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OFFICIAL REPORT AITHISG OIFIGEIL

Education, Children and Young People Committee

Wednesday 9 November 2022



The Scottish Parliament Pàrlamaid na h-Alba

Session 6

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EDUCATION, CHILDREN AND YOUNG PEOPLE COMMITTEE 27th Meeting 2022, Session 6

CONVENER

*Sue Webber (Lothian) (Con)

DEPUTY CONVENER

*Kaukab Stewart (Glasgow Kelvin) (SNP)

COMMITTEE MEMBERS

*Stephanie Callaghan (Uddingston and Bellshill) (SNP)

*Graeme Dey (Angus South) (SNP)

*Bob Doris (Glasgow Maryhill and Springburn) (SNP)

*Ross Greer (West Scotland) (Green)

*Stephen Kerr (Central Scotland) (Con) *Ruth Maguire (Cunninghame South) (SNP)

*Michael Marra (North East Scotland) (Lab)

*Willie Rennie (North East Fife) (LD)

*attended

THE FOLLOWING ALSO PARTICIPATED:

Councillor Tony Buchanan (Convention of Scottish Local Authorities) Claire Burns (CELCIS) Mike Burns (Social Work Scotland) Jackie Irvine (Care Inspectorate) Cameron-Wong McDermott (Children and Young People's Commissioner Scotland) Fraser McKinlay (The Promise Scotland) Iain Nisbet (Cairn Legal and My Rights, My Say)

CLERK TO THE COMMITTEE

Pauline McIntyre

LOCATION The Robert Burns Room (CR1)

Scottish Parliament

Education, Children and Young People Committee

Wednesday 9 November 2022

[The Convener opened the meeting at 09:30]

National Care Service (Scotland) Bill: Stage 1

The Convener (Sue Webber): Good morning, everyone, and welcome to the 27th meeting in 2022 of the Education, Children and Young People Committee. The first item on our agenda is an evidence session on the National Care Service (Scotland) Bill. We will hear from two panels of witnesses. I welcome our first panel: Jackie Irvine, who is chief executive of the Care Inspectorate; Claire Burns, who is the director of CELCIS; Councillor Tony Buchanan, who is a councillor on East Renfrewshire Council and the Convention of Scottish Local Authorities spokesperson on children and young people; and Mike Burns, who is assistant chief officer at Glasgow City Council and vice-convener of Social Work Scotland.

As you would expect, we have a lot of ground to cover, so we will move straight to members' questions, starting with Stephen Kerr.

Stephen Kerr (Central Scotland) (Con): As it stands, what does the bill do to fix something that is broken in what operates currently in children's services? I hope that that question makes sense. Perhaps Jackie Irvine could go first.

Jackie Irvine (Care Inspectorate): The issue for us is that the bill is a framework bill, and what is important is how it is interpreted and implemented on the ground, and whether that will improve things.

As the Care Inspectorate, our focus is on regulation and inspection, and, importantly, taking the opportunities that exist to drive improvement and supporting providers to do so. I understand that a lot of regulations will follow, and that detail will be very important.

I am happy to pass over to any other panel members who would like to answer.

Stephen Kerr: So, your answer is basically, "It depends."

Jackie Irvine: I think that, with everything to do with policy, it is a question of how we implement it and develop it. The Feeley report spoke about the need to have more consistent provision of care and support across the country so that we do not have a postcode lottery. How the bill is interpreted and implemented on the ground is key in that respect.

Stephen Kerr: Is there a way in which that could be done other than by including children's services in the bill?

Jackie Irvine: If children's services were not included in the bill, there would still be the impetus to have more consistent provision of care and support for adult and older people's services.

Our inspection evidence shows us that, regardless of the structure, there is a mixed picture. When we carry out a strategic inspection with our colleagues in a fully integrated area, we will find some good results and some areas where improvement is needed. Similarly, we might go into areas where children's services are not integrated into health and social care and see some very good results. We see the same mixture on both sides.

The important factors have been around leadership, how people use data and how people engage with children, young people and families in order to design services that meet their needs. There is not one answer on either side, but leadership, engagement and looking at what third sector partners can provide to meet needs in an area are all important.

I hope that that covers it.

Stephen Kerr: It does. That was very clear thank you for that. Claire Burns would like to come in.

The Convener: Thank you, Stephen—you were reading my mind.

Claire Burns (CELCIS): To follow on from what Jackie Irvine said, I think that the NCS has the potential to deal with some of the issues and challenges that we have in children's services but, at the moment, we know only that it has the potential to do that. We do not have the detail to enable us to say that it will allow us to manage some of the big challenges that we have and that were outlined in "The Promise".

One of the things that concerns us—it certainly concerns the sector—is that there seems to be an underlying assumption that structural change, in and of itself, will bring about those changes, and I think that it will not.

Although the Feeley report was about adults and older people, it also made clear that changes in that area require us to look at the evidence on what makes change happen. There is a focus on stage-based and science-based approaches to change, improvement and implementation. Unless we pay attention to those things, and regardless of what decision we make, we will not get the changes that we aspire to.

Stephen Kerr: So, irrespective of structure, the change management that you describe is down to leadership, which is exactly what Jackie Irvine said.

Claire Burns: It is down to a number of things and we can talk about what those are later, but leadership is absolutely critical.

Stephen Kerr: Outline the big challenges in children's services that the bill could be the means of meeting.

Claire Burns: Two or three things were absolutely prominent in "The Promise". Families tell us that they get to a crisis before services step in to help them. We want wellbeing concerns to be recognised and managed at an earlier stage, and through universal services if that is possible. Families find a lot of the services that we have at the moment to be quite stigmatising. Help should be given where it is safe to do so, and we need social work to come in at times, but we must ask how we can build on universal services so that we notice wellbeing concerns, assess them and put services in at a really early stage.

"The Promise" was also really clear that we must be able to keep children with their families or with their kin, where that is possible, because that is the best thing for them.

We need more investment in universal services and in acute services.

Stephen Kerr: A lot of that comes down to having trained people on the ground, which goes back to Jackie Irvine's point. Early preventative intervention is often about being able to read a situation and knowing what to do next.

Claire Burns: We have a workforce that is absolutely motivated to do that, but we are not good at putting in the structures, training and coaching capacity to allow them to do that. The legislation that we have at the moment is layering on task after task. We should simplify that and give our workforce the support that the evidence tells us will make a difference for families.

Stephen Kerr: Reorganisation is not salvation. Having good people on the ground—

The Convener: Thank you, Stephen. Councillor Buchanan wants to come in.

Stephen Kerr: I am having a very interesting conversation with Claire and am grateful to her.

The Convener: Councillor Buchanan, would you like to comment on Stephen Kerr's questions?

Councillor Tony Buchanan (Convention of Scottish Local Authorities): Absolutely. You will

find that most of us are going to speak along similar lines. Key to all of this are the children themselves and the outcomes. Prevention is the best way to ensure that those outcomes are positive. All local authorities operate on the basis of getting it right for every child, but that can be done differently in different areas. I do not subscribe to the theory of a postcode lottery. What someone needs in a rural area might be different from what someone requires in a very urban area.

Every local authority works to get the best outcomes for the children in its area. As has been touched on, that means pulling together universal services. This is not just about social care and social work; it involves housing, working with the family and education. It is about bringing all those things together. The best way to do that is to do it locally, in communities, and through local authorities, because they are best placed to deliver those services and to meet the other challenges that can often impact on the outcomes that we are looking for.

Stephen Kerr: We will come back to interfaces. You are making a case for the status quo and saying that there are 32 different models for good reason.

Councillor Buchanan: There are not 32 different models. A lot of the models are the same, but there will be aspects within them that are based on local needs. That flexibility has to be there.

Stephen Kerr: That needs to be in the bill. Mike Burns, what do you think?

Mike Burns (Social Work Scotland): I should clarify that I am representing Social Work Scotland. I am the assistant chief officer in Glasgow, but I am here to represent Social Work Scotland.

In some respects, your question indicates a sense that something needs to be fixed. From my point of view, there is a really positive story to tell about children's services and the partnership that we have had with the Scottish Government. There are positives, such as the implementation of the work of the Christie commission, or getting it right for every child, which is a real credit to the Parliament and continues work that had happened previously.

There is also the Promise, which is a piece of work that took four years and identified a 10-year plan. Within that, Parliament has done significant work on issues such as health visiting. Glasgow has dealt with the issue of integration. We have gone from having 150 health visitors to having 274 and have seen a significant reduction in children coming into care. Five years ago, 105 children came into care. That figure was down to 40 last year and this year is 19. There has also been investment in family nurse partnerships, in the Promise and in kinship care. In my city, there are 1,032 children in kinship care, at a cost of \pounds 11.1 million. There is a lot of really positive co-ordinated work.

Stephen Kerr: Do you just see risks in the bill?

Mike Burns: I do. It endangers the evolution that we have seen. I have been involved in children's services in Scotland for 36 years. I spent 16 of those years in senior management and seven in the very intensive arrangements that we have had. Nine local authorities have approached us to consider some of our best practice, but whenever we work with those other organisations, we also learn about what they are doing.

Stephen Kerr: Why is there a risk? Why do you see downsides?

Mike Burns: It takes time to evolve integrated arrangements. At times, there is an eagerness for a quick fix or a quick win, but you have to look at things over a 10-year period. I keep saying that, in my experience, things do not happen within the financial year. We must work for five, 10 or 15 years, which is particularly difficult for young managers, but that is where real change comes about.

Stephen Kerr: That is very difficult for politicians, too.

Mike Burns: Indeed. We recognise the pressure that politicians are under on occasions. We have had tremendous support from the Scottish Government, elected members and the integration joint board, and we have gone from having 1,413 children being looked after and accommodated five or six years ago to currently having only 703—we have reduced the number by 710. We are on a journey.

Stephen Kerr: Your argument is very similar to that of Tony Buchanan.

Mike Burns: The points that Jackie Irvine, Claire Burns and Tony Buchanan made all align with the direction of travel that we would want.

The Convener: Stephanie Callaghan also has some questions on this topic.

Stephanie Callaghan (Uddingston and Bellshill) (SNP): Are there are elements in the bill that provide opportunities to address existing inequalities and to improve accessibility? Jackie Irvine might be able to pick up on that.

Jackie Irvine: We inspect and regulate from cradle to grave. We have been asked to speak today about whether children's services should be in the national care service. I can speak as a social worker who has been a manager and, importantly, on the basis of what the Care Inspectorate finds.

We look at family situations. There can be several practitioners going into a family because of a range of different needs and support requirements. There can be adult services as well as those for children and perhaps services for mental health or addiction. It is important to meet the needs of the family and-this fulfils some aspects of the Promise-it is about working together with that family and doing that in a consistent, family-focused way. Adult services and adult practitioners who go in should work in a family-focused way and share information to support the whole family. That is the key, and it can be key to how people work in local areas. We see that when we look at integrated structures and when we look at structures that are not so well integrated.

Transitions are also important, not only between age bands but from children's to adult services. Those should be closely planned for and seamless and the family should be clear about what their options are.

Stephanie Callaghan: As I understand it, there will be changes to children's services, depending on where those services sit now—whether the structure in place is an IJB or a lead organisation—and regardless of whether those are included in the national care service. Are you saying that, on balance, including children's services would be more positive than not doing so?

Jackie Irvine: It certainly could be. We have all spoken about the fact that the structure is not the same across the country, so not everyone has children's services within their health and social care partnership.

09:45

I take Mike Burns's point. Any change—there will be more change in some areas than in others—needs to be carefully managed in order to keep the consistency and to not create gaps.

Stephanie Callaghan: Is statistical information part of that as well? I know that it is gathered in different ways, and that different information is collected in different local authority areas.

Jackie Irvine: Certainly, you would want to monitor that. When I said that the way in which the bill will be implemented on the ground will be important, I should have added that the way in which it will be resourced and monitored on the ground is important, too; there needs to be close monitoring. The Care Inspectorate has such a role in terms of regulation, inspection, scrutiny and providing assurance. We would look to be as enthusiastic about and as committed as possible to supporting care services as well as inspecting and providing assurance to the public and the Government, no matter what the structure or the arrangement. Currently, we work across a complex structural landscape.

Mike Burns: There are a number of issues for me in the point that Stephanie Callaghan raised about addressing inequalities. At its very heart, integration was always about addressing inequalities. The point of integration was to make sure that the people who are most vulnerable and most in need get a much better and more coordinated service than they received in the past. From that point of view, there is a much greater shift towards strength-based and trauma-informed relationship practice, which we have seen with family nurse partnerships and health visitors in terms of the universal pathway. There is a criticality there that recognises need.

