is the denominator that is used to calculate the statistics, so there will always be a slight margin of error. For example, we say in the briefing paper that 100 per cent of over-60s have been vaccinated, but there will be a small margin of error because we know that probably a few over-60s will not have taken vaccine. This is about the population estimates that statisticians use to

calculate the figures, in which there can be a small margin of error.

On targeting groups in which uptake has been lower, we say in our paper that the Scottish Government undertook a health inequalities impact assessment of the impacts that the vaccination programme would have on different groups. There are detailed recommendations in that assessment on actions that should be taken.

Colin Beattie: Has that impact assessment been published yet?

Leigh Johnston: It has not. As you can see in our briefing, we recommend that it should have been published—

Colin Beattie: Do you know why it has not been published?

Leigh Johnston: You would have to ask the Scottish Government that question.

Colin Beattie: Back to the action.

Leigh Johnston: The assessment includes details on messaging and how to reach different populations. We have recommended improvement of data collection so that the Government can understand the groups in which there is lower vaccine uptake. We talked about data a lot. The data was not that good, but there have been improvements in understanding why that was the case, and there has been work with various organisations to ensure that the messaging for different populations is right, and on improving the accessibility of information.

NHS Inform now provides information in lots of languages. There is assertive outreach to different communities, including the Gypsy Traveller community, the homeless community and the Polish community, for example. There are also mobile clinics that go to the places where the populations with lower uptake are—churches for the black community, for example—to deliver the vaccine.

The question of how successful the initiatives have been is difficult; I do not think that we will ever have quantitative data to show the difference that they have made. It is difficult for us to know what has changed people's minds or has tipped the balance to make them decide to take up the vaccine. As I said in one of my earlier responses, Public Health Scotland is conducting on-going surveillance of the data, of the differences that initiatives are making, and of where it needs to take targeted action, when there is lower uptake among a certain population.

Yesterday, I was reading an article from Voluntary Health Scotland, which represents third sector health and social care organisations. It was discussing the fact that NHS Forth Valley and

NHS Fife have been able to show that assertive outreach to the homeless population and to the Gypsy Traveller population has succeeded in getting people who have never engaged in any kind of vaccination programme to take the Covid-19 vaccine. The feedback is anecdotal and qualitative, but we have had some successes in encouraging people. We do not know whether we will ever have quantitative data. With better data collection, however, we now have a baseline to work from.

Colin Beattie: Have any NHS boards developed their own health inequalities impact assessments?

Leigh Johnston: Yes. the Scottish Government has not published the data, so it is not publicly available, but as far as we are aware it shared it with health boards, so that they could develop their own health inequalities impact assessments.

Colin Beattie: Have they done so?

Leigh Johnston: We have not done detailed work on all NHS boards, but we know that the Scottish Government encouraged them to do their own health inequalities impact assessments.

The Convener: I am reminded just how important these questions are by the evidence in your briefing paper. Exhibit 2 shows us in very clear terms the difference in outcomes for those who are unvaccinated and those who have received the double dose. For the record, the number of unvaccinated cases recorded is almost two and a half times the number of fully vaccinated cases, and the number of hospitalisations is three times more for the unvaccinated than it is for the fully vaccinated. Sadly, the mortality rate for people who have not been vaccinated is five times higher than the rate among those who have been fully vaccinated. Matters of inequality, ethnicity and deprivation feed into those outcomes. Do you want to comment on that?

Stephen Boyle: Those are incredible statistics on the efficacy of the vaccine, from tracking progress between March and September 2021. One caveat relates to the rationale for the booster programme, which is that we are led to believe that efficacy perhaps wanes.

The point is well made, however. Groups in society that are not accessing the vaccine programme would already be facing health inequalities, which will be exacerbated by their not accessing the vaccine. That makes it all the more important to emphasise the need to extend and continue the push among those groups, so that everybody gets the benefit that the vaccine provides.

11:00

The Convener: The committee will reflect on the answers to our questions on the health inequalities impact assessment data and the fact that it has not been published. We will deliberate on whether we can make an intervention on that.

The final area that I want to ask about and which falls within your domain relates to planning and budgeting. How do you plan and budget in a situation in which a third party—essentially the JCVI—is deciding who the priority groups are, and the chronology of who should receive boosters and further access to vaccination programmes? Do you have any reflections on how well the Scottish Government, health boards and so on have responded so far in that environment? What will the future look like and what difficulties and challenges are posed to those who have to budget for and plan those vital services?

Stephen Boyle: This has undoubtedly been an incredibly challenging and complex programme to deliver, and the variables have been endless. Exhibit 1 of the briefing sets out some of the timeline and the major milestones; I stress that those are just the major ones and that many other events have taken place. That full-page exhibit sets out the events that have had to be anticipated and responded to. As you said, some have been oriented around the JCVI's clinical judgments on the timing, pace and roll-out of the vaccination programme. Clearly it is very difficult to plan and budget for all that. The finances have been dealt with differently to how they would normally have been dealt with, with the full costs of the programme being covered and not left to individual NHS boards.

My answer, I think, would mirror our overall judgment in the briefing: excellent progress has been made in delivering a successful programme, but challenges remain in delivery of the programme in the future, given the extent of the variables, the need for a permanent workforce and the importance of reaching all components and parts of Scottish society to ensure that everybody gets the benefits of the programme. Variables remain; for example, there could be further waves, further booster programmes or more clinical research on the durability and efficacy of vaccines. In the briefing paper we seek to provide an update and offer a snapshot while recognising that more reviews and audit work will be undertaken, beginning in early 2022.

The Convener: Thank you. The committee will look forward to receiving the outcome of that work, so I am sure that we will have more evidence-taking sessions on it in the months ahead.

I thank the Auditor General and his colleagues very much for coming along and taking part in this morning's very helpful session.

11:03

Meeting continued in private until 11:43.

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