It was interesting that Audit Scotland's 2018 report recognised the need for continuity of leadership and structures. We are looking at where there is consistency so that we can then create cohesion and a vision for a locality that can drive change.

I will pick up on the other point that Stephanie Callaghan made about data and the criticality of, for example, people in education talking about inspection and getting to named children, which is something that we have talked about, too. We have talked about how we get to the point at which we know that we are making the kind of impact that we need to make on children's lives and outcomes. Councillor Buchanan made a similar point.

The Convener: I have a follow-up question, and I am not sure which of the panel members is best placed to answer it.

While the national care service is being designed—and we hear a lot about that: it is being co-produced, and a consultation will take place where should the Government's forward planning focus be? That is a bit of a vague question. Where should the Government's focus be while it is designing the national care service? The Government still has to provide children's services while the NCS is being designed, so where should the Government's focus be in relation to existing children's services?

Mike Burns: It is still about getting it right for every child, the delivery of the Promise and tackling child poverty. It is about recognising that we have a cost of living crisis and that there is anxiety and fear for families today, tomorrow and next week. No matter how stretched our services feel, we need to be up to the challenge. We need to focus on how we get children, young people and their families through the next six months, so that we are in a position to capitalise on what I think are the good foundations that have been built in Scotland.

Claire Burns: I think that there are two critical things. First, we need to look at issues around the workforce as we come out of the Covid pandemic. This sounds an obvious point, but it is one that is worth making: any of the changes that we want to make to children's services or the aspirations that we have for them will come through the workforce. People in the workforce will say or do something different with individuals or families. The Social Work Scotland report "Setting the Bar for Social Work in Scotland" refers to a 30 per cent reduction in the workforce. Unless we think about the critical issues that we have in the workforce, we will not achieve the changes that we aspire to.

The other thing that we need to focus on, to which Mike Burns alluded, is that the issue is about not structure but how we continue to support practice. What does that practice look like? How are we specific about it? How do we provide the coaching and training for it? The point about data is about asking whether there is good fidelity to practice and a related positive outcome.

Willie Rennie (North East Fife) (LD): The change of tone was interesting. You got really passionate about the issues that you face. It is encouraging that that is where your passion is.

What do the proposals for reform do to the individual staff members that you work alongside? Are those staff worried about their jobs? Are they worried about what their position will be? If they are already running a service, are they worried that they might not be doing that any more? What does that do for tackling the issues that you have just spoken about passionately? Perhaps Mike Burns could answer that.

Mike Burns: We have been surprised by the lack of impact on the front line. Picking up the point that has been made about the pandemic, I note that there is a critical issue with capacity. I do not think that the front-line staff—in particular, front-line health visitors, school nurses, social workers and specialist children's services staff—are focusing on the bill. You are right, Mr Rennie, to say that they are focusing on the critical situation that exists here and now.

Senior managers are strategically beginning to think through what the implications of the bill will be. I go back to some of the issues in the Audit Scotland submission and some of the points that we make in ours. It takes time to build capacity, and changes to practice do not happen overnight; they happen with good supervision and capacity building. At the moment, we think that some elements of children's services are on a good path, supported by the Parliament and local members. We say that the bill will disrupt that. It is already disrupting it, because it is taking time and attention away for all the preparation and planning that we have to do.

Scotland should allow for evolution and build on the foundations that we have. We are rightly proud of them. Nobody disagrees with the Christie commission report. Nobody disagrees with the getting it right for every child approach, and particularly the focus on the most vulnerable. Nobody disagrees at heart with many of the aspects of the Promise. Let us get on with that and with that direction of travel.

Only yesterday, I spoke to heads of service who said that they feel strongly that the service is really fragile. They are at a real tipping point on capacity. There are also issues, which I think members are in tune with, in relation to the health service, such as the pressures on junior doctors and nursing. All those workload issues relate to our young social workers.

The Convener: That theme leads nicely on to our next line of questioning, which will be led by Michael Marra.

Michael Marra (North East Scotland) (Lab): The bill is about creating a national care service. My understanding is that social work and children's services do an awful lot that is not about formal care. Will you explain the breadth of the proposal in the bill and say how much of it goes beyond care? We have heard a bit about prevention, but it would be useful to hear more.

Mike Burns: That is a really good question. At times, in local government social work, we get frustrated that we are defined by child protection and by risk and removal in relation to looked-after children. Social work moves us more into considering kinship care and children with disability and providing early help and support. We want to step in at a moment of change for a parent or a family. That, critically, leads us into a position of integration.

We can look at some of the arrangements that we have in Scotland—for example, there are very good relationships with health visiting. Going back to a point that Jackie Irvine made, I note that we need to have that level of integration with education. We need to be working hand in glove with education and with Police Scotland. Last week, we were at a conference where Police Scotland chief superintendents were saying, "We want to be firm on crime, but for 99 per cent of the time we want to be compassionate." I thought, "That's fantastic—imagine working in a country where that is what is coming from our police force." We want to be in a position where, to pick up Jackie Irvine's point, we are building collaboration with the third sector. I go back to what has been said previously. If there is to be a single, wholesystem approach, we have to operate in that way.

In my local authority, the population of those aged from zero to 18 is 110,000, and around 10,000 of those kids are open to social work. For one in 10 kids, it is not about taking a narrow position in relation to child protection or even looked-after children or kinship care; it is about considering complex needs, neurodevelopment and a range of ways in which we can engage with families. The most critical task that someone will do in their life is to parent. In a sense, we have to get alongside parents so that we can do that work from pre-birth and from to age zero to two. We know that that is the golden area, and that is our direction of travel.

Michael Marra: Councillor Buchanan, is there a risk that children's services could become defined by the idea of care rather than necessarily by work around prevention?

Councillor Buchanan: There is a risk. I think that it is fair to say that most local authorities have taken that view.

I will speak in part about my local authority and some of the work that we have done. We had integrated services even before IJBs were thought of, if you like. Very early on, we started to look at removing the silos that often exist in most areas of work. We started to break those down, and that is where we touched on the family issues. We created what we called a family firm in which we looked at education and housing.

As Mike Burns touched on, among the key aspects of a child's welfare, the most important element is the family—the parents. If we can provide the parents with the skills that are required to ensure the upbringing of their child, that is often preventative, because it saves further involvement from social work or anyone else and, one would hope, it prevents things from getting to a stage at which the child may move into adult services. If we can get it right there, we stop the problem before it becomes a problem.

That is about breaking down silos. As Mike Burns touched on, it is not about social work saying, "We're here for one aspect only." It is about the whole process of working with a family and ensuring that the child is safe and loved and brought up in an environment that helps them to grow. That is key, and it involves a number of areas across the board including social work, education and teaching staff, the third sector, third parties such as the police, and so on. All those organisations can play a part. In my view, the best way to do that is not just locally, but via local government, which is best placed to deliver those services.

Michael Marra: Claire, you talked about defining the problems and about families who get into crisis before services step in. That is the preventative space. It does not seem to me that that is a care issue. Is it appropriate, therefore, for those services to sit within the national care service? That is going to be a huge service and it will be dominated—rightly, I think—by the huge problems in social care that we have in this country. Is there a risk that what we are discussing will become a Cinderella service or, even worse, that some of the prevention issues will be ignored entirely?

Claire Burns: Yes, but some of those issues will exist whether or not we are in a national care service. It comes down to the question of where the best place is to support this practice. As Mike Burns said, we are on the right road in Scotland and we have some of the necessary conditions in place. However, families tell us that there is still work to be done, even within the existing structure, to ensure that the functions and services exist. Even the co-location of education, health and social work will not necessarily produce an experience that families find really positive. There is still work to be done.

We have done some work in Dundee, where the service tried to do that very thing. It said that families were saying, "You're not responding at the point at which wellbeing needs are being flagged", and it asked how it could do that. We said, "You've got team around the child meetings", but it said, "Yes, but families are telling us that they don't really understand what is happening and they feel stigmatised", and teachers were saying, "I don't feel that I have the confidence to do this."

We worked with them to build what that practice could look like and look at how we could use data to see whether there was fidelity in the practice and what the outcomes were. It is not about the structure. It is about how we focus on that sort of practice.

10:00

Michael Marra: One of the principal interventions in Dundee, which is my home city—

Claire Burns: I am glad that I chose that example.

Michael Marra: Absolutely. I am always happy to talk about Dundee, as my colleagues will confirm.

Dundee City Council has put family support workers into schools. That is not an issue of care—it is not about children being taken into care. Will that practice be put at risk if the whole process is housed in a national organisation that separates itself out from local authorities? Perhaps we can hear from Claire Burns and then Jackie Irvine on that.

Claire Burns: There is potential for the proposal to be positive if we do it in the right way, but there is also potential for us to sever some of the relationships that already exist.

I do not want to suggest that families are saying that everything is fine in the current structure, because we know that it is not. However, where there are good relationships—for example, where there is co-working between education and social work—people tell us that it builds relationships and information sharing. You are right to suggest that there is potential for that to be severed unless we put all the structures, practice and capacity in place in the NCS. At the moment, the sector is not reassured that that will happen.

Jackie Irvine: We are talking about care without really defining what we mean by care. The interpretation has been that it is about formal care and accommodating children. However, we know from inspection and practice that children do not just pop up in the child protection arena. There will be a history before that, and universal services will have worked with them. The Promise asks us to deliver by working in a different way to support those children, and to take some risks to keep them in their communities with support wrapped around the family. From that point of view, it is essential that adult services and children's services work together, including those in the third sector and universal services such as health visitors and family support workers.

I do not see any of this dividing children's services. Either those services will go into the national care service or they will be outside it. However, both alternatives will mean a change for most local authorities. If an authority is currently integrated—as in Glasgow, which Mike Burns mentioned—pulling children's services out of that and keeping them with the local authority will cause disruption. Where children's services are not integrated in the local authority and they are taken into the national care service, that will also cause disruption. There will be change no matter what.

We need to take every opportunity to help providers to drive improvements. We say that, every time we touch a service in inspection, a previsit or self-assessment, we are assisting it to see where it needs to improve and to use data to do that and rely on in its planning.

I go back to a point that was made earlier about the current issues. We cannot get away from the fact that providers are struggling with staffing and the rising costs of providing their services. Everyone is struggling with the economic crisis, and that is putting them under pressure.

We need to consider the amount of change that is happening. I can talk only about my staff group, but I am trying to keep them focused on the job that they are there to do under the Public Services Reform (Scotland) Act 2010 and the Public Bodies (Joint Working) (Scotland) Act 2014. They have a legislative duty to regulate, scrutinise, inspect and support people in their improvement journey. I cannot speak for other services—I could have done that a few months ago, but not now.

With any change, there is a need to try to keep focused on the core job of children's services. When we experience change, it is important for leaders, managers and senior officers to try to support their staff through that change, which can mean different things for different authorities and partnerships.

The Convener: Bob, would you like to pick up that line of questioning, please?

Bob Doris (Glasgow Maryhill and Springburn) (SNP): Absolutely, although I have a supplementary question first that follows on from Mr Marra's exchange with the witnesses. I am a wee bittie concerned about the idea of the national care service potentially leading to people working in silos, with less communication. I hope that I can get some reassurances on that.

My understanding is that, way before health and social care partnerships and integration joint boards were a thing—we are now moving, potentially, to a national care service with local care boards—the police, social work, housing, third sector, schools and childcare were all talking to one another as best practice anyway. Sometimes, the practitioners say that, irrespective of the structures that are put in place, they will get on with delivering best practice. The question is whether the structures facilitate and support that best practice and drive consistency.

The committee has to decide whether a national care service is the best thing to proceed with. I suppose that I am looking for reassurance that, irrespective of whether it goes ahead, you are confident that that best practice, which I saw happening in Glasgow before health and social care integration and before we had spoken about a national care service, will continue. Mr Burns spoke eloquently about some of the progress that has been made in Glasgow.

What reassurances can you give that the concern about silo working might be a wee bittie of a red herring? Can there be some reassurances?

Mike Burns: You point to the fact that there is a long history of what it means to be integrated. As Claire Burns said, it is not about structures. The

issue is about culture, ethics, values, principles and the way that we work collectively together. The points that we are making about what is critical in relation to practice are equally critical in relation to leadership and the strategic direction of travel. It is important that everybody owns that.

It is interesting that, even in periods when we have had different elements of integration and changes have taken place, workers, team leaders and service managers on the ground have continued to work really closely together. That goes to a point that Claire Burns made. Getting it right for every child and the team being around the child become critical factors. Integration and people working together as a multidisciplinary team become key to achieving good outcomes for children. The areas of work are very rarely done singularly.

Bob Doris: I want to ask the other witnesses this question as well but, Mr Burns, do you believe that that will still happen anyway, irrespective of whether we move to a national care service? It is not necessarily about whether that move is the right or the wrong thing to do, but can you give us a reassurance that you think that that kind of working will continue to take place? There has been a suggestion that it might not.

Mike Burns: I think that it will continue—

The Convener: Bob-

Mike Burns: Sorry.

The Convener: No, that is fine. Bob, I note that Jackie Irvine wants to comment as well. I just want to make sure that we can make some progress.

Bob Doris: Apologies.

Jackie Irvine: It comes back to the fact that, when we go into an area as care practitioners, we obviously need to understand what the structure is, how partnerships are set up and what defines them, but what we are looking for is exactly what Mike Burns mentioned. We are looking for services to work closely together and wrap around the family—I keep referring to family services as the poster child, because they are key—and for leadership to work collectively to share those values and responsibilities, and sometimes to pool resources, which is always helpful in relation to the direction of travel for children's services partnerships.

What we look at is not whether we think that the structure is right, but the impact on the family—the child and the parents—and whether its position is improving. To be honest, that depends on very local arrangements.

Regardless of where we sit and what might come out of the proposal for a national care service, there will still be an absolute requirement that social work holds dear, which is to work alongside our colleagues. I think that someone mentioned the range of that, but it goes beyond education to include other areas, and particularly housing and the third sector. That requirement is almost the raison d'être of how people work in social work. It is how we were trained and how a social work manager would expect the work to be carried out. That is also connected to prevention. For me, this is not about structures; it is about impact.

The Convener: Bob, please move on to your questions on kinship.

Bob Doris: Absolutely, convener.

The bill is a bit vague in some respects: it is a framework bill with lots to be fleshed out. The situation for looked-after children in kinship care in Glasgow is an issue that I know well, and I know that Mr Burns has been actively involved in that over the years. We have come a long way from the days when Adam Ingram was the children's minister and Steven Purcell was the leader of Glasgow City Council, when huge strides were taken across Government and across parties. As I understand it, looked-after children who are in kinship care relationships in the community now get the same rate of support as is given to foster families, but that rate differs across the country, with each local authority paying differently.

There is an opportunity—though it comes with a price tag—to ensure that there is consistency of financial and other support. With commissioned services such as the Notre Dame Centre, which provides a wonderful service in my constituency for people in Glasgow and across the west of Scotland, it is not clear where the funding comes from. Sometimes it is from the NHS, and sometimes it is from an integration joint board or various local authorities. It comes in tiny little pots of cash.

There is no consistency of financial support or of commissioned services for children in kinship care. Are there opportunities to change that within the national care service? That is important to me, so I would like to know people's thoughts on it.

Councillor Buchanan: I can perhaps shed some light on that. The payments vary, but that is often because of different structures. For example, for some children, there is a core payment that will include payments to assist with holidays, birthdays or other additional spending, whereas those payments are made separately for other children, who get a basic payment and then have additional payments to cover those items. There is no one size that fits all.

Bob Doris: There is a lack of consistency.

Councillor Buchanan: There may be.

Bob Doris: There definitely is.

Councillor Buchanan: That would have to be looked at. Local authorities make different payments and we would have to bring all of that together.

The Convener: Bob Doris is asking whether there is an opportunity to create consistency across the country so that people are valued in the same way no matter where they are a kinship carer or foster carer. Is that where you are going, Mr Doris?

Bob Doris: I am asking not only about finance but about the quality of the commissioned specialist support. It is sometimes commissioned through the NHS, sometimes through integration joint boards or individual local authorities and sometimes through education services. One provider might have a patchwork of funding. That happens not just in Glasgow but across the country. Something clearly needs to be addressed. Whether the national care service addresses that is another matter, but there may be an opportunity for the national care service to address some of it.

Mike Burns: There are several critical issues there. You highlight the importance and the contribution of kinship care. That has been a game changer in assisting children to stay with grandparents and to stay in the school that they are in and with the friends that they have. It gives them a degree of stability and continuity.

I understand that there is dialogue about that at the moment. I am looking at it in connection with issues with foster care fees and allowances. The Equality and Human Rights Commission helpfully supported having an equal approach, and we have done that in Scotland. As I said, that involves 1,032 kids and is to the tune of £11.1 million, which is a fantastic direction of travel on the issue that you raise.

You also alluded to the need for consistent and co-ordinated support for kinship carers. We would want to do more on that, as there is a gap in that regard. That is the direction of travel that we want to take.

10:15

Similarly, on another point that you raised, when we looked at the issue in Glasgow, we found that we were spending £95 million on care, and we were spending £42.3 million a year on 239 kids. The financial analysis also showed that we were spending £2.7 million on prevention. Everybody looked at that and said that we needed to shift to the approach suggested by the Christie commission. That figure has moved up from £2.7 million to £6.9 million, which does not sound like a lot, but it has been hard graft to get there. That will be supplemented by the whole family wellbeing fund, which is going to come in through the Promise, at £4.66 million. We have aligned that to the £1.7 million of mental health money that we have been given, which is some of the underspend.

You raise a really helpful point that, if we have a whole or single-system approach, we need a way of working that sustains the third sector with a three to five-year funding position. That would also allow third sector organisations to address the points that Claire Burns raised about consistency of practice and consistency of early help and early support. We have also looked at the position with regard to community planning. There is a need to ensure that all that money is dealt with in a coordinated way. However, my sense of that is in the context of local need, which is something that Councillor Buchanan raised.

The Convener: We move to questions from Willie Rennie.

Willie Rennie: I thank the witnesses for their clear evidence. I will ask about the interface issue, which you have kind of addressed already. There is a multitude of interfaces with the police, education services and various other bits. You have kind of answered my question on that, and the answer seems to be that the people who you work with are professionals who are trained to work together—in the way that Bob Doris outlined—and who will overcome any of the barriers that politicians frequently want to put in their way. That seems to be—[Interruption.] I am sure that that is what Bob meant. [Laughter.]

I really want to know whether any members of staff who you work with are crying out for this change and saying, "We must have a national care service to overcome the problems"? Is that happening?

The Convener: Who would like to go first on that? The answer can be yes or no.

Claire Burns: I think so. Some of my colleagues here work more directly with staff. The important point is that most staff would say—particularly on the back of the Promise—that what we are doing for families at the moment is not good enough and that there needs to be some kind of change. They recognise that, but they are concerned about going into the unknown and the idea of unpicking everything. We do not have enough detail to say that the level of disruption will be worth it in terms of where we get to. Why not strengthen what we are doing at the moment?

Willie Rennie: You highlight the fact that, of course, you are all talking about change—Mike Burns just talked about trying to up the spend on prevention versus other spend—and you are

constantly changing, but is it structural change that staff are crying out for?

Claire Burns: No. We have all been through local government reorganisation and so on, and staff recognise that changing structures in itself will not create the changes that we want. Staff recognise that it is much more complicated and nuanced than that. It relates to Mr Doris's point about kinship carers. We need to be able to invest in children's services, but, if there is no further investment, any change in structure will just be more disruptive.

However, as Mike Burns pointed out, that is not to say that everybody thinks that the system is fine, because the Promise told us that it is not. Therefore, we need to build capacity and strengthen what we have or make the commitment so that people will be reassured that the issues that we have at the moment will be addressed in the national care service. However, at the moment, they cannot be reassured about that, because that level of detail does not exist.

Willie Rennie: Tony, have you come across staff members who are crying out for this change?

Councillor Buchanan: No. The response has been quite mixed. All staff members want to do their job and to do it better—that is a given. In that environment, more often than not, they want to be able to deliver more. They are doing fantastic work. A huge amount of very good work, which is often not highlighted, goes on day in, day out. Every hour, there are successes on the part of staff who are working across the board. The big difficulty that they have is that they know what works well and what they would like to improve on, but they need the resource and, indeed, the staffing to do that—not just the finance. That is critical.

That does not necessarily mean that it has to be centralised or anything else; it means that there is a need there. Staff know what that need is and how to address it, but they do not have the resource, the finance and the staffing to take the good practice and broaden it out. That is one of the key issues that staff have. They fear not being able to do enough because they are hindered by those blockages.

Mike Burns: I think that the answer would be no, to an extent, but there is a recognition of the point that Claire Burns made.

As far as the dialogue with the 32 chief social work officers is concerned, there are challenges in relation to scale and in relation to rural areas and the islands, and we are keen that those issues are carefully considered.

I have worked in six local authorities in Scotland, including the smallest and the largest. At

times, I am accused of perhaps being overly optimistic and positive. There is a need to recognise that not all the enabling conditions are the same. I think that there is a recognition that scale is important, but capacity is critically important, and consistency and leadership are important, too. The workforce issue varies significantly across the country, and there is a bit of resentment about the position in Glasgow, given our ability to recruit relative to other areas. There is a feeling that the national social work agency should be looked at positively as a mechanism to really lift recruitment, training, coaching, quality, supervision and consistency.

I go back to the point that people are getting on with the day job at the moment, but those issues have undoubtedly exercised the chief social work officers.

Jackie Irvine: I have a couple of points about the context of what we are dealing with just now, which Mr Rennie touched on. We know—this is becoming more apparent in the data—that, as we come out of Covid, the demand is going up. As you will have read, the mental health and wellbeing demands are going up for parents, adults and children.

We hear from our providers that the demand at the front door is going up. At the same time—Mike Burns touched on this—there is a workforce issue. We have a history of rural and island communities struggling to recruit. That is almost just part of Scotland, is it not? However, over the past few weeks, I have heard that providers are struggling even more to recruit in the big cities and the central belt.

To go back to the beginning of our conversation—I think that it was Claire Burns who made this point—the issue is about the workforce that delivers the service. The committee wants to discuss the technicalities of the bill and what goes where, but it cannot do that without looking at the current context and the challenges that we face. When I say "we", I do so in support of my providers and the partnerships that we inspect.

The Convener: Ruth Maguire has some questions.

Ruth Maguire (Cunninghame South) (SNP): Good morning. I have found this session really useful. Colleagues have covered a lot of ground.

I take on board the points that you make about the importance or otherwise of structure. We have experience of going through health and social care integration. Reflecting back on that and looking forward to potential change that is coming, I am interested in what lessons have been learned. Some of the concerns that have been raised about the bill are around the risk of disruption of services. From the perspective of children and families in our communities that need the services that are provided, what lessons have we learned through integration that can help us as we move forward?

The Convener: Who would like to go first? Claire, are you able to respond to that?

Claire Burns: I will pass that over to Mike Burns.

The Convener: That is fine.

Mike Burns: The point about reflecting on the experience of health and social care integration is an important one. Again, I go back to the political aspect of always looking forward.

One of the things that I reflected on in preparing to come here is that we do not always give ourselves credit for the decisions that we make and the work that we do that takes time to come to fruition. I would equally say that, in terms of the lessons on health and social care integration, Glasgow started that journey back in 2003. We moved from a learning disability integration position, in relation to moving from Lennox castle hospital, to seeing an opportunity with the health board.

As I said earlier, that kind of cultural change doesnae happen in a financial year. It happens over five, 10 or 15 years. I keep saying that there are some important lessons that I am learning at the tail end of my career that I wish I had understood and been passionate about 15 years ago. However, there is a point at which you say, in relation to the legacy that you are gonnae leave behind, that you want people to build on the foundations. You are no gonnae to give them everything sorted, but you are gonnae be able to say, "Have I built some really good foundations here, which lead us to a different position?".

We have had a 10-year journey on health and social care. Again, it perhaps goes back to some of the points that Mr Doris was making. The famous point is that governance then becomes important, particularly in relation to issues around clinical governance and working together, but also in relation to the finance, which is where a lot of the tensions in the system need to be worked through.

We have been really fortunate in some of our positions, but I know that that has not always been the case across the country. There are areas in which we would still advocate that we should bring forward best practice—look at what is working and where the challenges have been overcome and then replicate the best practice. Again, it is about saying that these things take time.

Ruth Maguire: Acknowledging that, can I press you for some examples?

Mike Burns: I go back to the point that I made earlier. In children's services, collectively, we got all the staff—there were 1,800 at the time—into a room and went through explaining where we had landed and where we were spending the money, which is also important. At times, particularly in social work, health visiting, school nursing and the Family Nurse Partnership, we tend to say that we will focus on practice, but the money is important in relation to what it delivers in outcomes. We needed to shift our position.

On Jackie Irvine's point about the Promise, that was about them recognising that 65 per cent of children who come into care in Scotland go home. That is a devastating bit of information to absorb as a professional, so, as Jackie said, we then need to move on. We need to take risks, support families and be in the position where staff at the front line know what the decisions that they make might mean. I have been there when things have gone wrong and, as I happen to have been saying over the past couple of days, you do not forget and you sometimes feel that you are sitting on top of a volcano. One case could lead to a situation in which people say, "I don't like his transformational agenda. I don't like the strategy or the Promise because of this one case."

In Glasgow, we know that we are on a journey and we know that it is not perfect, but there is a lot of good practice across councils in North Lanarkshire, Fife, Dundee and Aberdeen that we are learning from, which I think has been a byproduct of the integration approach. The evidence is there—that is one of the things that I strongly emphasise.

Ruth Maguire: Moving on to Tony Buchanan, my question is about how we protect families from risk. There will always be an element of risk with any change to services, so how do we best protect children and families as we move through the change?

Tony Buchanan: At the core, our aim is to protect children and families and to make sure that children are best supported with their families. All local authorities subscribe to that and it is a key aspect of the services that we deliver.

10:30

On the whole, integration has been very successful. Mike Burns touched on the fact that there is a huge amount of best practice in all authorities. Sometimes it might need to be pulled together a bit better than it has been, but the reality is that there is a huge amount of good work that is designed to protect families at source—that is, in their communities—with the services that they require to get them through any period of difficulty. That has been vital. Whether in relation to dealing with addiction problems or simply helping families to budget in the current crisis, all those aspects play a part in the everyday services that we provide.

I think that all local authorities are signed up to making sure that that works, and they will utilise all the services that we have mentioned in order to deliver that and protect families, because that is a key aspect and it is what we want as an outcome. Ultimately, if the outcome is both preventative and successful, it leads to a much greater outcome for the child.

Claire Burns: We need to strengthen the bit about alignment across the leadership and acceptance of the risk that we are taking, which does not just sit with individual social workers or with social work. Is that something that elected members such as MSPs agree with? Does the Care Inspectorate agree? I am sure that Jackie Irvine has been looking at it, but are the other organisations that provide governance and scrutiny aligned with that and are they signed up to it? It can still feel a bit mixed—and, at times, a bit punitive as well. We need that alignment so that staff do not feel as though they are sitting on a volcano. That is the form that the preventative agenda will take.

Ruth Maguire: That is helpful. Thank you.

Graeme Dey (Angus South) (SNP): I have been encouraged by the fact that our witnesses have avoided lapsing into the mantra, "If only you gave us more money, everything would be right." That is very welcome. I was worried that that might not be the case after I read the Convention of Scottish Local Authorities submission.

I also welcome the acknowledgement that you have all made that things are not perfect and that there is room for improvement. An area that I suspect we would all agree has imperfections is the transition from young people's services to adult services. How do we solve that long-standing issue if not through having a fully integrated national care service? If the issues in certain localities are to do with culture and approach and with not picking up on best practice, or stubbornly ignoring it, how on earth do we bring about improvement?

Is there not a logic to having children's services captured by a national care service when there has to be that read-across from children's services into adult services through the transition?

Tony Buchanan: There is a risk when things are moved too far away from the point of need, and I think that that becomes a big difficulty. From the point of view of COSLA and our service providers, that risk is best mitigated by things being dealt with locally, where we can tackle the local issues. We have touched on the differences that exist between rural and urban areas and so on. Different pressures and different aspects can come into play, so it is vital that there is that local aspect. From our point of view, the best place for the work to be done—and the place where it has been done up to now, with the delivery of some fantastic services—is in the local authorities.

Graeme Dey: However, that has not happened everywhere.

Tony Buchanan: All local authorities have their strengths and they will be managing that as best they can with the resource that they have. Best practice does get looked at and they try to cater for it as much as they can. It is therefore vital that we have the local touch.

We do not concentrate enough on what has been working well. We know that the reason why we are here is that there are gaps and problems. The question is how we fix those problems and how we are best placed to ensure that we can fix them. In our view, that is best done in local communities and in local government, because that is the closest place to the people who need the services.

Graeme Dey: However, that is where the problems currently exist. How can we bring about improvement? You are right to focus on the positive examples, but, with the best will in the world, we all know that there are negative examples as well. I go back to my original question. How do we fix that if not through changing the structures and the approach?

Tony Buchanan: We fix it by ensuring that we can deliver those services locally through coordinated working. That does not mean that we work in isolation; instead, government at all levels should be working together to ensure that it delivers on that. That would be one of the key aspects as we move forward. We need that link, if you like, to ensure that we can work with what the Government or you as the Parliament are seeing. It is the delivery vehicle that becomes the important aspect, and it has to be local. That does not mean that we are at odds with or disagree with people that work needs to be done; the issue is how we get round and deliver the service and produce those outcomes.

The Convener: Mike, do you want to come in on that?

Mike Burns: The question really focuses on the Achilles heel in all this and highlights an area that the Feeley report quite rightly picked up on, particularly with regard to children and young people who have complex needs—mental health issues, particularly addiction, learning disability and so on—and which we recognise is in need of significant improvement. A challenge that we face in some respects is what might be called a mismatch. One really positive thing about the Promise and the direction of travel is that we are now looking at our case loads and are working with a lot of young people who are 18, 19, 20 and up to 25. I liked the Deputy First Minister's comment with regard to children's services that we need to land young people in adulthood. Those of us with young sons or whatever will know that 25 is about the right age when we talk about people becoming adults.

When it comes to integration, I often say that I operate as the preventative wing of the mental health service, and an issue that I highlight in respect of transitions is saturation of need. Sometimes, you get a mismatch between the intensity of a care plan, particularly for children who have been well known to us for a period of time and with whom we work until they are 18 or 19 years and, indeed, up to 25, and how they then penetrate an adult service in which there is a different perception of risk, need and demand.

The Government has made really positive moves in that respect with regard to specialist children's services and children and adolescent mental health services; indeed, recent decisions on investing in mental health were made on the basis of our working with young people beyond 18 and up to 25. However, that sort of approach is going to take time. All of this has come to us on the basis of the Government asking, "Can you fix this?", and what we are saying is, "We can look at it, but it'll be a five-year job."

The Convener: Jackie, do you want to respond? After that, we will have to move on.

Jackie Irvine: The Care Inspectorate very much looks at transitions when we go into an integrated partnership and carry out a strategic inspection with other regulation and inspection colleagues. As Mike Burns has said, Mr Feeley made a recommendation in that respect, because he neither observed nor heard from people that there was a seamless transition from children's services to adult services, no matter at what age that happened.

Coming back to the local issue, I think that, no matter what happens with the national care service, people will still get their services locally. Those who live in Fife will not get their service from Aberdeen. However, more needs to be done about that seamless transition, because clearly there are differences in that respect.

I cannot say this for certain, but I think that, if the budget for adult services sits in one place and the children and families budget sits in another, it can—though not always—create a barrier to transition. It is not necessarily a matter of structure but of how things are organised. It also comes back to the issue of leadership with regard to ensuring that there is collective responsibility for children moving into young adulthood and that no barriers are put in the way.

The Convener: I call Ross Greer.

Ross Greer (West Scotland) (Green): My first question is primarily for Tony Buchanan, but I would be interested in hearing the other panellists' thoughts on it. Do you feel from the bill and its financial memorandum that the costs of the potential transfer of children's services have been made clear?

Tony Buchanan: Because it is a framework bill, there is no clarity about what will or will not be provided. What I would say, from a COSLA point of view, is that we know that local government could deliver those services if we were given greater resources and the ability to utilise them.

As was touched on earlier, workforce planning is a significant issue and trying to recruit people into the various services that require that support is critical. I suppose that there is an argument that, if we are looking at the costs of setting up a national care service, that money could perhaps be spent on services on the ground and in the front line, and we would be in a better position than we are in now.

Jackie Irvine: In relation to the resources, it is a framework bill but you are absolutely right that we do not have the detail. For me and my organisation, the importance will be in the future modelling because that will be a co-production. No one could argue against that; it is the way that it should be done. It should be co-produced with people who use services and know what they need and what works. However, as it still needs to be done, we do not know what that co-production will result in, so the financial requirement for it is still not there. The fact that it is a framework bill means that it needs to be built on, so I suggest that there are some unknowns in that area.

Ross Greer: The level of integration between children's services and other services has been mentioned quite a bit already, particularly in answer to Willie Rennie's line of questioning and, in the COSLA submission, particularly in relation to early years childcare provision. If the decision is made to transfer children's services to the new national care service, how easy will it be to disaggregate that discrete spending from the wider spending that local authorities put into services that are for children in some way, rather than the specific children's social services that we are talking about?

The Convener: Who wants to have a shot at that?

Tony Buchanan: We would expect that to be extremely difficult, because how do you start to unpick and separate all of that, as required under the conditions? We have talked about silos as well as integration, and problems could be created by trying to unpick pieces of a whole that we know currently—and generally—works. How do you start to bring all that back together again to ensure that it still works? Would someone apply to one area to deal with a certain aspect of the services and then apply to another fund or unit for funding? In our view, and given the lack of information at the moment, we feel that it would be extremely messy to try to unpick all of that and continue to deliver services at our current level.

Ross Greer: You have already mentioned that this is a framework bill, and that the decision whether to transfer children's services will be taken not as part of this legislative process but later on. Is there any information that has not been provided but which you think is critical before Parliament further considers the bill, or can we wait for the future decision specifically on children's services?

Jackie Irvine: We welcome the independent steering group, which Claire Burns's organisation is supporting and which we are engaging with. We have a meeting with Professor Brigid Daniel in a few weeks' time. It has been a really helpful development, and, given that it will also look at research and examples elsewhere and at what else might assist with the decision in question, I think that we can wait.

I should say, though, that, because this is a framework bill, some key bits are missing. This is an iterative process, and we and other organisations will keep a close eye on how it develops. I am not sure what the timescale is for the steering group to report, but that will be the crunch point, and I imagine that the group will come out with some recommendations on what the final legislation will need to be clearer and more explicit about. For example, where will the governance of public protection sit, and how will that shift—or not—if children's services go into the new service?

Claire Burns: I would like to know the alignment between the financial memorandum and the implementation of the Promise, the United Nations Convention on the Rights of the Child and the new child protection guidance, because we need to look at the cost not just of restructuring but of our aspirations for workforce and capacity building. What is the cost of that?

Ross Greer: Just for clarity, do you believe that further costings should come before Parliament completes this particular legislative process, or could they come through the independent review? **Claire Burns:** I think that that sort of thing should sit alongside the research, because it will give us additional information and tell us the conditions and enabling context required for the Promise to be implemented.

The Convener: I am looking at the clock. We have a few more sections to cover, so is it okay if we move on, Ross?

Ross Greer: Yes, that is totally fine.

The Convener: Thank you. Michael Marra has a supplementary question on finance, after which we will move on to the issue of research. I ask everyone to please keep their questions and answers short and succinct.

10:45

Michael Marra: I should declare an interest, convener, as a close family member is a practising social worker.

Pensions would not typically be included under the Transfer of Undertakings (Protection of Employment) Regulations, but the fact is that we are looking at thousands of social workers moving to a new body. Has the Government provided any clarity on the status of social work pensions? That question is for Tony Buchanan.

Tony Buchanan: Not that we are aware of, although I can come back to you on that in writing. That is one of the concerns that staff have about being transferred to another organisation. All of those aspects must be factored in.

Michael Marra: What about the status of buildings, including the rentals for the places where all those people work? What would the relationship be in that respect with regard to councils?

Tony Buchanan: Again, we can write to the committee, but my understanding is that there is no clarity on what would happen and what would move.

The Convener: If you have questions about research, Michael, please move on to them.

Michael Marra: We were told that there would be a body of research. Claire, you represent CELCIS, which I believe is to be commissioned to carry out that research. What form will it take?

Claire Burns: We have started the research and it will continue until next September to bring it into line with other key decisions that will happen around the national care service.

In that research, we are not asking, "Should there be a national care service?" The question, which is very much aligned with the Promise, is "How do we ensure that children, young people and families get the help that they need when they need it?" We will look at a number of things that people have talked about today, including what such a change will mean for leadership and what else, in that enabling context, will ensure that families get the kind of support that they need and that their experience of the system is such that they feel that they are getting that support.

We are in the early stages of that process, and there will be publications as we go along. The research has five elements, the first of which is a rapid evidence review of published literature, looking at, for example, what we mean by integration and the different forms that it can take. Secondly, we will take deep dives into different international perspectives, including from places such as the Netherlands and New Zealand, where there has been complete decentralisation and then centralisation, and consider what we can learn from the ways in which that has worked well.

Thirdly, we will take a deeper dive into different approaches to integration across Scotland and look at what we can learn about the conditions under which those approaches operate. Fourthly, we will look at whether we can make any connection with outcomes in that regard, although we are not confident that you can make an automatic connection between integration and outcomes. However, we will consider which conditions and elements of that integration might help. Finally, there will be a national survey of the children's workforce so that we can start to unpick some of those aspects and gather more qualitative data by interviewing the workforce. Those are the five elements of the research.

Michael Marra: But you are not being asked to address directly the question whether children's services should be integrated.

Claire Burns: No.

Michael Marra: CELCIS's speciality is lookedafter children. You have produced some fantastic work in that area, and I give credit to your staff for that. However, my concern in relation to that specialism is whether we can capture the breadth of children's services that we have touched on in our questions. Is the fact that you have been commissioned to do this research a pointer to a bit of an inherent bias towards the care end of the spectrum rather than the breadth of children's services?

Claire Burns: I want to reassure you on a number of points. We are clear that the process is about the broader range of children's services.

I should also say that, although we were, traditionally, the centre for looked-after children and are now the centre for children's care and protection, we are also involved in the whole family wellbeing fund, which relates to building preventative services. Therefore, we are moving into that area, and I just want to assure you that we are really clear about the need to be broader.

Michael Marra: And will you draw in expertise around education, mental health and other areas?

Claire Burns: Yes. As Jackie Irvine has also said, that is why there is an independent steering group of academics across those areas—to ensure that we have all those lenses. I hear your concern and want to reassure you about that.

The Convener: Thank you for that reassurance. Stephanie Callaghan has a brief supplementary question to clarify some of the statements that have been made.

Stephanie Callaghan: My question is for either Tony Buchanan or Mike Burns. I agree that integration has brought about really positive changes for families, and I share the passion expressed by all the witnesses for providing the best possible support.

However, we need to go back to the beginning and realise that children cannot be seen in isolation, because they are part of families and are therefore really affected by adult social care. The whole point of the review was to shine a light on the need for a change in ethos and culture across social care services, with co-production and codesign at the centre of all that. It was always about providing care that really matters to the individual, and co-design and co-production have been a huge part of that process.

I am struggling to understand what I have heard. On the one hand, I am hearing that the council team has worked really collaboratively and that, although it has faced huge complexities and different structures and barriers, it is still working collaboratively to make things happen. However, that seems to be at odds with the suggestion that co-design and co-production that include people with lived experience and those workers in designing and implementing policies will not work in a national care service. I am struggling to understand why you think that. Can you give me an explanation? It just seems to be at odds with what you are saying.

The Convener: If the witnesses can keep their responses tight, that would be helpful.

Stephanie Callaghan: Sorry, convener. I had meant that to be shorter.

The Convener: Mr Dey has some critical questions to ask, too, so perhaps our witnesses can make their responses succinct, if possible.

Mike Burns: In a sense, Ms Callaghan, you have made the point really well. I have said to our members of the integration joint board that the most important infrastructure in the city is not information technology or roads, but family. You

are talking about the shift to thinking about this through the context of poverty and inequality, which at times creates a toxic environment in which families have to do that most difficult of tasks—parenting.

The Promise has done a magnificent job of profiling lived experience. Equally, the Scottish child abuse inquiry has heard some strong testimony that has shown us the lessons that we need to learn. Therefore, we need some hard reality consensus on the problem that we are collectively trying to fix; that is the complexity that we need to engage with. We need to understand the complexity of the system as it is and the direction of travel that we need to go in. There is still space for further dialogue; indeed, it has been really helpful to hear the committee's questions this morning and to have the opportunity to articulate from a practice and leadership position some of the challenges that we see.

The Convener: Does anyone else want to come in on that? You do not have to.

Tony Buchanan: I would echo some of what Mike Burns has said. Speaking as an elected member and from a council point of view, I consider that integration has worked because it has been local. Of course, I can speak only about my local authority and the services that we provide. There are very strong links between adult social services and children's services because there have to be—they have got to work together. That is the case not just within those services but across everything that we do. It is a priority.

Stephanie Callaghan: I hear what you say, but the fact is that delivery would still be local. I have sat on integration joint boards, too, so I know where you are coming from.

Tony Buchanan: We do not know that it will be local. Potentially, you will be taking away a particular aspect. The local aspect involves other local authority services, such as our education and housing services, coming together to form that local bond and integration.

The Convener: We will move on to our final block of questions.

Graeme Dey: Mike Burns talked earlier about an evolution taking place in the delivery of services and rights. The Carers (Scotland) Act 2016 required the provision of short breaks for carers, yet, six years on, we are being told that only 3 per cent of unpaid carers receive statutory support for breaks from caring. Section 38 of the bill has the potential to address that for carers in general, and for young carers specifically. Given the rate of progress so far, is that not essential to support a group of young people who, by and large, have a pretty tough time of it?

30

Mike Burns: That brings us back to the point that we were discussing earlier about the need to see these issues in the context of families. Going back to the issue of earlier identification and intervention—in other words, who notices these things?—I take the point that we are not always attuned to recognising that we are dealing with young carers. That is a journey that we are on. Again, I point to kinship care, where it has been recognised that, when a certain level is reached, the state is required to intervene and offer support. There is a parallel there that could be reasonably considered, given the direction of travel.

Graeme Dey: My point is that we are six years on and progress has been glacial.

Mike Burns: That is, without doubt, fair comment. There are several lenses through which we can look at the issue. One of the things that we are saying is that the number of young carers in Glasgow will depend on how we engage with the family and the young person in question. Sometimes they are young carers and we intervene on that footing, but, a lot of the time, the situation is similar to that for youth justice and other issues. Often, we are dealing with families where the issues are poverty, inequality and trauma, and we need to think about the level of support that we need to wrap around that, the getting it right for every child approach and so on. It is about the lens through which we look at this.

I go back to Jackie Irvine's point about the Promise as well as the earlier challenge to Claire Burns about looking at the way in which we intervene more broadly instead of simply seeing children and saying: "You're child protection," "You're looked after" or "You're kinship care." We need to recognise that there is a need to wrap support around families in a different way.

Graeme Dey: Absolutely, and you articulate that very well.

Just to go back to my earlier exchange with Councillor Buchanan, I have to say that delivering local is not working in that regard, is it?

Tony Buchanan: It is very difficult, and there are several reasons for that. All local authorities recognise the need as well as the support that is required. There are some issues with delivering that support, such as the lack of respite care or support as a result of workforce needs, but most local authorities are trying to address them. For example, most have adverts out just now to try to recruit staff to cover that. There is an issue with getting the workforce in place, and insufficient funding is also having an impact.

It is also, in some instances, difficult to identify young carers. The fact is that we have probably identified more young carers coming out of the pandemic than we were perhaps previously aware of, and there is an on-going issue in that respect. A view that I often hear from social work colleagues is that many children who are young carers do not necessarily want to tell anyone, and we need to break down those barriers so that we can go out and deliver that support.

We all know that, post pandemic, services are struggling not just to recruit staff but to deliver all of this. There are, indeed, problems and issues.

Graeme Dey: Those are all valid points, but the problem predates the pandemic.

Tony Buchanan: It does, but it has been exacerbated by it.

The Convener: I thank everyone for their time this morning and for what has been a very informative evidence-taking session. Thank you all for coming and sharing your views with us.

There will be a short suspension to allow for a change of witnesses and to let members stretch their legs.

10:58

Meeting suspended.

11:05

On resuming—

The Convener: Welcome back. We will now take evidence from our second panel on the National Care Service (Scotland) Bill. I welcome lain Nisbet, education law solicitor, Cairn Legal and My Rights, My Say; Cameron-Wong McDermott, policy officer, Children and Young People's Commissioner Scotland; and Fraser McKinlay, chief executive, The Promise Scotland.

We will move straight to members' questions. Willie Rennie will kick off the first group of questions.

Willie Rennie: I have a nice, simple question to start off with. Is it essential to centralise the service—create a national care service—in order to deliver a human rights approach?

The Convener: Who would like to go first?

Cameron-Wong McDermott (Children and Young People's Commissioner Scotland): It is not absolutely central. There are multiple different ways to deliver children's services, widely defined as social care and social work services, and it is not absolutely essential that they are delivered through a national care service.

Fraser McKinlay (The Promise Scotland): I agree with that, Mr Rennie. I was lucky enough to listen to the earlier evidence session, and, as some members might know, I worked for 15 years with Audit Scotland, so I have been through a lot

of the reform journey over the years and I recognise a lot of the same issues cropping up. It was nice to hear Audit Scotland reports being quoted in evidence earlier on—Mike Burns will get the cheque for that later on.

I do not think that it is essential; in the end, it is a judgment about what is the most likely way of delivering a human rights approach. For us, we are not at the point of making that judgment yet, and we will focus on that work over the next period.

lain Nisbet (Cairn Legal and My Rights, My Say): It is not essential, and I do not think that the structure and whether the service is delivered nationally or locally actually impacts on whether you can make it human rights compliant. The legislation that the Scottish Parliament is considering would apply to local authorities as well as it would apply to a national care service. In relation to making those rights real for people, you want a system in which disputes can be resolved, complaints can be addressed and people feel that there is accountability and involvement.

My concern is that, if moving from a local service that is delivered by a local authority, where you have locally elected councillors and so on, to one that is delivered by a national body, regional care boards and so on is not done carefully, there is a risk that the ability to make those rights real for children and young people is lost. You could have the structures in place and, nominally, the rights in place, but you could lose some of that.

Willie Rennie: I have a short follow-up question. Do you know of people in your organisations or people you work with who demand, argue for or campaign for a national care service to deliver that approach?

lain Nisbet: No.

Fraser McKinlay: No, I do not, but I am not sure whether I have ever heard staff argue for that approach at such a big scale over all the years that I have been involved in and looked at reform. As the first panel said, people are really focused on their day-to-day work. Our position at The Promise Scotland is that the structure is not the thing that will make the difference.

The Convener: Thank you very much. That was short and sharp. We move to questions from Stephanie Callaghan.

Stephanie Callaghan: On the point about locally elected members and decision making, it was my understanding that care boards would include elected members as well as different organisations—local, third sector and voluntary organisations—and people with lived experience. I just make that point.

What does a human rights-based approach look like in the context of the bill, particularly for careexperienced young people, children with disabilities, young carers and children with additional support needs? I will go first to Cameron-Wong McDermott, who looks keen.

Cameron-Wong McDermott: No problem thank you for the question. The proposals impact a wide range of rights contained in the UN Convention on the Rights of the Child, not least article 24,

"the right of the child to the highest attainable standard of health",

but also article 27, which is the right to an adequate standard of living.

Your question about taking a human rightsbased approach involves the four general principles of the UNCRC being mainstreamed into the processes leading up to decision making, including at the stage of development of the proposals, at the consultation stage and at the legislative scrutiny stage.

I will give some background on the general principles. The first is the principle of nondiscrimination. That is article 2 of the UNCRC. Non-discrimination, within the context of the UNCRC, is not limited to the protected characteristics contained in the Equality Act 2010. It would encompass characteristics such as children in care and children in conflict with the law. What we would expect from a human rightsbased approach is that special consideration would be given to specific groups of children who will be most impacted by the proposals, including disabled children, care-experienced children, victims and children in conflict with the law.

Other general principles that have to be mainstreamed into decision making include the best interests of the child principle, which is relevant not just for individual assessments but when decisions are made in relation to groups of children. The best interests principle will be relevant to service design and delivery.

There is also article 12 of the UNCRC, which is the right of children to express a view and for that view to be given weight in decisions affecting them. General comment 12 from the UN Committee on the Rights of the Child says that article 12 requires "meaningful participation" in the planning, delivery and evaluation of services. What that means in practice relates to section 30 of the bill, which requires ministers to "consult publicly" and to provide Parliament with

"a summary of ... the process by which they consulted".

What we would expect in a human rights-based approach is that any consultation would be based on concrete proposals. In line with article 12, those proposals would have to be informed and designed in partnership with children and those who represent their interests. Any consultation has to include the voices of groups of children who are most likely to be affected by the proposals, including care-experienced children.

At this stage, we note that only a partial children's rights impact assessment has been carried out, because of the lack of evidence underlying the proposals. We would expect to see a full children's rights impact assessment in due course, and we welcome the Scottish Government's commitment to that in the policy memorandum.

Finally, in taking a human rights-based approach, it is vital that there is full legislative scrutiny of the proposals. We, as well as other organisations, have concerns that the process of proceeding by delegated legislation or regulations will not give the level of full legislative scrutiny that is required to take a human rights-based approach.

The Convener: There was a lot in your answer, Cameron-Wong. Members will pick up on many of those topics separately in their questions. Impact assessments are a particular example. I ask Stephanie Callaghan to continue with the human rights theme.

11:15

Stephanie Callaghan: That answer was incredibly helpful. I suppose that the co-production or co-design that is at the centre of the proposal focuses on the areas that you talked about.

The aim of the framework bill is to produce a bit of legislation that we can then hang the secondary legislation on, if you like. However, do you feel that anything is missing from the framework bill? Is there anything that you would like us to make a recommendation on?

Cameron-Wong McDermott: It is difficult to say at this stage because, as you say, it is a framework bill and we do not have the detail on which services would go into a national care service. However, something that I think is missing from the framework bill is information on how the proposals align with other programmes of transformation in the children's sector.

For example, the direction of travel is towards early intervention, prevention and implementation of the commitments that have been made to the Promise. With the proposals as stated, there is a question mark over how any structural change to how children's services are delivered will meet the commitments that the Scottish Government has made to keeping the Promise. **The Convener:** Can I interrupt, Cameron-Wong? We plan to ask some questions on the framework legislation later, so I will steer the discussion back to the human rights approach, if you do not mind. We will move on to questions on that from Michael Marra.

Michael Marra: We are looking at a national care service, which is potentially most directly related to articles 9 and 16 of the UNCRC, which are about the protection of family life in relation to decisions that the state might make. I have a question about the breadth of the transfer of powers and your reflections on that.

We could say that social work and children's services protect the rights in articles 26 to 29 and 32, on access to education, health and wellbeing. Given that a wide range of services are being transferred, are you concerned that some of those areas could be lost or neglected through an overbearing focus on care, albeit that it is incredibly important?

Iain Nisbet: That is one of the big challenges. As you say, children's services cover a really broad variety of different functions in local authorities and other bodies. To bring them into one service and adequately cover both, at one end of the spectrum, the family of a disabled child that is seeking services and, at the other, the child protection model, whereby families may be less keen to engage with services, is a real challenge. It is difficult to answer questions meaningfully with just a framework in mind.

On the human rights approach, I note that, in my day job, I represent children, including children aged 12 to 15 who have additional support needs under the additional support needs framework legislation. What we have there is a quite welldeveloped system of rights including, critically, the ability to resolve disputes that arise. For me, something being human rights compliant always has to come down to how those rights are made real. Where do we go when there is a dispute about the level or type of care that is being provided, or something of that sort?

Michael Marra: That is very useful. Fraser, will you reflect on some of Iain Nisbet's comments? I can understand how the issues pertain to care and a national care service, but what about the health and wellbeing of a child who is not at risk? Do you see the challenge around protecting those rights in a national care service?

Fraser McKinlay: Yes. It is worth bearing in mind that, as Cameron-Wong said, the UNCRC will apply to all local bodies that deliver the services, however they are structured, so there should be no gaps. There are pros and cons, and the risk will vary depending on whether children's services are in or out.

Your point about the risk that it becomes too focused on care is well made, Mr Marra. From The Promise's perspective, the independent care review was about the experience of children, young people and families in care, but it was also about how we provide early help and support to families to prevent kids from going into care in the first place, so we absolutely have an interest in having universal services and all the other stuff that, as you say, comes with that.

My reflection on the bill, recognising that it is a framework bill, is that it is very frameworky. There are some big questions still to be answered, which, in my experience, is unusual, although you guys will know much more than I do about the legislation that you consider. That is where a lot of the uncertainty comes from.

We absolutely accept the commitment to codesign and co-delivery. The letter that I sent to the lead committee in September points out our concern that there is a risk that the legislative process and the co-design process will happen in parallel and become disconnected. Cameron-Wong McDermott's helpful description of the principles sets a really high bar for what a human rights approach looks like in this context.

Michael Marra: You talked about prevention. The idea of prevention in relation to adult care services is analogous, but that would open up the national care service to issues around adult housing. Prevention for children seems to have been pulled into that position, but prevention for adults has not. I understand your "frameworky" comment, but do you have a view on that?

Fraser McKinlay: The principles of the bill talk about a lot of that stuff. They talk about the importance of prevention and all those things. One reason why we end up having this conversation is that it is not clear what we are talking about at the moment, so members are right to raise questions about what is in, what is out and what the implications are for providing the early help and support that we are clear that families need.

The Convener: Stephen Kerr has a supplementary question.

Stephen Kerr: Cameron-Wong gave a brilliant answer to the initial question about human rights, and I want to ask him about the commissioner's latest report, in which some alarming concerns were raised around child protection and safeguarding. Would the bill enhance the commission's concerns about those issues?

Cameron-Wong McDermott: It is far too early to say at this stage. We know that children's services were put into the bill at a late stage and that the proposals are based on the Feeley review, which focused on adult social care. There needs to be more evidence before we can make a judgment on whether children's social work and social care services are better delivered through a national care service than through local or third sector agencies.

The Convener: Stephen Kerr, if you do not mind, please move on to the next section of questions.

Stephen Kerr: It might be quite brief, because of the recurring theme of a lack of evidence and detail. I would like to get witnesses' views on what the possible impact would be of separating children's services from the current integration at a local authority level. What is the potential impact on children?

lain Nisbet: I will come at that question from my very specific context of working with children with additional support needs. One key thing for that group of children, as for many others, is multiagency working and different agencies working together. At the moment, education and social work come under the same local authority, so there is, at least in theory, an ease to getting those bodies to work together. For example, we see things such as social workers being based in schools and local authorities having joint children's services departments and so on. I am concerned that some of that would be lost and that there would be unintended consequences.

I will give the committee one example, if I may. The co-ordinated support plan is the statutory document that some children have for the delivery of co-ordinated services across different agencies. At the moment, because social work is a local authority function, the child has an enforceable right to the social work services cited in their coordinated support plan. They can go to the tribunal and get an independent view on whether that is expressed correctly, whether it is being delivered and so on. If we move that to a national agency, that will be lost and it will go into the same basket as health services, which a person cannot go to the tribunal about. The mechanisms for making the rights that people have real will be lost and diluted in that service. Unless we are going to replace those with something equivalent, I have a very real concern that we will end up unintentionally weakening the co-ordinated support plan, which is a key statutory document for many children.

Fraser McKinlay: Colleagues are much better placed to talk about some of the specifics. My observation is that, whichever way we cut it, there needs to be good integration in either model. One of the arguments for a national care service that includes children and families—which I think was made earlier—is that it helps the transition between childhood and adulthood, because it is all in one place. The downside, however, is that we potentially risk breaking the link between other council services in relation to children and families, particularly education. Whichever way we end up going, the need for good partnership working and integration and all the stuff that the committee heard about this morning absolutely still stands. That is my more overarching observation on the guestion.

Stephen Kerr: Would the local working, innovative solutions, originality and creativity that are required to deal with tailored solutions for children's needs be undermined in any way by the imposition of a national agency?

Fraser McKinlay: I am conscious of the point that you made earlier, that the answer is always "it depends"; however, it depends on how it is done. A national anything does not need to be a big, monolithic service in which everything is done in exactly the same way everywhere. The care boards will be organisations in their own right. If I understand correctly, an important distinction is that they will have their own staff in a way that integration joint boards currently do not.

In conceptual terms, therefore, there is nothing that should prevent innovation and all the things that Mr Kerr described happening locally. Equally, there is nothing to prevent those things from happening at the moment. I come back to the point that, in making changes to the national care service in the way that is described and putting children and families in it, we need to be really clear about whether it is the best way to make the difference that needs to be made.

Stephen Kerr: What is your view on the potential that the national care service has to do that? Or is there simply too little detail to go on?

Fraser McKinlay: I am afraid that there is too little detail, which I know might get a bit frustrating for the committee. In relation to the timescales that were described earlier, I understand that decisions will be made in principle at the end of next year; that is, at the end of 2023. We will be working with CELCIS and doing some of our own work to ensure that we are informed, so that we can inform Government and Parliament about what we think the best option is.

Stephen Kerr: I think that the research that is about to be done, or that is under way, is due to report in about a year's time. There will then be the passage of the bill and so on. Does it concern you at all that we are going to be looking at it in the wrong direction?

Fraser McKinlay: As I said earlier, one of our concerns right from the get-go has been that the work on the co-design, the research and everything else is slightly decoupled from the legislative process. That is the approach with the framework bill. As Ms Callaghan said, the idea is that the regulations and secondary legislation will

be hung off that, and that is an unusual approach. However, from our perspective, that is how it is happening at the moment, and we will contribute to the research that will help to inform that judgment.

Very quickly, I note that the research will not provide the answer. I am sure that even Claire Burns would say that. In the end, a lot of different factors will need to be taken account of.

Stephen Kerr: That is a precursor to the further consultation.

Cameron-Wong McDermott: I recognise that the children's commissioner's office is not a service delivery organisation and that other organisations will therefore have more to say in relation to issues around integration. However, the proposals present an opportunity to create a rights-respecting system that better integrates children's services.

At the moment, children's care in its broadest sense encompasses a wide range of different services. Statutory social work services protect the most vulnerable children in Scotland, we have social care for disabled children, and there is support for care-experienced children. All of that is provided by statutory agencies and the third sector. In their lifetime, children will most likely engage with a range of different services. The landscape is complex and varied. Therefore, we agree that better integration of services and an holistic approach have the potential to benefit a significant number of children.

11:30

Alignment is also important. If a system was devised that better aligned different services—for example, mental health services and additional support needs legislation—that would be good. However, it is vital that that process takes a human rights-based approach, bearing in mind the principles that I set out, such as non-discrimination and taking into account, and giving weight to, the views of children.

The Convener: You spoke about the human rights-based approach. What are the risks of having a partial impact assessment at this stage? What are the human rights concerns about working in that way?

Cameron-Wong McDermott: As far as I am aware, the consultation on putting children's services into the national care service was not accompanied by a children's rights impact assessment to begin with. That is not consistent with taking a human rights-based approach. We note that the current assessment is only a partial one. It is largely based on the responses to the consultation and the analysis report that The Promise produced.

Having such a limited children's rights impact assessment at this stage raises issues about the extent to which we can scrutinise the bill. At the same time, we recognise that it is a framework bill and recognise the commitment from the Scottish Government that a full children's rights impact assessment will be produced in due course. It is vital that that assessment is done on concrete proposals, not in the abstract.

Kaukab Stewart (Glasgow Kelvin) (SNP): I was going to cover the UNCRC in my questions, but I am aware that a lot about that has already come out in your evidence. However, I will try to pull some threads or get you to go a little bit further.

We have recognised that we are dealing with a framework bill. That is the context. The other contextual aspect is that no decision has been made on whether children's services will be included in the national care service, so the committee is looking at that. In that context, to what degree can a meaningful assessment of the impact on rights be considered at this stage?

lain Nisbet, you leaned forward.

lain Nisbet: Is that how this works? [Laughter.]

It is absolutely right that you cannot really do a meaningful rights impact assessment until you have the full proposals. There is a lot of sense to doing things in that order.

Kaukab Stewart: Does anyone else have a view?

Cameron-Wong McDermott: I agree with what lain Nisbet said.

Fraser McKinlay: There is a big aspect of chicken and egg. Because of the approach that has been taken, it becomes difficult to do an impact assessment. Had a different approach been taken and all that work done before the bill was introduced, the approach would have been different, but, given where we are, I absolutely agree that it is hard to do the full assessment before we have done the design work.

Kaukab Stewart: Do you think that consideration of the impact of significant changes to the care system on the rights of children and their families can be undertaken in the time that it takes for the regulations to progress through Parliament? I would like to explore timescales and how they fit together a little bit further.

Cameron-Wong McDermott: The issue of timescales concerns us, as we set out in our consultation response. I have concerns about whether it is possible to take a human rights-based approach within the timeframe that the

Scottish Government has set out for when it expects services in the national care service to be functioning.

I will take one issue as an example. As I understand it, the Scottish Government has committed to co-design, which is the most intense form of participation when it comes to children and young people. It involves participation at a very early stage, even before a consultation takes place.

I highlight the fact-while Fraser McKinlay is here-that the Promise is an example of good participation. Care-experienced children and adults were at the very heart of the Promise. I have written down that 5,500 people with direct experience of care were involved in that process. Not only families but the workforce were heard from. That type of human rights-based participative approach takes time and is very intense. I have concerns, and the commissioner would have concerns, about whether that level of participation can be achieved within the timeframes that are being discussed.

Kaukab Stewart: Do you think that there is a risk that children's needs would get lost under the adult needs if children's services are brought into the bill?

Cameron-Wong McDermott: Not if a human rights-based approach is taken. The idea of co-design is a brilliant one, but it has to be given time to be fully achieved.

The Convener: Ruth Maguire has a short supplementary, after which we will move on to the topic of co-design, so that was a great lead-in.

Ruth Maguire: I have just realised that my supplementary is a little bit co-designy. Is that permissible?

The Convener: I will let you proceed, if that is all right with Stephanie Callaghan.

Ruth Maguire: The committee is being told that no decision has yet been taken about whether children's services will be included in the bill. Is it fair and reasonable to do that intensive work with children and young people—which, if a human rights-based approach is taken, will include some vulnerable children and children with additional support needs—if what they are expecting might not be the outcome? How do you do that in a way that is fair to them?

Cameron-Wong McDermott: With the idea of participation, one of the key requirements is that it is meaningful. Children's views have to have an impact on the proposals. If children's views in the co-design process lead to the conclusion being arrived at that children's services are better delivered at the local level and by third sector agencies, that must have an impact on what the

Scottish Government does in relation to whether children's services are brought into a national care service. Fairness is not really the question. It is whether the co-design and participation process has a meaningful impact on what the proposals eventually are at the end of the line.

Fraser McKinlay: I have been in this job for only two months, so I am learning loads. This session has been very helpful for me. I am by no means a rights expert, but it seems to me that the meaningful thing is what questions you ask and what you are working with. It is not a case of asking a group of children and young people, "Do you think children's services should be in or out of the care service?" The process is about finding out what matters to them.

That is what the independent care review did. I was not part of that, but I now have the lead role in implementing it. It said, "What is important to you?" It is then our job to figure out what that means in terms of structures, governance, accountability and all that other stuff.

I echo Cameron-Wong's point that, if you are doing that properly, it is really tough work and also really skilled work. It is a massive challenge to do that in 12 months, I would suggest.

The Convener: We move on to questions from Stephanie Callaghan.

Stephanie Callaghan: That was a good explanation. As we have heard, the Promise involved co-production and co-design. The Promise has been huge. That change in culture and ethos and that focus on relationships and wellbeing have been incredibly important, and it is great that that is coming through into other areas as well. It is very much about the idea that we have been doing things to people rather than with them.

My question may be for Fraser McKinlay. Cameron-Wong said that 5,500 people were involved in the Promise. I am not saying that we would need to look at working at that scale, but codesign is obviously about involving young people and families. Who should be involved? Is coproduction well enough understood or is there work to be done around that in order to help the process?

Fraser McKinlay: I think that there is more to be done for people to understand what it really means. My sense is that co-production and codesign have crept into the likes of public services over the past few years, and I think that people sometimes use the terms quite freely, without having the thorough understanding that we heard about a moment ago.

There is something else that I want to say in this context. We should recognise that we already

know quite a lot and we should not ask the same children and young people and families to tell us their stories all over again. It is important to be clear about what the approach is. What do we really need to understand and know about in the next stage of the process in relation to the national care service and whether services for children and families are in or out?

Indeed, is that even the right question? Maybe there is a bigger question about what the best structure and governance are for us to keep the Promise. That is certainly the approach that we have taken. My chair, Fiona Duncan, has written a series of blog posts over the past 12 months or so asking that single question: what is most likely to enable us to keep the Promise? In the end, we were unable to come to a view because the evidence is just not there. We are still working to try to come to a clearer view, which I guess we will have about this time next year.

There is a lot more to be done for people to properly understand the purpose of the co-design process and how it will involve children and families.

lain Nisbet: I think that the question was about who should be involved. Ultimately, it is the service users—children and young people. However, there can be a tendency to go to people who are already receiving services. The net needs to be cast more widely to include those children who are not receiving services but may benefit from them. We need some big-picture thinking around that. I agree with what was said earlier. We need to ask a big-picture question such as, "What does a service that works for you look like?"

Stephanie Callaghan: Does that link in to asset-based community development? Would we be looking only at children and young people and families or would we also look at all the organisations that are involved? A good example of real co-design and co-production in my area is the autism resources co-ordination hub. It starts with the parent carers, but it also involves all the local voluntary groups and third sector organisations. The council is involved and so is the NHS. That has really been co-produced from the bottom up.

That brings me to an aspect of the national care service that we have not really talked about yet, which is all the informal stuff. It is not just about the big aspects of care. We also need to consider all the informal stuff that happens in the background, such as the work of the autism hub. The effect of that is that families and children do not reach crisis point because there is preventative early intervention that is really supportive without it being formal or official**The Convener:** Sorry, but is there a question here, Stephanie?

Stephanie Callaghan: Are we looking only at children and families or are we looking at the partnership involvement as well?

11:45

lain Nisbet: We undoubtedly need to have that. You have raised an important point about the importance of the voluntary sector's formal and informal role within the structures. However, we also need to acknowledge that there is a particular position for children and young people as the service users.

Cameron-Wong McDermott: You mentioned an autism hub, Ms Callaghan. Bearing in mind the non-discrimination principle in article 2 of the UNCRC, it is important to recognise that the be affected children who will most disproportionately by the proposals will be disabled children and care-experienced children in conflict with the law. We know that some of those groups face significant barriers to being able to participate. Therefore, it is important to ensure that mechanisms are in place to ensure that they can participate properly and fully in any co-design process. That could be through advocacy services, for example.

The Convener: That is great, Cameron-Wong. You do not need to be brief on some of the questions, because we have plenty of time, but thank you.

I will pick up on that thread and what Ruth Maguire said about the impact of some of the more vulnerable children being involved in intensive co-design processes. If, with all the listening that the Scottish Government has done, the outcome is that we do not want to integrate children's services into a national care service, what would be the impact on such young people should the Scottish Government choose to go ahead anyway?

lain Nisbet: Children in Scotland has really good guidance on meaningful participation with children. One of the key principles of that is that there needs to be a reporting back about what was done with the children's views. There will be a variety of views—not every child's expressed view will end up being exactly mirrored in the legislation—so there needs to be meaningful reporting back about what the Government has done with their views and why it has taken the decisions that it has.

Fraser McKinlay: For what it is worth, coming into the job of chief executive of The Promise, I feel that day in and day out. Because of the voices that were heard in the independent care review,

people absolutely recognised themselves and their stories in The Promise reports when they were published. They have an absolute right for us to get on and deliver what was in those reports and an expectation that we will do so.

As a principle, if you do a co-design process, you absolutely need to honour the things that people told you and the time and commitment that they gave to that process. If you cannot deliver on all of it, you need to be honest and clear about that. You need to report back. Therefore, the codesign must go beyond coming up with a good plan. It has to be about implementation and beyond.

Kaukab Stewart: I will ask about the Promise and whether we are on target to implement it, so I am afraid that my questions will be mainly for Fraser McKinlay, but I invite the other witnesses to chip in as much as they can.

Fraser, in a letter to the Health, Social Care and Sport Committee, you said:

"Children and families repeatedly told the Independent Care Review the way the system works is a primary barrier to change".

Will you expand on that? What are the impacts of the way that the system works at the moment? I want a bit more information about what the problems are with the current system. I am particularly interested in the views of the service users—children and parents—not those of agencies.

Fraser McKinlay: The first thing to say about the big picture is that there is no doubt that there is brilliant practice across the country-we have heard a lot about that this morning-but, equally, there is no doubt that the outcomes for children, young people and, indeed, adults who have care experience are really poor. That is disproportionately the case in health and their experience with justice-all the stuff that we know about-so we can see that the system is not working at that level.

By the way, as an aside, the ex-auditor in me needs to mention that we are spending almost £1 billion every year on a system that does not work well and about £875 million a year picking up the pieces of that. The money is important, and we are spending a lot of it on something that is not working.

To come down a level to the experience of children and families, the care review heard that people felt stigmatised too often and that the help that they got came too late—that relates to some of the points that were made earlier—because the help appears at the point of crisis.

The review also heard that that help is fragmented. I will give an example that is

anecdotal but not unrepresentative of what people are dealing with. A couple of weeks ago, I was talking to a woman who had a baby quite young, who is now in her mid-20s and is working. She told me that, at the time, she had to engage with 13 different services to get everything that she needed. It is easy for me to talk about wrapping services around children and families but, at its heart, the problem is that, at the moment, we expect children and families to navigate their way through an incredibly complex system. We need to completely dismantle all that and bring it back to what matters to that child, that young mum and that family.

The big question is, how do you do that? Is a national care service the best way to do it? Is having children and families services in that national care service the best way to do it? I guess that that is where we are today. However, as you say, Ms Stewart, the care review and The Promise reports are really clear about what the problems are and what must be done. Now, it is our job to figure out how best to do that.

Kaukab Stewart: Correct me if I am wrong, but I think that the target is to implement all aspects of the Promise by 2030.

Fraser McKinlay: Yes, it is.

Kaukab Stewart: Will the framework that is in place at the start of the process help to accelerate implementation, or will it be a hindrance?

Fraser McKinlay: The easy answer is that I do not know, because it is too early to tell. However, as I think has been mentioned already today, we recognise the risk that we spend the next 12, 18 or 24 months figuring out what the new national care system looks like and people are distracted from the important work of keeping the Promise.

I get a really strong commitment from people in local authorities and in partnerships not to do that, so I do not doubt for a second that people are really focused on making the changes that the Promise requires. There is no doubt that, with any significant structural change, that change can get in the way and can be a distraction.

It is genuinely too early to tell. In the meantime, we are doing everything that we can to support local authorities, partnerships in local places and the Scottish Government to deliver the changes that we know need to be made.

Kaukab Stewart: I am pleased to hear you say that you think that there is a strong commitment from all the authorities to keep the Promise. We heard from the witnesses on the previous panel that they were a bit concerned about people being distracted while the process is going on. How did you get that evidence? Where did it come from? Did you get it from people who spoke to you or from submissions that they sent you?

Fraser McKinlay: It is a combination of all those things. Our organisation is relatively new—we have been going for only about a year and a lot of my staff joined us only in the past six months. However, we have a team of people who look after areas of the country and they go out to talk to people all the time. In the past two weeks, I attended a brilliant Promise conference in Saltcoats, in North Ayrshire, and a similar conference in South Lanarkshire.

There is no doubting people's commitment to keeping the Promise, but they face really strong headwinds. Any discussion around the national care service is only one aspect of that. Indeed, at the moment, that will probably not be the most significant one. People talk to me about the impact that poverty is having on their local communities, and about the impact that the challenges around recruiting foster parents, around the recruitment of social workers and around vacancy rates are having. People are finding all those things really challenging.

There is no doubt that the prospect of a national care service and everything that comes with that casts a bit of a shadow. However, in a sense, people have more pressing concerns at the moment as they try to deliver services.

Kaukab Stewart: If children's services were to become part of the national care service to help us to keep the Promise, how would that help to improve outcomes? You can have all the structures that you want, but we have heard how important it is that children's lives change. How can we ensure that the national care service helps us to do that?

Fraser McKinlay: The original Feeley report is a really great piece of work with great analysis. The main reason for the conclusion that there should be a national care service was the need for consistency. I am interested in taking the next step. If we say that a national service of any kind produces more consistency, we need to ask ourselves how it does that. It does not do that on its own. I do not think that one could argue at the moment that the national health service provides an entirely consistent service in the 14 health board areas across Scotland on its own. Other things need to happen to ensure consistency.

There is the question of how best to do that. I think that consistency can be achieved in a model that has 32 local authorities. One of our jobs is to ensure that the good practice that we see in Glasgow is spread to other places. That is part of our leadership role. That could be progressed in the context of a national care service. I am conscious that I am not really answering the question. In the end, it will be a judgment call.

The Convener: You may be suggesting that politicians are sometimes better at answering questions.

Bob Doris has a supplementary question.

Bob Doris: This evidence session is about how to realise the rights of children and young people within the development of a national care service, if we decide to go down that road. I acknowledge that the bill is a pretty general framework bill. I was looking at it during the last line of questioning. The bill contains the idea of a national care service charter, although it does not say very much about that. That is where various rights, including those of children and young people and their families and carers, could be entrenched.

Irrespective of whether that is desirable to the national care service, are there advantages and opportunities in having a human rights basedcharter for the benefit of children and young people? I understand that those rights have to be delivered at a local level, but are there opportunities in the national care service charter?

Iain Nisbet: Having a charter helps people to understand easily what their rights are. It sets them out more readably than in the legislation, and that is a good thing. As a lawyer representing children and families, I always ask what we do with those rights. I would want to see an explanation of where people should go and who they should speak to if their charter rights are not being delivered. Will there be an easy system for resolving those disputes and for enforcing those rights and making them real?

Bob Doris: Mr Nisbet, you have anticipated my supplementary question.

More generally, do the other witnesses think that there are opportunities in the national care service charter? I can see opportunities in other areas. For example, I have a great interest in palliative care, which is outwith the scope of this committee. I would like the right to good quality, local palliative care to be entrenched in the national care service charter. Regarding this committee's consideration of the bill, what opportunities are there to entrench something for children and young people in the charter?

Cameron-Wong McDermott: As a nonpractising solicitor, I completely echo what lain Nisbet said about the charter. Under the UNCRC, children have the right to an effective remedy. Any charter has to be enforceable. When incorporation happens, children will have the full range of UNCRC rights, in addition to those in any charter, and will be able to enforce those in our courts. **The Convener:** Bob, do you have anything else to ask?

Bob Doris: We did not get to what the opportunities might be. Children and young people have all those rights, but it might be desirable to have an easy document or charter that separately spells out the day-to-day realisation of those rights. I respect the legal background that Cameron-Wong McDermott and lain Nisbet come from, but I would like to set out bluntly what people's rights are, rather than looking at legal remedies.

I will turn to the legal remedies. Once we have the national care service charter, which no one has taken the opportunity to talk about, we could entrench rights in that. We have advocacy and then we have remedy in the bill. It does not say what that remedy should look like, but it says that there would be remedy. Can any of the witnesses talk about what a complaints or remedy process might look like, within a framework bill?

12:00

lain Nisbet: I would be pushing to make use of the existing structures. As I mentioned, we have a system involving a co-ordinated support plan, which is backed up by a tribunal in the health and education chamber. Down south, the equivalent tribunal is in the health, education and social care chamber. Therefore, we have some of the elements already, and it makes sense to make use of the existing systems. In addition to the tribunal, a system of mediation and independent adjudication—one involving a specialist ombudsman—is available.

We already have a model that could be adapted. We would then have something that children could access across the services and, critically, at the points where they intersect, rather than having to pursue different models. My strong plea in relation to remedies is that we make use of the systems that are already in place under the additional support for learning legislation.

Bob Doris: That is helpful. I tied that question to my one about the charter because people will be able to read what is in the charter, which will be in easily accessible language, and look at the service that they get and say, "That's a service failure and my rights have been breached. I want to do something about that." That would be a very obvious way for someone to try to access their rights without always having to go to legal recourse, so there are opportunities to make rights more accessible and readily available for children and young people.

I am trying my best to tease out what that could mean in practice with what is a framework bill. Will Cameron-Wong McDermott comment on that? **Cameron-Wong McDermott:** I echo the points that Iain Nisbet made in relation to remedies and accountability. There could be an opportunity. However, you mentioned that children and young people must be fully aware of their rights, and that must be a key focus following incorporation and implementation of the UNCRC, because, if they are not aware of their rights, how can they even begin to think about issues relating to enforcement and so on?

Bob Doris: I will make the briefest of comments.

The Convener: You are not very good at making the briefest of comments.

Bob Doris: It will only take half an hour, convener. [*Laughter*.]

We are talking a lot about the point that there is not much in the bill and that it is a framework bill, but I am trying to mention things that are in the bill. Witnesses have not really latched on to the things that are in the bill; they have taken us back to the abstract. It would have been helpful if witnesses had latched on to what is in the bill rather than what is not in the bill. That would have helped—

The Convener: That is a comment rather than a question.

I will pick up on what Mr Doris has said and Fraser McKinlay's comment that the services need to be around the family and the child, rather than their having to navigate through the existing quagmire and complexities. I suspect that a charter might help with that, but who knows?

I will ask a very succinct question. Right now, who is accountable for delivering the promise?

Fraser McKinlay: That is the million dollar question.

The Convener: It is not easy, then.

Fraser McKinlay: As ever, the simplest questions are often the hardest ones to answer.

Scotland has a responsibility to keep the promise. I know that that is an easy thing to say, but I say it because there is no single organisation or person who can do that. In the end, the Scottish Government and the Scottish ministers clearly have a central role, particularly in relation to the systemic change that is needed through policy and legislation—all the big things that only the Government can do.

However, as we have heard several times today, local authorities and their partners in the third sector in particular are those who, day in, day out, deliver the practice that really makes the difference. Our job in The Promise Scotland, as an organisation of 25 people, is to lead and facilitate the change and to knock heads together and join the dots when we need to. In a sense, one of the reasons why I was fascinated by the job was that a genuinely systems-wide approach is required.

I hope that I am not ducking the question, but it genuinely is not as simple as there being a single person or body. Where we can do better is in being clearer about who is responsible for what, because that is not as clear as it should be. That is one of the things that I am keen to focus on in the early months of the job.

The Convener: Perhaps, then, it is the First Minister who is ultimately responsible for delivering the promise.

Fraser McKinlay: We are really pleased about the fact that the First Minister has that in her portfolio. The commitment at the most senior levels of Government and across the Parliament is one of the fantastic things about the promise. It has very strong cross-party support. You could argue that, in the end, the First Minister is responsible for lots of stuff. However, we recognise that the political commitment in Government, across the Parliament and in the 32 councils will not be enough on its own.

The Convener: We will move on to questions on the framework approach to the legislation, which I alluded to. Graeme Dey will lead on this section.

Graeme Dey: I want you to assess the merits and risks of the frameworky—as Fraser McKinlay termed it—nature of the proposal, set against the merits and risks of coming at the matter from a different direction. That would mean not including children's services in the framework bill, doing the research and consultation, and then, at a future date, if we decided to bring children's services into the equation, we would have to dovetail that with what I presume will be the national adult care service. What are the merits and risks of those two approaches, set against each other?

lain Nisbet: The obvious risk of the framework approach is that large and significant changes in structure and law have to be introduced by secondary legislation. Inevitably, that does not get the same degree of parliamentary scrutiny and potentially it is more open to legal challenge and so on. There are all the issues that go along with secondary legislation. In particular, because of the interconnected nature of children's services, which fall under different pieces of legislation and dovetail with others, that is a particularly complex job to devolve to secondary legislation.

Obviously, the advantage of that approach is the flexibility. It is easy to change things if change is needed at a later stage. It is an approach that Governments tend to like, but Parliaments less so. There is a balance to be struck—we cannot put everything through primary legislation, because there is not enough time—but, in this instance, I have concerns about the scale of the task that is being proposed to be done in regulations. However, maybe the drafters who are responsible for that will prove me wrong in due course.

Graeme Dey: But the practical implications of doing it the other way are quite obvious as well.

lain Nisbet: Yes, I think that that is right. As we have heard, in doing it the other way, there is an opportunity, in advance, to gather evidence and do the hard work of consultation, co-production and that kind of thing, which we have heard are a really important part of the process.

Graeme Dey: I want to come back to something that you have said, but other witnesses might want to answer my question first.

Cameron-Wong McDermott: I echo some of what Iain Nisbet said on the disadvantages and challenges. It is a bit of a challenge at this stage to properly scrutinise the bill when we do not know which services will actually be brought into any national care service. I support the point that Iain Nisbet highlighted about doing it all through secondary legislation. The Scottish Parliament has a role as a human rights guarantor and in fully scrutinising the proposals, which could be incredibly complex and varied. I have a concern that using secondary or delegated legislation will not provide the adequate scrutiny that is required for regulations that will potentially be extremely complex.

Fraser McKinlay: On Graeme Dey's point about practicalities, there is no doubt that I am concerned about children and families being a bolt-on—if I understand the question—with the Government designing a new adult national care system and only then figuring out how children and families plug into it. There is no no-risk option here; either way that it is done, there will be risks.

This is not a terribly helpful comment, because it happened in the past, but setting up a review of the adult care system that suggested one thing and then introducing—kind of unexpectedly children and families at the consultation stage meant that the next bit of the process was always going to be challenging.

I recognise that there are risks on both sides, and our job now is to do everything that we can to manage the risks to get to the right answer.

Graeme Dey: I have two further questions, one of which is probably for Cameron-Wong McDermott. What specific details what the service look like in reality would you require in order to be more comfortable about the approach that has been proposed? Going back to something that lain Nisbet rightly alluded to, there will be considerable interaction with other pieces of primary legislation through the framework approach. Iain has already talked about scale. Will witnesses talk about some specifics of those interactions and, if we take this approach, how they might present challenges in getting everything right?

Cameron-Wong McDermott: Fraser McKinlay mentioned the concern that children and young people might be a bolt-on. So far, there have been really limited opportunities for the empowerment and participation of children and young people, which, irrespective of questions about details, is a clear issue that is important to bear in mind.

Details that are potentially missing at this stage are whether the proposals will align with current programmes of transformation such as the Promise and legislative reforms that are under way that will have a transformative effect on how children and young people's social care and social work services are delivered. For example, the care and justice bill consultation makes proposals in relation to the children's hearings system, secure care and other issues that will potentially be at play with the National Care Service (Scotland) Bill. There is Sheriff David Mackie's working group on the redesign of the children's hearings system; the final outcome of the working group review has not been published yet. There are also the barnahus proposals. There is a range of legislative reforms and programmes under way, and it is key that any proposals for the bill are aligned with them.

lain Nisbet: As I have alluded, my principal area of practice is additional support for learning in the education system. On the overlaps with that, I have already mentioned the co-ordinated support plan and the impact that taking children's services out of local authority control and into a national care service would have on that. There are a number of children who might require residential provision—including education, obviously, because that is often in a residential school setting-and we have to look at the different routes that people take into such provision, whether through the educational tribunal that has jurisdiction here or through a decision by social work or the children's panel. There are questions about how those overlap, because what happens if the children's panel takes a decision that is different from the decision that the educational tribunal takes? That is before we get into questions about going across boundaries, because there are a number of children in the residential school sector in Scotland who originally resided in England or Wales, and legal complexities arise in that. There is a lot to cover in any regulations, so it would be good to address those questions.

12:15

Michael Marra: The witnesses may feel that they have already covered this, but, for completeness, is there any other relevant existing primary legislation that might interact with the bill that needs to be considered?

lain Nisbet: I have mentioned the legislation on additional support for learning. That is the obvious one that springs to mind, because that is the area in which I practise and, in practice, it is not often well understood by social work services.

Michael Marra: [*Inaudible*.]—the list provided to the committee is not exhaustive, I think. It includes the Social Work (Scotland) Act 1968, the Children Act 1975, the Foster Children (Scotland) Act 1984, the Adoption and Children (Scotland) Act 2007, the Children's Hearings (Scotland) Act 2011, the Children and Young People (Scotland) Act 2014, the Carers (Scotland) Act 2016 and the Age of Criminal Responsibility (Scotland) Act 2019. There is interaction with a very complex area of primary legislation. Is it possible to deal properly with that in secondary legislation?

Cameron-Wong McDermott: I allude to my previous answer. You have highlighted the long list of legislation that is set out in schedule 3. It includes a broad range of different functions that could be taken away from local authorities and brought into a national care service.

The structural landscape that relates to social care has always been very complex. If things are done by way of regulation and delegated powers, there is a clear risk that the issues that have brought us to this table, and to a national care service, could be compounded and made worse.

Michael Marra: I note that Fraser McKinlay is nodding at that.

Fraser McKinlay: I, too, was going to make that point. If we go down this road, we need to be clear that it is going to make things simpler, not more complicated. An issue that we have had in integration, from day 1—again, I wrote reports about it—is that we have a very complex governance and delivery landscape. If, therefore, we are doing something on this scale, it needs to be clear that it is going to make things clearer and simpler. At the moment, as we have said, that is not clear from the bill. That work is under way.

Michael Marra: Convener, the list that was supplied at schedule 3 is useful; however, if the children's commissioner's office, in particular, has any further areas of concern, including about other legislation, it may want to write to the committee and supply those, as that would be particularly useful to the committee as well.

The Convener: Yes, that is perfectly fine.

Cameron-Wong McDermott: Thank you. I could certainly do that.

The Convener: On that, with the clear message about making things simpler, we will draw to a close. I thank lain Nisbet, Cameron-Wong McDermott and Fraser McKinlay for joining us. We will consider our final agenda items in private.

12:18

Meeting continued in private until 12:59.

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